07/17/2023 15 : 07

PAGE 1 / 43

FEC FORM 3	AND D	TOFRE		Office Use Only		
1. NAME OF COMMITTEE (in	TYPE OR PR full)	INT V	Example: If typing, over the lines.	type	12FE4M5	
Gerson for Co	ngress					
		<u> </u>				
ADDRESS (number ar	nd street)					
Check if dif than previo reported. (A	usly Burnsville				MN	55337
	CATION NUMBER V	CITY	`	ST	ATE 🔺	ZIP CODE
C C0052373	38	3. IS THIS REPORT	× NEW (N)	OR	AMEND (A)	ED STATE ▼ DISTRICT
4. TYPE OF RE (a) Quarterly R	PORT (Choose One) eports:	(b) 12-Day P	RE -Election Report	for the:		
April 15	5 Quarterly Report (Q1)		Primary (12P) Convention (120	C)	General (1 Special (12	
	Quarterly Report (Q2) r 15 Quarterly Report (Q3)	Election	M M /		Y Y Y Y	in the State of
	/ 31 Year-End Report (YE)		OST-Election Repor	t for the:		
-		0	General (30G)		Runoff (30	R) Special (30S)
Termina	ation Report (TER)	Election	on M M /	D D /	Y Y Y Y	in the State of
5. Covering Period	M M / D D D 01	/ Y Y Y Y 2023	through	м м 06	/ D D / 30	Y Y Y Y 2023
I certify that I have e Type or Print Name	examined this Report and Gerson, D of Treasurer		v knowledge and bei	lief it is true	e, correct and	l complete.
Signature of Treasure	Gerson, David, , ,		[Electronically File	ed] Dat	te	/ D D / Y Y Y Y 05 / 2023
·	false, erroneous, or incom	plete information m	ay subject the persor	n signing thi	s Report to th	e penalties of 52 U.S.C. §30109.
Office Use Only						FEC FORM 3 (Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements PAGE 2 / 43 FEC Form 3 (Revised 05/2016) Write or Type Committee Name Gerson for Congress М D D D D ž023 04 2023 06 30 01 Report Covering the Period: From: To: COLUMN A COLUMN B This Period **Election Cycle-to-Date** 6. Net Contributions (other than loans) **Total Contributions** (a) 0.00 0.00 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 0.00 0.00 (subtract Line 6(b) from Line 6(a)) 7. Net Operating Expenditures (a) Total Operating Expenditures 0.00 0.00 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 0.00 0.00 (subtract Line 7(b) from Line 7(a)) 8. Cash on Hand at Close of 0.00 Reporting Period (from Line 27)..... 9. Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 171460.36 Schedule C and/or Schedule D)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

Image#	2023071	795837	73252
mayem	202301	133031	1 3232

	FEC Form 3 (Revised 05/2016)	DETAILED SUMMARY PAGE of Receipts	PAGE 3 / 43
	or Type Committee Name		
Ge	rson for Congress		
Repo	rt Covering the Period: From:	04 / 01 / Y Y Y Y 2023 To:	M M / D D / Y
	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CC	ONTRIBUTIONS (other than loans) FROM:		
(a)	Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	0.00	0.00
	(ii) Unitemized	0.00	0.00
	(iii) TOTAL of contributions from individuals	, , , 0.00	0.00
(b) (c)		, , , 0.00	, , , 0.00
(0)	(such as PACs)	0.00	0.00
(d) (e)		0.00	0.00
	(add Lines 11(a)(iii), (b), (c), and (d))	0.00	0.00
	RANSFERS FROM OTHER JTHORIZED COMMITTEES	, , , 0.00	0.00 7 7
13. LC (a)			
(u)	Candidate	0.00	0.00
(b) (c)		0.00	0.00
	(add Lines 13(a) and (b))	0.00	0.00
EX	FFSETS TO OPERATING (PENDITURES efunds, Rebates, etc.)	0.00	0.00
	THER RECEIPTS ividends, Interest, etc.)	0.00	0.00
11	DTAL RECEIPTS (add Lines(e), 12, 13(c), 14, and 15)arry Total to Line 24, page 4)	0.00	0.00

FEC Form 3 (Revised 05/2016) COLUMN A COLUMN B **II. DISBURSEMENTS Total This Period Election Cycle-to-Date** 0.00 0.00 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER 0.00 0.00 AUTHORIZED COMMITTEES 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed 0.00 0.00 by the Candidate..... 0.00 (b) Of All Other Loans (c) TOTAL LOAN REPAYMENTS 0.00 (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: Individuals/Persons Other (a) 0.00 Than Political Committees 0.00 (b) Political Party Committees..... Other Political Committees (c) 0.00 (such as PACs) (d) TOTAL CONTRIBUTION REFUNDS 0.00 (add Lines 20(a), (b), and (c))..... 0.00 0.00 21. OTHER DISBURSEMENTS 22. TOTAL DISBURSEMENTS 0.00 (add Lines 17, 18, 19(c), 20(d), and 21)

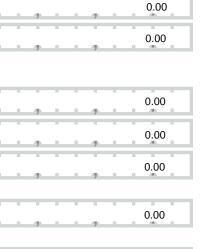
III. CASH SUMMARY

23.	CASH ON HAND AT BEGINNING OF REPORTING PERIOD		7		7	_	0.00
24	TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)		7		7	-	0.00
25.	SUBTOTAL (add Line 23 and Line 24)		7		7	-	0.00
26.	TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)		,		7	-	0.00
27.	CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)		7		7	-	0.00

DETAILED SUMMARY PAGE

of Disbursements

PAGE 4 / 43



0.00

Middle Initial)	Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER: (check only one) Transaction ID : SC/10.4392 Memo Item Election: 2012 Primary Primary
Middle Initial)	Memo Item Election: 2012 Frimary
Middle Initial)	Primary
	General
	Other (specify) V
State MN	ZIP Code 55337 Personal Funds of the Cand
Cumulative Pa	rment To Date Balance Outstanding at Close of This F
	0.00 16554.96
	ate Due Interest Rate Secured: (If none, enter 0)
M M / D	/ [⊻] 1/Ĭ/20Ž0 [≚] 0.00 % (apr) Yes ≭
) to Loan Source	
	Name of Employer
	Occupation
ZIP Code	Amount Guaranteed Outstanding:
	Name of Employer
	Occupation
ZIP Code	Amount Guaranteed Outstanding:
	Name of Employer
	Occupation
ZIP Code	Amount Guaranteed Outstanding:
	Name of Employer
	Occupation
ZIP Code	Amount Guaranteed Outstanding:
nly)	→ 16554.96
	MN Cumulative Pay D M M / D D / / to Loan Source ZIP Code ZIP Code ZIP Code

nage# 202001 1100001 10200				I	PAGE 6 OF 43	
SCHEDULE C (FEC Form 3) LOANS			Use separate schedule(s) for each category of the Detailed Summary Page			
IAME OF COMMITTEE (In F Gerson for Congress	,			Transa	ction ID : SC/10.4365	
LOAN SOURCE Full Na Gerson, David, Ad	•	ddle Initial)		Memo Item	Election: 2012 Primary General	
Mailing Address PO Box 1465					Other (specify)	
City Burnsville		State MN	ZIP Code 55337	9	Personal Funds of the Candidate	
Original Amount of Loar	1	Cumulative Pa	lyment To D	Date Bal	ance Outstanding at Close of This Perio	
	10000.00	7		0.00	10000.00	
TERMS Date Incu	rred	[Date Due	Interest Rat (If none, ente		
^M 07 ^M / ^D 19 ^D /	YŽ01Ž Y	M M / D D) / Y	INA .	0.00 % (apr) Yes X No	
List All Endorsers or G	uarantors (if any) t	o Loan Source				
1. Full Name (Last, Firs	t, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	ay 1 1 ay 1 1 ay 1	
2. Full Name (Last, First,	, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y	
3. Full Name (Last, First,	, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
4. Full Name (Last, First,	, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
SUBTOTALS This Period T TOTALS This Period (last p				L	10000.00 7 7	
Carry outstanding balance	only to LINE 3, Sci	nedule D, for thi	s line. If no	o Schedule D, carry for	ward to appropriate line of Summary.	

