



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Eighth Congressional District Republican Party of Minnesota**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>	<input type="text" value="4423.37"/>	<input type="text" value="4423.37"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="3197.94"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="12871.69"/>	<input type="text" value="19792.84"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="16069.63"/>	<input type="text" value="24216.21"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="6280.59"/>	<input type="text" value="14427.17"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="9789.04"/>	<input type="text" value="9789.04"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**Eighth Congressional District Republican Party of Minnesota**

Report Covering the Period: From:  /  /  To:  /  /

<b>I. Receipts</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	4201.19	4851.19
(ii) Unitemized .....	8670.50	14670.50
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	12871.69	19521.69
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	12871.69	19521.69
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	271.15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	12871.69	19792.84
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	12871.69	19792.84

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	6280.59	14427.17
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	6280.59	14427.17
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	6280.59	14427.17
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6280.59	14427.17

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

<b>III. Net Contributions/Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	12871.69	19521.69
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	12871.69	19521.69
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	6280.59	14427.17
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	271.15
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	6280.59	14156.02



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 16  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Eighth Congressional District Republican Party of Minnesota**

**A. James M Evenson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2028 226th Ave  
 City Mora State MN Zip Code 55051  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer self Occupation retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 19 / 2015  
**Transaction ID : SA11AI.5630**  
 Amount of Each Receipt this Period 180.00

**B. James M Evenson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2028 226th Ave  
 City Mora State MN Zip Code 55051  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer self Occupation retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 19 / 2015  
**Transaction ID : SA11AI.5666**  
 Amount of Each Receipt this Period 50.00  
 In-kind - Black walnut clock and collectable calender

**C. Rachel Hart**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1210 Missouri Ave  
 City Duluth State MN Zip Code 55811  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer self Occupation seamstress  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 14 / 2015  
**Transaction ID : SA11AI.5532**  
 Amount of Each Receipt this Period 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 430.00  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 16  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Eighth Congressional District Republican Party of Minnesota**

Full Name (Last, First, Middle Initial)  
**A. Rachel Hart**

Mailing Address 1210 Missouri Ave

City State Zip Code  
 Duluth MN 55811

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 self seamstress

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 383.00

Date of Receipt  
 09 / 19 / 2015  
**Transaction ID : SA11AI.5732**

Amount of Each Receipt this Period  
 113.00

In-kind - 2 aprons, fish cutting board, string of pearls

Full Name (Last, First, Middle Initial)  
**B. Charles Haslerud**

Mailing Address 5101 Lester St

City State Zip Code  
 Duluth MN 55804

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 Arrow Lift Sales

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1245.00

Date of Receipt  
 09 / 08 / 2015  
**Transaction ID : SA11AI.5665**

Amount of Each Receipt this Period  
 1200.00

In-kind - guided fishing trip to Isle Royale

Full Name (Last, First, Middle Initial)  
**c. Charles Haslerud**

Mailing Address 5101 Lester St

City State Zip Code  
 Duluth MN 55804

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 Arrow Lift Sales

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1345.00

Date of Receipt  
 09 / 18 / 2015  
**Transaction ID : SA11AI.5535**

Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1413.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 16
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Eighth Congressional District Republican Party of Minnesota**

**A. Joe Hollabaugh**  
Full Name (Last, First, Middle Initial)

Mailing Address 4908 Voss Rd

City Mountain Iron State MN Zip Code 55768

FEC ID number of contributing federal political committee. **C**

Name of Employer Ulland Brothers Occupation Supervision

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 430.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 19 / 2015

**Transaction ID : SA11AI.5638**

Amount of Each Receipt this Period  
 285.00

**B. Catherine A Kortesmaki**  
Full Name (Last, First, Middle Initial)

Mailing Address 5231 North Shore Dr

City Duluth State MN Zip Code 55804

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation Rental

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 19 / 2015

**Transaction ID : SA11AI.5696**

Amount of Each Receipt this Period  
 158.00

In-kind - chocolate, decorating supplies, Reagan coffee cups, Spaten beer, beer glasses, golf items

**C. Laura P Kowarsch**  
Full Name (Last, First, Middle Initial)

Mailing Address 9371 Highway 29

City Kelsey State MN Zip Code 55724

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 19 / 2015

**Transaction ID : SA11AI.5629**

Amount of Each Receipt this Period  
 40.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 483.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 16  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Eighth Congressional District Republican Party of Minnesota**

Full Name (Last, First, Middle Initial)  
**A. Justin M Krych**

Mailing Address 35 Erickson Rd

City State Zip Code  
 Esko MN 55733

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 Dacotah Paper Co sales

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 295.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 19 / 2015

**Transaction ID : SA11AI.5645**

Amount of Each Receipt this Period  
 100.00

Full Name (Last, First, Middle Initial)  
**B. Stewart Mills III**

Mailing Address 22849 Old Government Trail

City State Zip Code  
 Nisswa MN 56468

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 Mills Fleet Farm Vice President

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 19 / 2015

**Transaction ID : SA11AI.5646**

Amount of Each Receipt this Period  
 300.00

Full Name (Last, First, Middle Initial)  
**C. Susan Morris**

Mailing Address 5744 County Rd 5 NE

City State Zip Code  
 Cambridge MN 55008

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 self catering

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 255.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 19 / 2015

