

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
NorthStar Leadership PAC

ADDRESS (number and street) PO Box 28754
 Check if different than previously reported. (ACC)
St. Paul MN 55128

2. **FEC IDENTIFICATION NUMBER** C00386573
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 04 01 2006 through 06 30 2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Jeff Larson
Signature of Treasurer Electronically Filed by Jeff Larson Date 08 18 2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
NorthStar Leadership PAC

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		177151.33
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	158246.88									
(c) Total Receipts (from Line 19)	38723.22	101146.42								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	196970.10	278297.75								
7. Total Disbursements (from Line 31)	85471.58	166799.23								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	111498.52	111498.52								
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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
NorthStar Leadership PAC

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

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)	5700.00	12200.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	5700.00	12200.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	32250.00	85250.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	37950.00	97450.00
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)	25.00	60.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	2000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	748.22	1636.42
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 Transfer (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))	38723.22	101146.42
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	38723.22	101146.42

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) Shared 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.....	33671.58	94999.23
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	33671.58	94999.23
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	51800.00	71800.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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) Shared 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))..	85471.58	166799.23
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	85471.58	166799.23

DETAILED SUMMARY PAGE
of Disbursements

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)	37950.00	97450.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	37950.00	97450.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	33671.58	94999.23
37. Offsets to Operating Expenditures (from Line 15, page 3)	25.00	60.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	33646.58	94939.23

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 37
	(check only one)
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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

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)
NorthStar Leadership PAC

Full Name (Last, First, Middle Initial) A. AGSH&F Civic Action PAC		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 1333 New Hampshire Ave NW		Transaction ID: C510	
City State Zip Code Washington DC 20036	Amount of Each Receipt this Period 750.00		
FEC ID number of contributing federal political committee. C C00104901		Receipt	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 750.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. AICPA PAC		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6	
Mailing Address 1455 Pennsylvania Ave NW		Transaction ID: C520	
City State Zip Code Washington DC 20004	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C C00077321		Receipt	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. American Hospital Association PAC		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6	
Mailing Address 325 Seventh Street NW		Transaction ID: C517	
City State Zip Code Washington DC 20004	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C C00106146		Receipt	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	6750.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 37		
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
NorthStar Leadership PAC

A. Full Name (Last, First, Middle Initial) Bond PAC Mailing Address 1399 New York Ave NW City Washington State DC Zip Code 20005 FEC ID number of contributing federal political committee. C C00158980 Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3000.00		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6 Transaction ID: 60710.C531 Amount of Each Receipt this Period 1000.00 Receipt
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B. Full Name (Last, First, Middle Initial) Comcast PAC Mailing Address 1500 Market St 33rd Fl E Tower City Philadelphia State PA Zip Code 19102 FEC ID number of contributing federal political committee. C C00248716 Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6 Transaction ID: C528 Amount of Each Receipt this Period 2500.00 Receipt
--	--	--

C. Full Name (Last, First, Middle Initial) General Electric PAC Mailing Address 1299 Penn Ave NW Suite 1100W City Washington State DC Zip Code 20004 FEC ID number of contributing federal political committee. C C00024869 Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6 Transaction ID: C519 Amount of Each Receipt this Period 1000.00 Receipt
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SUBTOTAL of Receipts This Page (optional)	▶	4500.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 37
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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)
NorthStar Leadership PAC

A. Full Name (Last, First, Middle Initial)
Home Depot PAC

Mailing Address 101 Constitution Avenue NW Ste 800

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00284885

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2006

Transaction ID: C503

Amount of Each Receipt this Period
5000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Honeywell PAC

Mailing Address 101 Constitution Ave NW Ste 500 W

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
MM / DD / YYYY
06 / 19 / 2006

Transaction ID: C522

Amount of Each Receipt this Period
3000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Lockridge Grindal PAC

Mailing Address 100 Washington Ave S Ste 2200

City State Zip Code
Minneapolis MN 55401

FEC ID number of contributing federal political committee. **C** C00167916

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
04 / 24 / 2006

Transaction ID: C506

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	9000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 37		
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
NorthStar Leadership PAC

A. Full Name (Last, First, Middle Initial)
National Restaurant Assoc. PAC

Mailing Address 1200 Seventeenth Street NW

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00003764

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 4 / 2 0 0 6

Transaction ID: C507

Amount of Each Receipt this Period
1000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Northrup Grumman PAC

Mailing Address 520 S Grand Ave Suite 700

City State Zip Code
Los Angeles CA 90071

FEC ID number of contributing federal political committee. **C** C00088591

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 0 6

Transaction ID: C499

Amount of Each Receipt this Period
2000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Southern Company PAC

Mailing Address 601 Penn Ave NW Suite 800

City State Zip Code
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00144774

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 1 0 / 2 0 0 6

Transaction ID: C504

Amount of Each Receipt this Period
5000.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	8000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 37
	(check only one)	
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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)
NorthStar Leadership PAC