					PAGE 7 OF 43	
SCHEDULE C (FEC Form 3) _OANS				Use separate schedule(s) for each category of the Detailed Summary Page		
AME OF COMMITTEE (In Gerson for Congre	,			Transa	ction ID : SC/10.4381	
LOAN SOURCE Full Gerson, David, A	•	ddle Initial)		Memo Item	Election: 2012 Primary General	
Mailing Address PO Box 1465					Other (specify)	
City Burnsville		State MN	ZIP Code 55337	e	Personal Funds of the Candidate	
Original Amount of Lo	ban	Cumulative Pa	yment To E	Date Bal	ance Outstanding at Close of This Perio	
	5000.00	9		0.00	5000.00	
TERMS Date In	ocurred	[Date Due	Interest Rat (If none, ente		
^M 07 ^M / ^D 24 ^D	Ý Ž01Ž Ý	M M / D D) / Y	IN/A	.00 % (apr) Yes 🗴 No	
List All Endorsers or	Guarantors (if any) t	o Loan Source				
1. Full Name (Last, F				Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
2. Full Name (Last, Fir	rst, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y	
3. Full Name (Last, Fir	rst, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
4. Full Name (Last, Fir	rst, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y 1 1 y 1 1 x 1	
SUBTOTALS This Period					5000.00	
Carry outstanding balance	ce only to LINE 3, Sci	nedule D, for thi	s line. If n	o Schedule D, carry for	ward to appropriate line of Summary.	

		r	PAGE 8 OF 43			
SCHEDULE C (FEC Form 3) LOANS			Use separate schedule(s) for each category of the Detailed Summary Page			
ME OF COMMITTEE (In Full) Gerson for Congress			Transaction ID : SC/10.4468			
LOAN SOURCE Full Name (Last, First,	Middle Initial)		Iemo Item Election: 2012			
Gerson, David, Adam, ,		_	Y Primary General			
Mailing Address PO Box 1465			Other (specify) ▼			
City	State	ZIP Code				
Burnsville	MN	55337	Personal Funds of the Candidat			
Original Amount of Loan	Cumulative Pa	ment To Date	Balance Outstanding at Close of This Perio			
5.00		0.00	5.00			
TERMS Date Incurred	C		terest Rate Secured: none, enter 0)			
M07M / D24D / Y Ž01Ž Y	M M / D D	/ Y YNAY Y	0.00 % (apr) Yes X N			
List All Endorsers or Guarantors (if an	y) to Loan Source					
1. Full Name (Last, First, Middle Initial)		Name of Emplo	byer			
Mailing Address		Occupation				
City Stat	e ZIP Code	Amount Guaranteed Outstanding:				
2. Full Name (Last, First, Middle Initial)		Name of Emplo	byer			
Mailing Address		Occupation				
Maining Address						
City Stat	e ZIP Code	Amount Guaranteed Outstanding:	y			
3. Full Name (Last, First, Middle Initial)		Name of Emplo	byer			
Mailing Address		Occupation				
		Amount				
City Stat	e ZIP Code	Guaranteed Outstanding:				
4. Full Name (Last, First, Middle Initial)		Name of Emplo	byer			
Mailing Address		Occupation				
City Stat	e ZIP Code	Amount Guaranteed Outstanding:				
UBTOTALS This Period This Page (option						

	200			Г	PAGE 9 OF 43	
SCHEDULE C (FEC Form 3) LOANS			Use separate schedule(s) for each category of the Detailed Summary Page			
ame of committee Gerson for Congr	. ,			Transa	ction ID : SC/10.4128	
LOAN SOURCE Ful Gerson, David,	II Name (Last, First, Mic Adam, ,	ddle Initial)		Memo Item	Election: 2012 X Primary General	
Mailing Address PO Box 1465					Other (specify)	
City Burnsville		State MN	ZIP Code 55337	e	X Personal Funds of the Candidate	
Original Amount of	Loan	Cumulative Pa	lyment To D	Date Bala	ance Outstanding at Close of This Perio	
	5000.00	3		0.00	5000.00	
TERMS Date	Incurred	[Date Due	Interest Rat (If none, ente		
^M 07 ^M / ^D 26 ^D	′ <u> </u>	M M / D C) / Y	11/4	.00 % (apr) Yes X No	
List All Endorsers o	or Guarantors (if any) t	o Loan Source				
1. Full Name (Last,				Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y	
2. Full Name (Last, F	First, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y 1 1 y 1 1 x 1	
3. Full Name (Last, F	First, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	-y - i - y - i - x - i	
4. Full Name (Last, F	First, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y 1 y 1 x 1	
	d This Page (optional). Ist page in this line only				5000.00	
Carry outstanding bala	nce only to LINE 3, Scl	nedule D, for thi	s line. If n	o Schedule D, carry for	ward to appropriate line of Summary.	

-			г		PAGE 10 OF 43	
SCHEDULE C (FEC Form 3) .OANS				Use separate schedule(s) for each category of the Detailed Summary Page		
ME OF COMMITTEE (In Full erson for Congress)			Transa	ction ID : SC/10.4389	
LOAN SOURCE Full Name Gerson, David, Adar	•	dle Initial)		Memo Item	Election: 2012 X Primary General	
Mailing Address PO Box 1465					Other (specify)	
City Burnsville		State MN	ZIP Code 55337	1	Personal Funds of the Candidate	
Original Amount of Loan	5000.00	Cumulative Pa	yment To Da	ate Bala	ance Outstanding at Close of This Peric	
TERMS Date Incurre	<u>A</u>		Date Due	Interest Rate	<u> </u>	
M08 ^M / D01 ^D / Y	Ž012 Y	M M / D D	_	na	r 0) .00 % (apr) Yes X No	
List All Endorsers or Guar	rantors (if any) to	b Loan Source				
1. Full Name (Last, First, N	Viddle Initial)		1	Name of Employer		
Mailing Address			0	Occupation		
City	State	ZIP Code		Amount Guaranteed Dutstanding:	7 7	
2. Full Name (Last, First, N	liddle Initial)		٦	Name of Employer		
Mailing Address			(Dccupation		
City	State	ZIP Code		Amount Guaranteed Dutstanding:	7 7 7 7 7 7 7	
3. Full Name (Last, First, N	liddle Initial)	·	١	Name of Employer		
Mailing Address			(Occupation		
City	State	ZIP Code	(Amount Guaranteed Dutstanding:	y	
4. Full Name (Last, First, N	liddle Initial)	-!	١	Name of Employer		
Mailing Address			(Occupation		
City	State	ZIP Code		Amount Guaranteed Dutstanding:	g	
JBTOTALS This Period This					5000.00	

nage# 20200111000011020	•			I	PAGE 11 OF 43		
SCHEDULE C (FEC Form 3) LOANS				Use separate schedule(s) for each category of the Detailed Summary Page			
AME OF COMMITTEE (In Gerson for Congres	,			Transad	ction ID : SC/10.4129		
LOAN SOURCE Full N Gerson, David, A	•	ddle Initial)		🗌 Memo Item	Election: 2012 X Primary General		
Mailing Address PO Box 1465					Other (specify)		
City Burnsville		State MN	ZIP Code 55337	9	X Personal Funds of the Candidate		
Original Amount of Loa	an	Cumulative Pa	lyment To D	Date Bala	ance Outstanding at Close of This Perio		
<u> </u>	5000.00	3		0.00	5000.00		
TERMS Date Inc	curred	[Date Due	Interest Rat (If none, ente			
^M 08 ^M / ^D 10 ^D /	ΥŽ01Ž Υ	M M / D D) / Y	11/4	.00 % (apr) Yes 🗴 No		
List All Endorsers or C	Guarantors (if any) t	o Loan Source					
1. Full Name (Last, Fir	st, Middle Initial)			Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:			
2. Full Name (Last, Firs	t, Middle Initial)			Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	y 1 1 y 1 1 x 1		
3. Full Name (Last, Firs	t, Middle Initial)			Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y		
4. Full Name (Last, Firs	t, Middle Initial)			Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	y 1 1 y 1 1 x 1		
SUBTOTALS This Period					5000.00 7 7		
Carry outstanding balance	e only to LINE 3, Sch	nedule D, for thi	s line. If no	o Schedule D, carry for	ward to appropriate line of Summary.		

