

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

TAXPAYERS LEAGUE OF MINNESOTA LIBERTY FUND

Report Covering the Period: From: ^{M M / D D / Y Y Y Y} 0 1 / 0 1 / 2 0 1 0 To: ^{M M / D D / Y Y Y Y} 0 3 / 3 1 / 2 0 1 0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand ^{Y Y Y Y} January 1, 2 0 1 0		, 5,619.77
(b) Cash on Hand at Beginning of Reporting Period.....	, 5,619.77	
(c) Total Receipts (from Line 19).....	, 935.00	, 935.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	, 6,554.77	, 6,554.77
7. Total Disbursements (from Line 31).....	, 1,452.85	, 1,452.85
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	, 5,101.92	, 5,101.92
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	, 0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	, 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

10030292258

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

TAXPAYERS LEAGUE OF MINNESOTA LIBERTY FUND

Report Covering the Period: From: ^{M M / D D / Y Y Y Y} 0 1 / 0 1 / 2 0 1 0 To: ^{M M / D D / Y Y Y Y} 0 3 / 3 1 / 2 0 1 0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	, 935.00	, 935.00
(ii) Unitemized	, 0.00	, 0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	, 935.00	, 935.00
(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)	, 935.00	, 935.00
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	, 0.00
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)).....▶	, 935.00	, 935.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	, 935.00	, 935.00

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DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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	1,427.85	1,427.85
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1,427.85	1,427.85
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	25.00	25.00
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))..	1,452.85	1,452.85
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1,452.85	1,452.85

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DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	, 935.00	, 935.00
34. Total Contribution Refunds (from Line 28(d))	, 0.00	, 0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	, 935.00	, 935.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	, 1,427.85	, 1,427.85
37. Offsets to Operating Expenditures (from Line 15, page 3)	, 0.00	, 0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	, 1,427.85	, 1,427.85

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 1 OF 3			
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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)
TAXPAYERS LEAGUE OF MINNESOTA LIBERTY FUND

Full Name (Last, First, Middle Initial) A. BRANDT, JOHN L.			Date of Receipt MM / DD / YYYY 01 / 22 / 2010
Mailing Address 2129 12TH AVENUE EAST			Amount of Each Receipt this Period , 210.00
City HIBBING	State MN	Zip Code 55746	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ , 210.00
Name of Employer N/A		Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. WELSHINGER, PAUL			Date of Receipt MM / DD / YYYY 01 / 22 / 2010
Mailing Address 772 GRANSIE ROAD			Amount of Each Receipt this Period , 25.00
City SHODENVIEW	State MN	Zip Code 55126	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ , 25.00
Name of Employer N/A		Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. SCHMIESING, WALDEMAR			Date of Receipt MM / DD / YYYY 01 / 23 / 2010
Mailing Address 11789 COUNTY ROAD 11			Amount of Each Receipt this Period , 50.00
City HANSKA	State MN	Zip Code 56041-4224	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ , 50.00
Name of Employer		Occupation	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	, 285.00
TOTAL This Period (last page this line number only).....▶	, ,

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**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 2 OF 3		
	<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

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NAME OF COMMITTEE (In Full)
TAXPAYERS LEAGUE OF MINNESOTA LIBERTY FUND

Full Name (Last, First, Middle Initial) A. REEDY, DARWIN R.		Date of Receipt M M / D D / Y Y Y Y 01 / 25 / 2010
Mailing Address 51 PENINSULA ROAD		Amount of Each Receipt this Period , 250.00
City DELLWOOD	State Zip Code MN 55110-1504	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ , 250.00
Name of Employer DARWIN REEDY GALLERY	Occupation ART DEALER	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. LANGE, STEPHENS J.		Date of Receipt M M / D D / Y Y Y Y 02 / 05 / 2010
Mailing Address PO BOX 447		Amount of Each Receipt this Period , 250.00
City OWATONNA	State Zip Code MN 55060-0447	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ , 250.00
Name of Employer N/A	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. LOVELL, ROBERT T.		Date of Receipt M M / D D / Y Y Y Y 02 / 10 / 2010
Mailing Address 4217 HEMLOCK LANE NW		Amount of Each Receipt this Period , 50.00
City PLYMOUTH	State Zip Code MN 55441	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ , 50.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)▶	, 550.00
TOTAL This Period (last page this line number only)▶	, 550.00