A. Full Name (Last, First, Middle Initial)
US Bancorp PAC

Mailing Address 800 Nicollet Mall BC-MN-H210

City State Zip Code
Minneapolis MN 55402

FEC ID number of contributing federal political committee. **C** C00018036

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 24 / 2006

Transaction ID: C511

Amount of Each Receipt this Period
1000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Wal PAC

Mailing Address 575 7th St NW

City State Zip Code
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00093054

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 02 / 2006

Transaction ID: C518

Amount of Each Receipt this Period
1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Xcel Energy PAC

Mailing Address 801 Penn Ave NW Suite 212

City State Zip Code
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00107771

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 13 / 2006

Transaction ID: C498

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 / 37
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
NorthStar Leadership PAC

A. Full Name (Last, First, Middle Initial)
Xcel Energy PAC

Mailing Address 801 Penn Ave NW Suite 212

City State Zip Code
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00107771

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	2	/	2	0	0	6

Transaction ID: C521

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	32250.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 37
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NorthStar Leadership PAC

A. Full Name (Last, First, Middle Initial)
Dale Bachman

Mailing Address 6761 Beach Rd

City State Zip Code
Eden Prairie MN 55344-5229

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

Name of Employer Occupation
Bachmans Inc. Nurseryman

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2006

Transaction ID: C529

Amount of Each Receipt this Period
1000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Russell Bennett

Mailing Address 500 IDS Center
80 S 8th St

City State Zip Code
Minneapolis MN 55402

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

Name of Employer Occupation
Gray Plant Moody Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
MM / DD / YYYY
05 / 24 / 2006

Transaction ID: C505

Amount of Each Receipt this Period
200.00

Receipt

C. Full Name (Last, First, Middle Initial)
Louis Buron

Mailing Address PO Box 1656

City State Zip Code
Bemidji MN 56619-1656

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

Name of Employer Occupation
Omni Broadcasting Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
MM / DD / YYYY
05 / 03 / 2006

Transaction ID: C501

Amount of Each Receipt this Period
2000.00

Earmarked(Receipt)

SUBTOTAL of Receipts This Page (optional)	▶	3200.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 37
	<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)
NorthStar Leadership PAC

Full Name (Last, First, Middle Initial) A. TV & Radio PAC		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6
Mailing Address 1771 N Street NW		Transaction ID: CM24C501
City State Zip Code Washington DC 20036	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C	Memo - Conduit memo total	
Name of Employer Occupation	[MEMO ITEM] Earmarked Memo - Conduit total	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date 2000.00	

Full Name (Last, First, Middle Initial) B. Philip Corwin		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6
Mailing Address 6101 Edsall Rd Apt 611		Transaction ID: C509
City State Zip Code Alexandria VA 22304-4104	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Occupation Butera and Andrews Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date 500.00	

Full Name (Last, First, Middle Initial) C. Matthew Dolan		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6
Mailing Address Baker and Hostetler 1050 Connecticut Ave, NW #1100		Transaction ID: C508
City State Zip Code Washington DC 20036	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Occupation Baker Hostetler Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional)	1000.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 14 / 37
	(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)
NorthStar Leadership PAC

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

Mailing Address 1155 21st St NW # 200

City State Zip Code
Washington DC 20036-3308

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

Name of Employer Occupation
Williams & Jensen Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
06 / 02 / 2006

Transaction ID: C516

Amount of Each Receipt this Period
500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Lisa Mindlin

Mailing Address 15300 Ventura Blvd Ste 505

City State Zip Code
Sherman Oaks CA 91403-5843

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

Name of Employer Occupation
Self Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2006

Transaction ID: C502

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1500.00
TOTAL This Period (last page this line number only)	▶	5700.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 37
	<input 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 checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NorthStar Leadership PAC

Full Name (Last, First, Middle Initial) A. Park Midway Bank		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 6	
Mailing Address 2265 Como Ave		Transaction ID: C525	
City State Zip Code Saint Paul MN 55108-	Amount of Each Receipt this Period 264.01		
FEC ID number of contributing federal political committee. C	Interest Received		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 1152.21		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Park Midway Bank		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 2265 Como Ave		Transaction ID: C526	
City State Zip Code Saint Paul MN 55108-	Amount of Each Receipt this Period 281.91		
FEC ID number of contributing federal political committee. C	Interest Received		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 1434.12		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Park Midway Bank		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 2265 Como Ave		Transaction ID: 60710.C530	
City State Zip Code Saint Paul MN 55108-	Amount of Each Receipt this Period 202.30		
FEC ID number of contributing federal political committee. C	Interest Received		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 1636.42		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	748.22
TOTAL This Period (last page this line number only) ▶	748.22