	- 1				PAGE 12 OF 43	
CHEDULE C (FEC Form 3) DANS				Use separate schedule for each category of th Detailed Summary Pag	ie (check only one) × 13a	
ME OF COMMITTEE (In Full) Serson for Congress				Transac	tion ID : SC/10.4470	
LOAN SOURCE Full Name (Last, Gerson, David, Adam, ,	First, Mid	dle Initial)		🗌 Memo Item	Election: 2012 X Primary General	
Mailing Address PO Box 1465					Other (specify)	
City Burnsville		State MN	ZIP Code 55337	e	X Personal Funds of the Candidate	
Original Amount of Loan	5.00	Cumulative Pay	yment To E	Date Bala	nce Outstanding at Close of This Perio 6.00	
TERMS Date Incurred M08 ^M / P10 ^D / Y Ž01Ž	Y	M M / D D	Date Due	Interest Rate (If none, enter	0) 00 0/ / 0	
List All Endorsers or Guarantors 1. Full Name (Last, First, Middle I		Loan Source		Name of Employer		
Mailing Address				Occupation		
City	State ZIP Code			Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Middle In	itial)			Name of Employer		
Mailing Address				Occupation Amount		
City	State	ZIP Code		Guaranteed Outstanding: 7 7		
3. Full Name (Last, First, Middle In	itial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
4. Full Name (Last, First, Middle In	itial)	L		Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	7 7 7 7	
UBTOTALS This Period This Page (H	6.00 7 7 7 7	

0			1		
CHEDULE C (FEC Form 3) DANS			Use separate schedul for each category of t Detailed Summary Pa	the (check only one) × 13a	
ME OF COMMITTEE (In erson for Congres	,			Transa	ction ID : SC/10.4130
LOAN SOURCE Full N Gerson, David, Ac	•	ddle Initial)		Memo Item	Election: 2012 X Primary General
Mailing Address PO Box 1465					Other (specify)
City Burnsville		State MN	ZIP Code 55337		Personal Funds of the Candidate
Original Amount of Loa	n	Cumulative P	ayment To D	ate Bala	ance Outstanding at Close of This Peric
	1000.00	,		0.00	1000.00
TERMS Date Inco	urred		Date Due	Interest Rat (If none, ente	
M08 ^M / D17 ^D /	YŽ01Ž Y	M M / D	D / Y Y		.00 % (apr) Yes X No
List All Endorsers or G	· • • •	o Loan Source		Name of Employer	
1. Full Name (Last, Fire	st, Middle Initial)		1	vame of Employer	
Mailing Address			(Dccupation	
City	State	ZIP Code		Amount Guaranteed Dutstanding:	y
2. Full Name (Last, First	t, Middle Initial)		1	Name of Employer	
Mailing Address			(Dccupation	
City	State	ZIP Code		Amount Guaranteed Dutstanding:	
3. Full Name (Last, First	t, Middle Initial)		1	Name of Employer	
Mailing Address				Dccupation	
City	State	ZIP Code	(Amount Guaranteed Dutstanding:	y y
4. Full Name (Last, First	t, Middle Initial)		1	Name of Employer	
Mailing Address			(Dccupation	
City	State	ZIP Code	(Amount Guaranteed Dutstanding:	y 1 1 y 1 1 x 1
JBTOTALS This Period T					1000.00

					PAGE 14 OF 43
CHEDULE C (FEC Form 3) DANS			Use separate schedule for each category of th Detailed Summary Pag	ne (check only one) × 13a	
ME OF COMMITTEE (In Full) erson for Congress				Transac	tion ID : SC/10.4131
LOAN SOURCE Full Name (Gerson, David, Adam,		dle Initial)		🗌 Memo Item	Election: 2012 X Primary General
Mailing Address PO Box 1465					Other (specify)
City Burnsville		State MN	ZIP Code 55337	9	X Personal Funds of the Candidate
Original Amount of Loan	1000.00	Cumulative Pa	yment To D	Date Bala	nce Outstanding at Close of This Perio
TERMS Date Incurred M08 ^M / D20 ^D /	ž01 <i>ž</i> ^v		Date Due	Interest Rate (If none, enter NA ^Y Y 0.0	
List All Endorsers or Guaran 1. Full Name (Last, First, Mid		Loan Source		Name of Employer	
Mailing Address				Occupation	
City	State ZIP Code			Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Mid	dle Initial)			Name of Employer	
Mailing Address				Occupation Amount	
City	State	ZIP Code		Guaranteed	7
3. Full Name (Last, First, Mid	dle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	
4. Full Name (Last, First, Mid	dle Initial)	ł		Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	9 9 9 9 9 9
JBTOTALS This Period This P				H	1000.00

102001110000110204			1			
CHEDULE C (FEC Form 3) .OANS				Use separate schedul for each category of t Detailed Summary Pa	the (check only one) × 13a	
IAME OF COMMITTEE (In F Gerson for Congress	,			Transa	ction ID : SC/10.4442	
LOAN SOURCE Full Na Gerson, David, Ad	•	dle Initial)		Memo Item	Election: 2014	
Mailing Address PO Box 1465					Other (specify) V	
City Burnsville		State MN	ZIP Code 55337		Personal Funds of the Candidate	
Original Amount of Loar	479.33	Cumulative Pa	yment To D	ate Bal	ance Outstanding at Close of This Perio 479.33	
TERMS Date Incu		,	Date Due	Interest Rat	<u> </u>	
M02 ^M / D22 ^D /	Y Ž013 Y	/ M / D D	/ ¥ 1/1	(If none, ente /20ž0 ^v 0	0.00	
List All Endorsers or G	uarantors (if any) to	Loan Source				
1. Full Name (Last, Firs	t, Middle Initial)		1	Name of Employer		
Mailing Address				Decupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
2. Full Name (Last, First,	, Middle Initial)		1	Name of Employer		
Mailing Address				Dccupation		
City	State	State ZIP Code		Amount Guaranteed Outstanding:		
3. Full Name (Last, First,	, Middle Initial)		1	Name of Employer		
Mailing Address			(Dccupation		
City	State	ZIP Code	(Amount Guaranteed Outstanding:		
4. Full Name (Last, First,	, Middle Initial)		1	Name of Employer		
Mailing Address			(Occupation		
City	State	ZIP Code	(Amount Guaranteed Dutstanding:	y - 1 - y - 1 - * - 1	
SUBTOTALS This Period T				L	479.33 7 7 7	
Carry outstanding balance	only to LINE 3, Sch	edule D, for this	s line. If no	Schedule D, carry for	ward to appropriate line of Summary.	

0					PAGE 16 OF 43
CHEDULE C (FEC Form 3) OANS			Use separate schedul for each category of t Detailed Summary Pa	the (check only one)	
ME OF COMMITTEE (In Ful	1)			Transa	ction ID : SC/10.4444
LOAN SOURCE Full Nam Gerson, David, Ada	•	dle Initial)		Memo Item	Election: 2014 Primary General
Mailing Address PO Box 1465					Other (specify)
City Burnsville		State MN	ZIP Code 55337	e	Personal Funds of the Candidate
Original Amount of Loan	0000.00	Cumulative Pa	ayment To D		ance Outstanding at Close of This Period
TERMS Date Incurre	3000.00		Date Due	0.00 Interest Rat	3000.00 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
M02 ^M / D25 ^D / Y			_	(If none, ente	er 0)
List All Endorsers or Gua	rantors (if any) to	Loan Source	;		
1. Full Name (Last, First,	Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
2. Full Name (Last, First, M	liddle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y 1 y 1 x 1
3. Full Name (Last, First, N	liddle Initial)	1		Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
4. Full Name (Last, First, N	liddle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y
UBTOTALS This Period This					3000.00

CHEDULE C (FEC Form 3) OANS				Use separate schedu for each category of Detailed Summary Pa	the (check only one) × 13a	
AME OF COMMITTEE (III Gerson for Congre	,			Transa	action ID : SC/10.4464	
LOAN SOURCE Full Gerson, David, A	•	ddle Initial)		Memo Item	Election: 2014	
Mailing Address PO Box 1465					Other (specify)	
City Burnsville		State MN	ZIP Code 55337	9	Personal Funds of the Candidate	
Original Amount of Lo	oan	Cumulative Pa	ayment To D	Date Bal	lance Outstanding at Close of This Perio	
	3000.00	3	7	0.00	3000.00	
TERMS Date In	ncurred	[Date Due	Interest Rat (If none, ente		
^M 03 ^M / ^D 26 ^D	′ ^Υ Ž013΄ ^Υ	M M / D D	2 / Y 1/1	Ĭ/20Ž0 Ÿ C	0.00 % (apr) Yes X No	
List All Endorsers or	Guarantors (if any) t	o Loan Source				
1. Full Name (Last, F	irst, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
2. Full Name (Last, Fi	rst, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	e ZIP Code		Amount Guaranteed Outstanding:		
3. Full Name (Last, Fi	rst, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
4. Full Name (Last, Fin	rst, Middle Initial)	1		Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y 1 y 1 x 1	
SUBTOTALS This Period					3000.00	
Carry outstanding balan	ce only to LINE 3, Sci	nedule D, for thi	is line. If no	o Schedule D, carry for	ward to appropriate line of Summary.	