**Transaction ID : SA11AI.5680**

Amount of Each Receipt this Period  
 85.00

In-kind - apple pie, raspberry torte, keylime pie, strawberry tart

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 485.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 16
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Eighth Congressional District Republican Party of Minnesota**

**A. David Salvesson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2730 W Skyline Parkway  
 City Duluth State MN Zip Code 55806  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Lake Superior Brewing Occupation manager  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **205.00**

Date of Receipt **09 / 19 / 2015**  
**Transaction ID : SA11AI.5721**  
 Amount of Each Receipt this Period **75.00**  
 In-kind - Lake Superior Brewing basket - 3 growlers, 2 t shirts , 2 glasses

**B. Diane Wickstrom**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3835 Mayfair Ave  
 City Hibbing State MN Zip Code 55746  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer self Occupation retired  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **258.00**

Date of Receipt **09 / 19 / 2015**  
**Transaction ID : SA11AI.5625**  
 Amount of Each Receipt this Period **208.00**

**C. Jennifer B Wilson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4279 Birch Valley Rd  
 City Hermantown State MN Zip Code 55811  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer self Occupation homemaker  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **482.19**

Date of Receipt **09 / 19 / 2015**  
**Transaction ID : SA11AI.5695**  
 Amount of Each Receipt this Period **287.19**  
 In-kind - household items, patriotic decorations, christmas ornaments, onyx elephant , Roosevelt cd

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>570.19</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 16  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Eighth Congressional District Republican Party of Minnesota**

**A. Katie Wollen**  
Full Name (Last, First, Middle Initial)  
Mailing Address 64 E Pleasant Lake Rd  
City Northb Oaks State MN Zip Code 55127  
FEC ID number of contributing federal political committee. **C**  
Name of Employer UMD Occupation student  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 19 / 2015  
**Transaction ID : SA11AI.5586**  
Amount of Each Receipt this Period  
350.00

**B.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
Amount of Each Receipt this Period

**C.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	350.00
<b>TOTAL</b> This Period (last page this line number only).....▶	4201.19

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Eighth Congressional District Republican Party of Minnesota**

Full Name (Last, First, Middle Initial)

**A. Ronald L Britton**

Mailing Address 302 Chestnut St  
Suite 404

City Virginia State MN Zip Code 55792

Purpose of Disbursement  
Reimbursement for Virginia, MN office rent

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.5653**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Ronald L Britton**

Mailing Address 302 Chestnut St  
Suite 404

City Virginia State MN Zip Code 55792

Purpose of Disbursement  
Reimbursement for Virginia, MN office phones

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.5655**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Click and Pledge**

Mailing Address 12202 Airport Way Suite 100

City Broomfield State CO Zip Code 80021

Purpose of Disbursement  
Credit card processing

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.5648**

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Eighth Congressional District Republican Party of Minnesota**

Full Name (Last, First, Middle Initial)

**A. Fireside Inn**

Mailing Address 415 Meadow Dr

City State Zip Code  
McGregor MN 55760

Purpose of Disbursement  
Meeting Room

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.5647**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Charles Haslerud**

Mailing Address 5101 Lester St

City State Zip Code  
Duluth MN 55804

Purpose of Disbursement  
In-kind - guided fishing trip to Isle Royale

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.5671**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Catherine A Kortesmaki**

Mailing Address 5231 North Shore Dr

City State Zip Code  
Duluth MN 55804

Purpose of Disbursement  
Reimbursement for facilities deposit-Clearwater Event Ctr

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.5651**

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Eighth Congressional District Republican Party of Minnesota**

Full Name (Last, First, Middle Initial)

**A. Catherine A Kortesmaki**

Mailing Address 5231 North Shore Dr

City Duluth State MN Zip Code 55804

Purpose of Disbursement  
In-kind - chocolate, decorating supplies, Reagan coffee cups, Spaten beer,  
~~beer glasses, golf items~~  
Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		19		2015

**Transaction ID : SB21B.5700**

Amount of Each Disbursement this Period

158.00
--------

Full Name (Last, First, Middle Initial)

**B. USPS**

Mailing Address 231 1st St S

City Virginia State MN Zip Code 55792

Purpose of Disbursement  
Postage

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		01		2015

**Transaction ID : SB21B.5652**

Amount of Each Disbursement this Period

171.91
--------

Full Name (Last, First, Middle Initial)

**C. USPS**

Mailing Address 231 1st St S

City Virginia State MN Zip Code 55792

Purpose of Disbursement  
Stamps

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		08		2015

**Transaction ID : SB21B.5654**

Amount of Each Disbursement this Period

49.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

378.91
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**TOTAL** This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Eighth Congressional District Republican Party of Minnesota**

Full Name (Last, First, Middle Initial)

**A. USPS**

Mailing Address 231 1st St S

City Virginia State MN Zip Code 55792

Purpose of Disbursement Postage

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.5650**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Jennifer B Wilson**

Mailing Address 4279 Birch Valley Rd

City Hermantown State MN Zip Code 55811

Purpose of Disbursement In-kind - household items, patriotic decorations, christmas ornaments, onyx elephant Roosevelt  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.5701**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