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**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 3 OF 3					
	<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

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NAME OF COMMITTEE (In Full)
TAXPAYERS LEAGUE OF MINNESOTA LIBERTY FUND

Full Name (Last, First, Middle Initial) A. KLEIFGEN, DAVID F.		Date of Receipt MM / DD / YYYY 02 / 14 / 2010
Mailing Address 10555 114TH STREET NORTH		Amount of Each Receipt this Period , 100.00
City STILLWATER	State MN	
Zip Code 55082-9414		Aggregate Year-to-Date ▼ , 100.00
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B.		Date of Receipt MM / DD / YYYY
Mailing Address		Amount of Each Receipt this Period
City	State	
Zip Code		Aggregate Year-to-Date ▼
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C.		Date of Receipt MM / DD / YYYY
Mailing Address		Amount of Each Receipt this Period
City	State	
Zip Code		Aggregate Year-to-Date ▼
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	, 100.00
TOTAL This Period (last page this line number only).....▶	, 935.00

10030292264

**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)

PAGE / OF /

21b 22 23 24 25 26
 27 28a 28b 28c 29 30b

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NAME OF COMMITTEE (In Full)

TAXPAYERS LEAGUE OF MINNESOTA LIBERTY FUND

Full Name (Last, First, Middle Initial)

A. POSTMASTER		Date of Disbursement
Mailing Address 2000 W. COUNTY ROAD B2 55113		M M / D D / Y Y Y Y 0 1 / 1 2 / 2 0 1 0
City ROSEVILLE	State MN	Amount of Each Disbursement this Period 35.00
Purpose of Disbursement PO BOX RENTAL	Category/ Type 0 0 1	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

B. BYERLY'S		Date of Disbursement
Mailing Address 1601 W. COUNTY RD C		M M / D D / Y Y Y Y 0 1 / 1 6 / 2 0 1 0
City SAINT PAUL	State MN	Amount of Each Disbursement this Period 110.00
Purpose of Disbursement POSTAGE	Category/ Type 0 0 1	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

C. INTERNAL REVENUE SERVICE		Date of Disbursement
Mailing Address 324 25TH STREET		M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 1 0
City OGDEN	State UT	Amount of Each Disbursement this Period 1,282.85
Purpose of Disbursement TAXES	Category/ Type 0 0 1	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)..... ▶ **1,427.85**

TOTAL This Period (last page this line number only)..... ▶ **1,427.85**

10030292265

**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)

PAGE / OF /

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)

TAXPAYERS LEAGUE OF MINNESOTA LIBERTY FUND

Full Name (Last, First, Middle Initial)

<p>A.</p> <p>BROWN FOR U.S. SENATE</p> <p>Mailing Address 200 RESERVOIR STREET, SUITE 101</p> <p>City NEEDHAM State MA Zip Code 02494</p> <p>Purpose of Disbursement POLITICAL CONTRIBUTION</p> <p>Candidate Name SCOTT BROWN</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) SPECIAL-MA</p> <p>State: _____ District: _____</p>		<p>Date of Disbursement</p> <p>M M / D D / Y Y Y Y 01 / 15 / 2010</p> <p>Amount of Each Disbursement this Period</p> <p>, , 25.00</p> <p>Category/ Type 011</p>
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<p>B.</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: _____ District: _____</p>		<p>Date of Disbursement</p> <p>M M / D D / Y Y Y Y</p> <p>Amount of Each Disbursement this Period</p> <p>, , .</p> <p>Category/ Type</p>
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<p>C.</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: _____ District: _____</p>		<p>Date of Disbursement</p> <p>M M / D D / Y Y Y Y</p> <p>Amount of Each Disbursement this Period</p> <p>, , .</p> <p>Category/ Type</p>
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SUBTOTAL of Disbursements This Page (optional)..... , , **25.00**

TOTAL This Period (last page this line number only)..... , , **25.00**

10030292266

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked
4/7/10
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

Jan W
 PREPARER

4/15/10
 DATE PREPARED

10030292267