HEDULE C (FEC Form 3)			PAGE 18 OF 43		
DANS		Use separate schedu for each category of Detailed Summary Pa	the (check only one) × 13a		
ME OF COMMITTEE (In Full) Ferson for Congress		Transa	action ID : SC/10.4502		
LOAN SOURCE Full Name (Last, First, M	iddle Initial)	Memo Iten			
Gerson, David, Adam, ,			Y Primary General		
Mailing Address PO Box 1465			Other (specify)		
City	State	ZIP Code			
Burnsville	MN	55337	Personal Funds of the Candidate		
Original Amount of Loan	Cumulative Pa	nent To Date Ba	lance Outstanding at Close of This Period		
4000.00		0.00	4000.00		
TERMS Date Incurred	C	te Due Interest Ra (If none, ente			
M04 ^M / D18 ^D / Y Ž013 Y	M M / D D		0.00 % (apr) Yes X No		
List All Endorsers or Guarantors (if any)	to Loan Source				
1. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
		Amount Guaranteed			
City State	ZIP Code				
2. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
		Amount			
City State	ZIP Code	Guaranteed Outstanding:			
3. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
		Amount			
City State	ZIP Code	Guaranteed Outstanding:	g g		
4. Full Name (Last, First, Middle Initial)	!	Name of Employer			
Mailing Address		Occupation			
		Amount			
City State	ZIP Code	Guaranteed Outstanding:	g		
UBTOTALS This Period This Page (optional)			4000.00		

lage# 202001 11 00001 102				r		
CHEDULE C (FEC Form 3) OANS				Use separate schedul for each category of t Detailed Summary Pa	the (check only one) × 13a	
ame of committee (in Gerson for Congre	,			Transa	ction ID : SC/10.4545	
LOAN SOURCE Full Gerson, David, A	•	ddle Initial)		Memo Item	Election: 2014 Primary General	
Mailing Address PO Box 1465					Other (specify)	
City Burnsville		State MN	ZIP Code 55337	e	Personal Funds of the Candidate	
Original Amount of Lo	ban	Cumulative Pa	yment To D	Date Bala	ance Outstanding at Close of This Perio	
	4000.00			0.00	4000.00	
TERMS Date In	ocurred	C	Date Due	Interest Rat (If none, ente		
^M 05 ^M / ^D 13 ^D	⁷ Ž013 ^Y	M M / D D	0 / Y 1	ў1/20 ^ч 0	.00 % (apr) Yes X No	
List All Endorsers or	Guarantors (if any) t	o Loan Source				
1. Full Name (Last, F	irst, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
2. Full Name (Last, Fir	rst, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	te ZIP Code		Amount Guaranteed Outstanding:		
3. Full Name (Last, Fir	rst, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	State ZIP Code		Amount Guaranteed Outstanding:		
4. Full Name (Last, Fir	rst, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y 1 1 y 1 1 x 1	
UBTOTALS This Period					4000.00	
Carry outstanding baland	ce only to LINE 3, Sch	nedule D, for thi	s line. If no	o Schedule D, carry for	ward to appropriate line of Sun	

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CHEDULE C (FEC Form 3) OANS				Use separate schedu for each category of Detailed Summary Pa	the (check only one) × 13a	
ame of committee (i Gerson for Congre	,			Transa	ction ID : SC/10.4591	
LOAN SOURCE Full Gerson, David, A	Name (Last, First, Mic Adam, ,	ddle Initial)		Memo Item	Election: 2014 Primary General	
Mailing Address PO Box 1465					Other (specify)	
City Burnsville		State MN	ZIP Cod 55337	e	Personal Funds of the Candidate	
Original Amount of L	oan	Cumulative Pa	yment To E	Date Bal	ance Outstanding at Close of This Perio	
	5000.00			0.00	5000.00	
TERMS Date In M06 ^M / D10 ^D	ncurred	M M / D C	Date Due	Interest Rat (If none, ente)/1/20 Y	er 0)	
List All Endorsers or	Guarantors (if any) t	o Loan Source				
1. Full Name (Last, F				Name of Employer		
Mailing Address				Occupation		
City	State ZIP Code			Amount Guaranteed Outstanding:		
2. Full Name (Last, Fi	rst, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
3. Full Name (Last, Fi	rst, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
4. Full Name (Last, Fi	rst, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y - 1 - y - 1 - * - 1	
SUBTOTALS This Period					5000.00	
Carry outstanding balan	ce only to LINE 3, Sci	nedule D, for thi	s line. If n	o Schedule D, carry for	ward to appropriate line of Summary	

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CHEDULE C (FEC Form 3) OANS			Use separate schedu for each category of Detailed Summary P	f the (check only one) × 13a	
ME OF COMMITTI	· · · ·			Trans	action ID : SC/10.4622
LOAN SOURCE Gerson, Davi	Full Name (Last, First, Mic d, Adam, ,	ddle Initial)		Memo Iter	m Election: 2014
Mailing Address PO Box 1465					Other (specify)
City Burnsville		State MN	ZIP Code 55337	;	Personal Funds of the Candidat
Original Amount	of Loan	Cumulative Pa	ayment To D	ate Ba	alance Outstanding at Close of This Perio
7	131.12	9		0.00	131.12
TERMS Da	ate Incurred		Date Due	Interest Ra (If none, ent	
^M 06 ^M ′ ^D 30) ^D ′ ^Y Ž013 ^Y	M M / D	D / Y 1	1/20	0.00 % (apr) Yes X N
	s or Guarantors (if any) to	o Loan Source		Name of Employer	
1. Full Name (La	st, First, Middle Initial)		1	vame of Employer	
Mailing Addre	SS			Occupation	
City	State	ZIP Code		Amount Guaranteed Dutstanding:	· · · · · · · · · ·
2. Full Name (Las	t, First, Middle Initial)		1	Name of Employer	
Mailing Addres	s		(Occupation	
City	State	ZIP Code		Amount Guaranteed Dutstanding:	
3. Full Name (Las	st, First, Middle Initial)		1	Name of Employer	
Mailing Addres	S			Occupation	
City	State	ZIP Code		Amount Guaranteed Dutstanding:	- y - 1 - y - 1 - x - 1
4. Full Name (Las	t, First, Middle Initial)		1	Name of Employer	
Mailing Addres	S			Occupation	
City	State	ZIP Code		Amount Guaranteed Dutstanding:	9 1 9 1 7
	eriod This Page (optional).				, , , , , , , , , , , , , , , , , , , ,

					PAGE 22 OF 43
CHEDULE C (FEC Form 3) DANS			Use separate schedule for each category of th Detailed Summary Pag	e(s) FOR LINE NUMBER: (check only one)	
ME OF COMMITTEE (In Full) erson for Congress				Transac	tion ID : SC/10.5169
LOAN SOURCE Full Name (La Gerson, David, Adam, ,	st, First, Mic	ddle Initial)		Memo Item	Election: 2014 X Primary General
Mailing Address PO Box 1465					Other (specify)
City Burnsville		State MN	ZIP Code 55337	9	X Personal Funds of the Candidate
Original Amount of Loan	000.00	Cumulative Pa	yment To D	Date Bala	nce Outstanding at Close of This Peric
TERMS Date Incurred M07 ^M / D05 ^D Y Z00		M M / D D	Date Due	Interest Rate (If none, enter)/1/20 Y 0.	
List All Endorsers or Guaranto 1. Full Name (Last, First, Midd		o Loan Source		Name of Employer	
Mailing Address				Occupation	
City	State ZIP Code			Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Middle	e Initial)			Name of Employer	
Mailing Address			_	Occupation Amount	
City	State	ZIP Code		Guaranteed	7 7 7 7
3. Full Name (Last, First, Middle	e Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	
4. Full Name (Last, First, Middle	e Initial)	ŀ		Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	9 9 9 9 1 1
JBTOTALS This Period This Pag				H	5000.00 7 7 7

HEDULE C (FEC Form 3)		Use	e separate schedu	PAGE 23 OF 43	
DANS			each category of ailed Summary Pa	the (check only one) × 13a	
ME OF COMMITTEE (In Full) erson for Congress			Transa	ction ID : SC/10.5170	
LOAN SOURCE Full Name (Last, First, Mic	Idle Initial)		Memo Item		
Gerson, David, Adam, ,				Y Primary General	
Mailing Address PO Box 1465				Other (specify)	
City	State	ZIP Code			
Burnsville	MN	55337		Personal Funds of the Candidate	
Original Amount of Loan	Cumulative Pa	ment To Date	Bal	ance Outstanding at Close of This Perio	
5000.00			0.00	5000.00	
TERMS Date Incurred	C	ate Due	Interest Rat (If none, ente		
M07M / D29D / Y Ž013 Y	M M / D D	′ [⊻] 1ў́1/2Ŏ	Y O	.00 % (apr) Yes ✗ №	
List All Endorsers or Guarantors (if any) to	o Loan Source				
1. Full Name (Last, First, Middle Initial)		Name	of Employer		
Mailing Address		Occup	ation		
		Amour Guarar			
City State	ZIP Code		Outstanding:		
2. Full Name (Last, First, Middle Initial)		Name	of Employer		
Mailing Address		Occup	ation		
		Amour			
City State	ZIP Code	Guarar Outsta		y	
3. Full Name (Last, First, Middle Initial)		Name	of Employer		
Mailing Address		Occup	ation		
		Amour	nt		
City State	ZIP Code	Guarar Outsta		y y y y	
4. Full Name (Last, First, Middle Initial)		Name	of Employer		
Mailing Address		Occup	ation		
		Amour	nt		
City State	ZIP Code	Guarar Outsta		g	
JBTOTALS This Period This Page (optional) DTALS This Period (last page in this line only			······	5000.00	

5			1		PAGE 24 OF 43
CHEDULE C (FEC Form 3) OANS			Use separate schedule(s) for each category of the Detailed Summary Page		
ME OF COMMITTEE (In Fu erson for Congress	ll)			Transa	ction ID : SC/10.5172
LOAN SOURCE Full Nam Gerson, David, Ada	•	Idle Initial)		Memo Item	Election: 2014
Mailing Address PO Box 1465					Other (specify)
City Burnsville		State MN	ZIP Code 55337		Personal Funds of the Candidate
Original Amount of Loan		Cumulative P	ayment To D	ate Bal	ance Outstanding at Close of This Perio
	5000.00			0.00	5000.00
TERMS Date Incurre	ed		Date Due	Interest Rat (If none, ente	
M08M / D19D / Y	2013 ^Y	M M / D	D / Y 17	1/2Ŏ ^Ŷ 0	0.00 → % (apr) Yes ¥ No
List All Endorsers or Gua 1. Full Name (Last, First,		o Loan Source		Name of Employer	
Mailing Address					
Maning Address				•	
City	State	ZIP Code		Amount Guaranteed Dutstanding:	
2. Full Name (Last, First, N	Middle Initial)		1	Name of Employer	
Mailing Address			(Dccupation	
City	State	ZIP Code		Amount Guaranteed Dutstanding:	y y
3. Full Name (Last, First, N	Middle Initial)		1	Name of Employer	
Mailing Address				Dccupation	
City	State	ZIP Code	(Amount Guaranteed Dutstanding:	y y
4. Full Name (Last, First, N	Aiddle Initial)		1	Name of Employer	
Mailing Address				Dccupation	
City	State	ZIP Code	(Amount Guaranteed Dutstanding:	g 1 1 g 1 1 x 1
JBTOTALS This Period This					5000.00

3					PAGE 25 OF 43
CHEDULE C (FEC Form 3) OANS			Use separate schedule for each category of t Detailed Summary Pag	e(s) he (check only one)	
ME OF COMMITTEE (In Ful))			Transac	ction ID : SC/10.5173
LOAN SOURCE Full Nam Gerson, David, Adai	•	dle Initial)		🗌 Memo Item	Election: 2014 X Primary General
Mailing Address PO Box 1465					Other (specify)
City Burnsville		State MN	ZIP Code 55337	9	Personal Funds of the Candidate
Original Amount of Loan	5000.00	Cumulative Pa	ayment To D	Date Bala	ance Outstanding at Close of This Perio
TERMS Date Incurre			Date Due	Interest Rate	5000.00
M09 ^M / D12 ^D / Y	ž013 ^v		_	(If none, enter	n 0) .00
List All Endorsers or Gua	rantors (if any) to	b Loan Source	;		
1. Full Name (Last, First, I	Viddle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
2. Full Name (Last, First, M	liddle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	g
3. Full Name (Last, First, M	liddle Initial)	-		Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
4. Full Name (Last, First, N	1iddle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	g
UBTOTALS This Period This					5000.00

					PAGE 26 OF 43
CHEDULE C (FEC Form 3) OANS			Use separate schedul for each category of t Detailed Summary Pag	e(s) FOR LINE NUMBER: the (check only one) × 13a	
ME OF COMMITTEE (In Ful))			Transad	ction ID : SC/10.5174
LOAN SOURCE Full Nam Gerson, David, Adai	•	dle Initial)		Memo Item	Election: 2014 Frimary General
Mailing Address PO Box 1465					Other (specify)
City Burnsville		State MN	ZIP Code 55337	9	Personal Funds of the Candidate
Original Amount of Loan		Cumulative Pa	ayment To D	Date Bala	ance Outstanding at Close of This Perio
<u> </u>	3000.00		7	0.00	3000.00
TERMS Date Incurre M09 ^M / 30 ^D /	d Ž013 ^v		Date Due	Interest Rate (If none, ente) (1/20 Y	r 0) .00
List All Endorsers or Gua	rantors (if any) to	b Loan Source	Э		
1. Full Name (Last, First, I	Viddle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	
2. Full Name (Last, First, M	1iddle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
3. Full Name (Last, First, M	1iddle Initial)	ł		Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
4. Full Name (Last, First, N	1iddle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y 1 y 1 x 1
UBTOTALS This Period This					3000.00

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CHEDULE C (FEC Form 3) OANS			Use separate schedule(s) for each category of the Detailed Summary Page		
ME OF COMMITTEE (In Full) Serson for Congress			Transac	tion ID : SC/10.5202	
LOAN SOURCE Full Name (Last, First, M	1iddle Initial)		Memo Item	Election: 2014	
Gerson, David, Adam, ,				Frimary General	
Mailing Address PO Box 1465				Other (specify) v	
City	State	ZIP Code	Э		
Burnsville	MN	55337		Personal Funds of the Candidate	
Original Amount of Loan	Cumulative Pa	iyment To D	Date Bala	nce Outstanding at Close of This Period	
5000.00	9		0.00	5000.00	
TERMS Date Incurred	[Date Due	Interest Rate (If none, enter		
M10 ^M / D04 ^D / Y Ž013 Y	M M / D D	° ′ [°] 1	ÿ1/2Ŏ Ÿ 0.	00 % (apr) Yes 🗶 No	
List All Endorsers or Guarantors (if any)	to Loan Source				
1. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
			Amount		
City State			Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
			Amount		
City State	ZIP Code		Guaranteed Outstanding:	9 9	
3. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
			Amount		
City State	ZIP Code		Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
City State	ZIP Code		Amount Guaranteed		
Only			Outstanding:	9 9 9	
UBTOTALS This Period This Page (optional			H	5000.00	

				PAGE 28 OF 43	
CHEDULE C (FEC Form 3) OANS			Use separate schedule for each category of t Detailed Summary Pag	e(s) FOR LINE NUMBER: he (check only one)	
AME OF COMMITTEE (In Full) Gerson for Congress			Transac	ction ID : SC/10.5203	
LOAN SOURCE Full Name (Last, First, Mic Gerson, David, Adam, ,	Idle Initial)		Memo Item	Election: 2014	
Mailing Address PO Box 1465				General Other (specify) ▼	
City	State	ZIP Code	9		
Burnsville	MN	55337		Personal Funds of the Candidate	
Original Amount of Loan	Cumulative Pay	yment To D	Date Bala	ance Outstanding at Close of This Period	
5000.00			0.00	5000.00	
TERMS Date Incurred	D	ate Due	Interest Rate (If none, enter		
M10 ^M / D16 ^D / Y Ž013 Y	M M / D D	/ Y 1	/1/20	00 % (apr) Yes X No	
List All Endorsers or Guarantors (if any) to	o Loan Source				
1. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
City State	State ZIP Code		Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
City State	ZIP Code		Amount Guaranteed Outstanding:	y	
3. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
City State	ZIP Code		Amount Guaranteed Outstanding:	y y	
4. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
City State	ZIP Code		Amount Guaranteed Outstanding:	y	
SUBTOTALS This Period This Page (optional))			5000.00	

				PAGE 29 OF 43	
CHEDULE C (FEC Form 3) DANS		Use separate schedul for each category of t Detailed Summary Pag	e(s) he (check only one)		
AME OF COMMITTEE (In Full) Gerson for Congress			Transad	ction ID : SC/10.5204	
LOAN SOURCE Full Name (Last, First, Mic Gerson, David, Adam, ,	Idle Initial)		Memo Item	Election: 2014	
Mailing Address PO Box 1465				Other (specify) ▼	
City Burnsville	State MN	ZIP Code 55337	9	Personal Funds of the Candidate	
Original Amount of Loan	Cumulative Pa	yment To D	Date Bala	ance Outstanding at Close of This Period	
5000.00	· · · ·		0.00	5000.00	
TERMS Date Incurred	C	Date Due	Interest Rate (If none, ente		
M10M / D23D / Y Ž013 Y	M M / D D	/ Y 1	ў1/2Ŏ [×] 0.	.00 % (apr) Yes X No	
List All Endorsers or Guarantors (if any) t	o Loan Source				
1. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
City State	State ZIP Code		Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
City State	ZIP Code		Amount Guaranteed Outstanding:	y	
3. Full Name (Last, First, Middle Initial)	•		Name of Employer		
Mailing Address			Occupation		
City State	ZIP Code		Amount Guaranteed Outstanding:	y	
4. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
City State	ZIP Code		Amount Guaranteed Outstanding:	y	
SUBTOTALS This Period This Page (optional).)			5000.00	

					PAGE 30 OF 43
CHEDULE C (FEC Form 3) DANS			Use separate schedule for each category of th Detailed Summary Pag	e(s) FOR LINE NUMBER:	
ME OF COMMITTEE (In Full) erson for Congress				Transac	tion ID : SC/10.5205
LOAN SOURCE Full Name (I Gerson, David, Adam,		dle Initial)		Memo Item	Election: 2014 X Primary General
Mailing Address PO Box 1465					Other (specify)
City Burnsville		State MN	ZIP Code 55337	9	X Personal Funds of the Candidat
Original Amount of Loan	5000.00	Cumulative Pay	yment To D	0.00 Bala	nce Outstanding at Close of This Peric
	2013 Y	M M / D D	Date Due	Interest Rate (If none, enter //1/20 Y 0.1	
List All Endorsers or Guaran 1. Full Name (Last, First, Mic		Loan Source		Name of Employer	
Mailing Address				Occupation	
City	State	State ZIP Code		Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Mide	dle Initial)			Name of Employer	
Mailing Address				Occupation Amount	
City	State	ZIP Code		Guaranteed	y
3. Full Name (Last, First, Mide	dle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
4. Full Name (Last, First, Mide	dle Initial)	l		Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	9 9 9 9 9 9
JBTOTALS This Period This Pa				H	5000.00

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CHEDULE C (FEC Form 3) OANS			Use separate schedule(s) for each category of the Detailed Summary Page			
AME OF COMMITTEE (In Gerson for Congress	•			Transad	ction ID : SC/10.5206	
LOAN SOURCE Full Na Gerson, David, Ac	•	ddle Initial)		🗌 Memo Item	Election: 2014 X Primary General	
Mailing Address PO Box 1465					Other (specify)	
City Burnsville		State MN	ZIP Code 55337	3	Personal Funds of the Candidate	
Original Amount of Loa	n	Cumulative Pa	lyment To D	Pate Bala	ance Outstanding at Close of This Perio	
	4000.00			0.00	4000.00	
TERMS Date Incu	urred	C	Date Due	Interest Rate (If none, ente		
M11M / D13D /	^ү Ž013 ^ү	M M / D D	2 / Y 1)	ý1/2Ŏ Ÿ 0.	.00 % (apr) Yes X No	
List All Endorsers or G	iuarantors (if any) t	o Loan Source				
1. Full Name (Last, Firs	st, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	State ZIP Code		Amount Guaranteed Outstanding:		
2. Full Name (Last, First	, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
3. Full Name (Last, First	, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	State ZIP Code		Amount Guaranteed Outstanding:		
4. Full Name (Last, First	, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	-y	
SUBTOTALS This Period T					4000.00	
Carry outstanding balance	only to LINE 3, Sch	nedule D, for thi	s line. If no	o Schedule D, carry for	ward to appropriate line of Summa	

CHEDULE C (FEC Form 3)				PAGE 32 OF 43	
DANS			Use separate schedule for each category of th Detailed Summary Pag	^{1e} (check only one) × 13a	
ME OF COMMITTEE (In Full) Gerson for Congress			Transac	tion ID : SC/10.5207	
LOAN SOURCE Full Name (Last, First, Mi	ddle Initial)		Memo Item	Election: 2014	
Gerson, David, Adam, ,				Y Primary General	
Mailing Address PO Box 1465				Other (specify) V	
City	State	ZIP Code	9		
Burnsville	MN	55337		Personal Funds of the Candidate	
Original Amount of Loan	Cumulative Pag	ayment To D	ate Bala	nce Outstanding at Close of This Period	
3000.00			0.00	3000.00	
TERMS Date Incurred	C	Date Due	Interest Rate (If none, enter		
M11 ^M / D19 ^D / Y Ž013 Y	M M / D D	° ′ [°] 1∕	ý1/2Ŏ Ÿ 0.0		
List All Endorsers or Guarantors (if any)	to Loan Source				
1. Full Name (Last, First, Middle Initial)		1	Name of Employer		
Mailing Address			Occupation		
City State	State ZIP Code		Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address		(Occupation		
		H	Amount		
City State	ZIP Code		Guaranteed	y	
3. Full Name (Last, First, Middle Initial)		1	Name of Employer		
Mailing Address		(Occupation		
			Amount		
City State	ZIP Code		Guaranteed Outstanding:	y	
4. Full Name (Last, First, Middle Initial)	I	1	Name of Employer		
Mailing Address			Occupation		
City State	ZIP Code	(Amount Guaranteed Outstanding:	y 1 1 y 1 1 x 1	
UBTOTALS This Period This Page (optional) OTALS This Period (last page in this line on			H	3000.00 7 7 7 *	

	dle Initial) State MN	ZIP Code	Use separate schedule for each category of th Detailed Summary Pag Transac	he (check only one) \times 13a	
	State			Election: 2014	
	State		Memo Item	Primary General	
		ZID Code		General	
		ZID Codo			
	MN	ZIP Code	9		
		55337		Personal Funds of the Candidate	
	Cumulative Pay	yment To Da	ate Bala	nce Outstanding at Close of This Period	
00		7	0.00	4000.00	
	D	Date Due	Interest Rate (If none, enter		
Y	1 M / D D	У <mark>У 1</mark> Ў			
if any) to	Loan Source				
itial)		Ν	Name of Employer		
		C	Occupation		
State	ZIP Code				
			Outstanding:		
ial)		N	Name of Employer		
		C	Occupation		
Ctoto	ZID Code				
State	ZIP Code	C	Outstanding:	y	
ial)		Ν	Name of Employer		
		C	Occupation		
	1				
State	ZIP Code	-		y y	
ial)		Ν	Name of Employer		
		C	Occupation		
		A	Amount		
State	ZIP Code			·y · · · · · · · · · ·	
				4000.00 7 7 7	
	itial) State tial) State tial) State tial) State tial) State tial)	Y M Y M If any) to Loan Source if any) to Loan Source itial) State ZIP Code tial) State ZIP Code tial) State ZIP Code tial) State ZIP Code tial)	Y M Y M If any) to Loan Source if any) to Loan Source itial) State ZIP Code tial) State ZIP Code tial)	Date Due Interest Rate (If none, enter itial) if any) to Loan Source itial) Name of Employer Occupation Amount Guaranteed Outstanding: State ZIP Code State ZIP Code Occupation Amount Guaranteed Outstanding: State ZIP Code State ZIP Code State ZIP Code Occupation Amount Guaranteed Outstanding: State ZIP Code State ZIP Code Occupation Amount Guaranteed Outstanding: Name of Employer Occupation Amount Guaranteed Outstanding: Itial) Name of Employer Occupation Amount Guaranteed Outstanding: Itial) Name of Employer Occupation Amount Guaranteed Outstanding: Itial) Name of Employer Occupation	

HEDULE C (FEC Form 3)				PAGE 34 OF 43	
DANS			se separate schedu r each category of etailed Summary Pa	the (check only one) X 13a	
ME OF COMMITTEE (In Full) Berson for Congress			Transa	action ID : SC/10.5209	
LOAN SOURCE Full Name (Last, First, Mi	ddle Initial)		Memo Iten		
Gerson, David, Adam, ,				Yerimary General	
Mailing Address PO Box 1465				Other (specify)	
City	State	ZIP Code			
Burnsville	MN	55337		Personal Funds of the Candidate	
Original Amount of Loan	Cumulative Pa	yment To Date	Ва	lance Outstanding at Close of This Period	
4000.00	9	<u> </u>	0.00	4000.00	
TERMS Date Incurred	Ľ	Date Due	Interest Ra (If none, ent		
M12 ^M / D09 ^D / Y Ž013 Y	M M / D D	/ Y 1ў1/20		0.00 % (apr) Yes X No	
List All Endorsers or Guarantors (if any)	to Loan Source				
1. Full Name (Last, First, Middle Initial)		Nam	e of Employer		
Mailing Address		Осси	pation		
City State	State ZIP Code		Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)			e of Employer		
Mailing Address		Осси	ipation		
		A			
City State	ZIP Code		anteed	y	
3. Full Name (Last, First, Middle Initial)		Nam	e of Employer		
Mailing Address		Осси	pation		
		Amo			
City State	ZIP Code		anteed tanding:	y y	
4. Full Name (Last, First, Middle Initial)		Nam	e of Employer		
Mailing Address		Осси	ipation		
City State	ZIP Code		unt anteed tanding:	y	
UBTOTALS This Period This Page (optional) OTALS This Period (last page in this line onl				4000.00	

				r	PAGE 35 OF 43	
CHEDULE C (FEC Form 3) DANS				Use separate schedule(s) for each category of the Detailed Summary Page		
ME OF COMMITTEE (In Full) erson for Congress				Transa	ction ID : SC/10.5210	
LOAN SOURCE Full Name (L Gerson, David, Adam,		Idle Initial)		Memo Item	Election: 2014 Primary General	
Mailing Address PO Box 1465					Other (specify)	
City Burnsville		State MN	ZIP Code 55337	9	Personal Funds of the Candidate	
Original Amount of Loan	3000.00	Cumulative Pa	yment To D	Date Bal	ance Outstanding at Close of This Perio	
TERMS Date Incurred	4		Date Due	Interest Rat	e Secured:	
M12M / D16D / Y Ž	013 Y	M M / D D	/ Y 1	(If none, ente ÿ1/20 ^Y C		
List All Endorsers or Guarant	ors (if any) to	o Loan Source				
1. Full Name (Last, First, Mide	dle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State ZIP Code			Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Midd	le Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y 1 y 1 y 1 y 1	
3. Full Name (Last, First, Midd	le Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y	
4. Full Name (Last, First, Middle Initial)				Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y	
JBTOTALS This Period This Pa					3000.00	

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CHEDULE C (FEC Form 3) OANS			Use separate schedule for each category of th Detailed Summary Pag	^{1e} (check only one) × 13a	
AME OF COMMITTEE (In Full) Gerson for Congress			Transac	tion ID : SC/10.5542	
LOAN SOURCE Full Name (Last, First, Mic	Idle Initial)		Memo Item	Election: 2014	
Gerson, David, Adam, ,				Y Primary General	
Mailing Address PO Box 1465				Other (specify) ▼	
City	State	ZIP Code	9		
Burnsville	MN	55337		Personal Funds of the Candidate	
Original Amount of Loan	Cumulative Pay	yment To E	Date Bala	nce Outstanding at Close of This Period	
3000.00			0.00	3000.00	
TERMS Date Incurred	C	Date Due	Interest Rate (If none, enter		
M01 ^M / D08 ^D / Y Ž014 Y	M M / D D	/ ¥ 1	ý1/2Ŏ Ÿ 0.		
List All Endorsers or Guarantors (if any) to	o Loan Source				
1. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
			Amount		
City State	ZIP Code		Guaranteed Outstanding:	y	
2. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
			Amount		
City State	ZIP Code		Guaranteed Outstanding:	9	
3. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
			Amount		
City State	ZIP Code		Guaranteed Outstanding:	y	
4. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
		-	Amount		
City State	ZIP Code		Guaranteed Outstanding:	y	
UBTOTALS This Period This Page (optional)				3000.00	

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER: (check only one) 13a Transaction ID : SC/10.5543 Memo Item Election: 2014 Y Primary General Other (specify) ▼ ode	
Memo Item Election: 2014 Y Primary General Other (specify) ▼ ode ✓ y Personal Funds of the Candidate x	
Intention term Image: Primary General Other (specify) ▼ ode Image: Primary General Other (specify) ▼ Image: Primary General Other (specify) ▼ Image: Primary General Other (specify) ▼ Image: Primary General Other (specify) ▼ Image: Primary General Other (specify) ▼ Image: Primary General Other (specify) ▼ Image: Primary General Other (specify) ▼ Image: Primary General Other (specify) ▼ Image: Primary General Other (specify) ▼ Image: Primary General Other (specify) ▼ Image: Primary General Other (specify) ▼ Image: Primary General Other (specify) ▼ Image: Primary General Other (specify) ▼ Image: Primary General Other (specify) ▼ Image: Primary General Other (specify) ▼ Image: Primary General Other (specify) ™ Image: Primary General Other (specify) ▼ Image: Primary General Other (specify) ™ Image: Primary General Other (specify) ▼ Image: Primary General Other (specify) ™ Image: Primary General Other (specify) ™ Image: Primary General Other (specify) ™ Image: Primary Genera Other (specify) ™ <td< td=""></td<>	
Other (specify) ▼ ode , Personal Funds of the Candidate Date Balance Outstanding at Close of This Perio 0.00 5000.00	
Personal Funds of the Candidate Date Balance Outstanding at Close of This Perio 0.00 7 7	
0.00 5000.00	
<u>, , , , , , , , , , , , , , , , , , , </u>	
Interest Rate Secured:	
(If none, enter 0) 1∛1/20 ¥ 0.00 % (apr) Yes ★ No	
Name of Employer	
Name of Employer	
Occupation Amount	
Guaranteed Outstanding:	
Name of Employer	
Occupation	
Amount Guaranteed Outstanding:	
Name of Employer	
Occupation	
Amount Guaranteed Outstanding:	
Name of Employer	
Occupation	
Amount Guaranteed Outstanding:	

HEDULE C (FEC Form 3)		[Use separate schedule	PAGE 38 OF 43	
OANS			for each category of th Detailed Summary Pag	ie (check only one) X 13a	
AME OF COMMITTEE (In Full) Gerson for Congress			Transac	tion ID : SC/10.5544	
LOAN SOURCE Full Name (Last, First, Mid	ddle Initial)		Memo Item	Election: 2014	
Gerson, David, Adam, ,				Seneral	
Mailing Address PO Box 1465				Other (specify) V	
City	State	ZIP Code			
Burnsville	MN	55337		Personal Funds of the Candidate	
Original Amount of Loan	Cumulative Pa	yment To Da	ate Bala	nce Outstanding at Close of This Period	
10000.00	9	7	0.00	10000.00	
TERMS Date Incurred	C	Date Due	Interest Rate (If none, enter		
^M 02 ^M / ^D 26 ^D / ^Y Ž014 ^Y	M M / D D	о / Y 1Ў	1/2Ŏ Ÿ 0.(
List All Endorsers or Guarantors (if any) t	to Loan Source				
1. Full Name (Last, First, Middle Initial)		Ν	Name of Employer		
Mailing Address		C	Dccupation		
City State	ZIP Code		Amount Guaranteed Dutstanding:	y y	
2. Full Name (Last, First, Middle Initial)		Ν	Name of Employer		
Mailing Address		C	Dccupation		
			Amount		
City State	ZIP Code	-	Guaranteed Dutstanding:	9	
3. Full Name (Last, First, Middle Initial)		N	Name of Employer		
Mailing Address		C	Dccupation		
			Amount		
City State	ZIP Code	-	Guaranteed Dutstanding:	y	
4. Full Name (Last, First, Middle Initial)		N	Name of Employer		
Mailing Address		C	Occupation		
City State	ZIP Code		Amount Guaranteed Dutstanding:	y 1 1 y 1 1 m 1	
UBTOTALS This Period This Page (optional).				10000.00	

CHEDULE C (FEC Form 3) OANS				Use separate schedule for each category of t Detailed Summary Pag	the (check only one) × 13a
ame of committee (i Gerson for Congre	,			Transad	ction ID : SC/10.5587
LOAN SOURCE Full Gerson, David, A	•	ddle Initial)		🗌 Memo Item	Election: 2014 X Primary General
Mailing Address PO Box 1465					Other (specify) ▼
City Burnsville		State MN	ZIP Code 55337	9	Personal Funds of the Candidate
Original Amount of L	oan	Cumulative Pa	l lyment To D	Pate Bala	ance Outstanding at Close of This Perio
<u> </u>	391.00			0.00	391.00
TERMS Date Ir	ncurred	٢	Date Due	Interest Rate (If none, enter	
^M 10 ^M / ^D 28 ^D	Ý Ž014 Y	M M / D D) / Y Y		.00 % (apr) Yes 🗶 No
List All Endorsers or	Guarantors (if any) t	o Loan Source			
1. Full Name (Last, F	first, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code	(Amount Guaranteed Outstanding:	7
2. Full Name (Last, Fi	rst, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
3. Full Name (Last, Fi	rst, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	e ZIP Code		Amount Guaranteed Outstanding:	y
4. Full Name (Last, Fi	rst, Middle Initial)	ļ		Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code	(Amount Guaranteed Outstanding:	
SUBTOTALS This Period					391.00 7 7
Carry outstanding balan	ce only to LINE 3, Sch	nedule D, for thi	s line. If no	o Schedule D, carry for	ward to appropriate line of Summa

				r		
CHEDULE C (FEC Form 3) OANS				Use separate schedule for each category of t Detailed Summary Pag	the (check only one) × 13a	
ME OF COMMITTEE (In Full) Gerson for Congress				Transad	ction ID : SC/10.5608	
LOAN SOURCE Full Name (Gerson, David, Adam,		Idle Initial)		Memo Item	Election: 2016 X Primary General	
Mailing Address PO Box 1465					Other (specify)	
City Burnsville		State MN	ZIP Code 55337	e	Personal Funds of the Candidate	
Original Amount of Loan		Cumulative Pa	yment To D	Date Bala	ance Outstanding at Close of This Perio	
7 7	3500.00	9	9	0.00	3500.00	
TERMS Date Incurred M03 ^M P04 ^D Y	2015 ^Y		Date Due			
List All Endorsers or Guarar	ntors (if any) to	o Loan Source				
1. Full Name (Last, First, Mic	ddle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y	
2. Full Name (Last, First, Mid	dle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y	
3. Full Name (Last, First, Mid	dle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	e ZIP Code		Amount Guaranteed Outstanding:	y y	
4. Full Name (Last, First, Middle Initial)				Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y	
UBTOTALS This Period This P OTALS This Period (last page i					3500.00	

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CHEDULE C (FEC Form 3) OANS			Use separate schedul for each category of t Detailed Summary Pa	the (check only one) × 13a	
ame of committee (i Gerson for Congre	,			Transa	ction ID : SC/10.5867
LOAN SOURCE Full Gerson, David, A	• • •	ddle Initial)		Memo Item	Election: 2016 X Primary General
Mailing Address PO Box 1465					Other (specify)
City Burnsville		State MN	ZIP Code 55337	e	X Personal Funds of the Candidate
Original Amount of Lo	oan	Cumulative Pa	yment To D	Date Bala	ance Outstanding at Close of This Perio
	5000.00	3		0.00	5000.00
TERMS Date Ir	ncurred	[Date Due	Interest Rat (If none, ente	
^M 08 ^M / ^D 12 ^D	΄ Ž015΄ ^Υ	M M / D D) / Y	11/4	.00 % (apr) Yes X No
List All Endorsers or	Guarantors (if any) t	o Loan Source			
1. Full Name (Last, F	irst, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	g 1 1 g 1 1 m 1
2. Full Name (Last, Fi	rst, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y 1 1 y 1 1 x 1
3. Full Name (Last, Fi	rst, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
4. Full Name (Last, Fi	rst, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y 1 1 y 1 1 x 1
SUBTOTALS This Period					5000.00 7 7
Carry outstanding balan	ce only to LINE 3, Scl	nedule D, for thi	s line. If n	o Schedule D, carry for	ward to appropriate line of Summary.

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER: (check only one) 13a 13b Transaction ID : SC/10.5980 Image: Memo Item Election: 2016 Image: Memo Item Election: 2016 Image: Other (specify) Image: Memo Item Code Other (specify) 337 Image: Memo Item Image: Code Image: Memo Item State Balance Outstanding at Close of This Period		
□ Memo Item Election: 2016 ▼ Primary General □ Other (specify) ▼		
Code 337 ✓ Primary General Other (specify) ▼ ✓ Personal Funds of the Candidate		
General Other (specify) ▼ Code 337		
Code 337 Other (specify) Personal Funds of the Candidate		
337 Personal Funds of the Candidate		
337		
To Date Balance Outstanding at Close of This Period		
0.00 10000.00		
Due Interest Rate Secured: (If none, enter 0)		
Y YNAY Y 0.00 % (apr) Yes ✗ No		
Name of Employer		
Occupation		
Amount Guaranteed		
Outstanding:		
Name of Employer		
Occupation		
Amount		
Guaranteed Outstanding:		
Name of Employer		
Occupation		
Amount		
Guaranteed Outstanding:		
Name of Employer		
Occupation		
Amount		
Guaranteed Outstanding:		
→ 10000.00 → 7 7 7		

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CHEDULE C (FEC Form 3) OANS			Use separate schedu for each category of Detailed Summary Pa	the (check only one) × 13a		
IAME OF COMMITTEE (In Gerson for Congres	,			Transa	action ID : SC/10.6013	
LOAN SOURCE Full N Gerson, David, A	•	ddle Initial)		Memo Item	Election: 2016	
Mailing Address PO Box 1465					Other (specify)	
City Burnsville		State MN	ZIP Code 55337	9	Personal Funds of the Candidate	
Original Amount of Loa	an	Cumulative Pa	ayment To D	Date Bal	lance Outstanding at Close of This Perio	
· · · · · ·	33932.59	7		28539.64	5392.95	
TERMS Date Inc	curred	[Date Due	Interest Rat (If none, ente		
M09M / D30D /	^ү Ž015 ^ү	M M / D C	D / Y	11/4	0.00 % (apr) Yes 🗴 No	
List All Endorsers or (Guarantors (if any) t	o Loan Source	•			
1. Full Name (Last, Fir	st, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y	
2. Full Name (Last, Firs	st, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
3. Full Name (Last, Firs	st, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	- y - 1 - y - 1 - x - 1	
4. Full Name (Last, First, Middle Initial)				Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y 1 y 1 x 1	
SUBTOTALS This Period					5392.95	
TOTALS This Period (last					171460.36	
Carry outstanding balance	e only to LINE 3, Scł	nedule D, for thi	is line. If no	o Schedule D, carry for	ward to appropriate line of Summary.	