**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)
NorthStar Leadership PAC

Full Name (Last, First, Middle Initial) A. 3 Dog Consulting		Transaction ID: E974 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 6
Mailing Address 104 E Hume Ave		Amount of Each Disbursement this Period 1800.00
City Alexandria State VA Zip Code 22301-	PAC FUNDRAISING CONSULTANT	
Purpose of Disbursement PAC FUNDRAISING CONSULTANT		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. 3 Dog Consulting		Transaction ID: E996 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 104 E Hume Ave		Amount of Each Disbursement this Period 2223.04
City Alexandria State VA Zip Code 22301-	SEE BELOW:	
Purpose of Disbursement SEE BELOW:		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. 3 Dog Consulting		Transaction ID: E998 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 104 E Hume Ave		Amount of Each Disbursement this Period 423.04
City Alexandria State VA Zip Code 22301-	[MEMO ITEM] MEMO: PAC FUNDRAISING EXPENSES	
Purpose of Disbursement PAC FUNDRAISING EXPENSES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4023.04
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)
NorthStar Leadership PAC

Full Name (Last, First, Middle Initial) A. 3 Dog Consulting		Transaction ID: E997 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 104 E Hume Ave		Amount of Each Disbursement this Period 1800.00
City Alexandria State VA Zip Code 22301-	[MEMO ITEM] MEMO: PAC FUNDRAISING CONSULTANT	
Purpose of Disbursement PAC FUNDRAISING CONSULTANT		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. 3 Dog Consulting		Transaction ID: E1028 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 6
Mailing Address 104 E Hume Ave		Amount of Each Disbursement this Period 1800.00
City Alexandria State VA Zip Code 22301-	PAC FUNDRAISING CONSULTANT	
Purpose of Disbursement PAC FUNDRAISING CONSULTANT		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Bellwether Consulting		Transaction ID: E988 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address 815 Slaters Lane		Amount of Each Disbursement this Period 3381.19
City Alexandria State VA Zip Code 22314-	PAC FUNDRAISING EXPENSE	
Purpose of Disbursement PAC FUNDRAISING EXPENSE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	5181.19
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)

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<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)
NorthStar Leadership PAC

Full Name (Last, First, Middle Initial) A. Bellwether Consulting		Transaction ID: E995 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 815 Slaters Lane		Amount of Each Disbursement this Period 5750.00
City Alexandria State VA Zip Code 22314-	Category/ Type PAC FUNDRAISING EXPENSE	
Purpose of Disbursement PAC FUNDRAISING EXPENSE		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Norm Coleman		Transaction ID: E981 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address 2550 University Ave W Suite 100N		Amount of Each Disbursement this Period 238.24
City Saint Paul State MN Zip Code 55114-	Category/ Type SEE BELOW: AIRFARE REIMB.	
Purpose of Disbursement SEE BELOW: AIRFARE REIMB.		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Aero California		Transaction ID: E982 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address 7300 World Way W		Amount of Each Disbursement this Period 238.24
City Los Angeles State CA Zip Code 90045-5829	Category/ Type [MEMO ITEM] MEMO: AIRFARE	
Purpose of Disbursement AIRFARE		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	5988.24
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)

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<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)
NorthStar Leadership PAC

A. Norm Coleman Full Name (Last, First, Middle Initial) Mailing Address 2550 University Ave W Suite 100N City Saint Paul State MN Zip Code 55114- Purpose of Disbursement REIMB: SEE BELOW Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: E1030 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 6 Amount of Each Disbursement this Period 324.30 REIMB: SEE BELOW
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B. Delta Airlines Full Name (Last, First, Middle Initial) Mailing Address La Guardia Airport City Floral Park State NY Zip Code 11001- Purpose of Disbursement AIRFARE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: E1031 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 6 Amount of Each Disbursement this Period 324.30 [MEMO ITEM] MEMO: AIRFARE
---	--	---

C. Elan Services - VISA Full Name (Last, First, Middle Initial) Mailing Address PO Box 790408 City Saint Louis State MO Zip Code 63179- Purpose of Disbursement CREDIT CARD FEES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: E979 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 6 Amount of Each Disbursement this Period 5.00 CREDIT CARD FEES
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SUBTOTAL of Disbursements This Page (optional) ▶	329.30
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)
NorthStar Leadership PAC

Full Name (Last, First, Middle Initial) A. Elan Services - VISA		Transaction ID: E1001 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address PO Box 790408		Amount of Each Disbursement this Period 4634.65
City Saint Louis State MO Zip Code 63179-	Purpose of Disbursement CREDIT CARD PAYMENT: SEE BELOW	
Candidate Name	Category/Type	CREDIT CARD PAYMENT: SEE BELOW
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Marriott Hotel		Transaction ID: E1012 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address 61 S Ocean Ave		Amount of Each Disbursement this Period 550.30
City West Palm Beach State FL Zip Code 33404-6225	Purpose of Disbursement LODGING	
Candidate Name	Category/Type	[MEMO ITEM] MEMO: LODGING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Northwest Airlines		Transaction ID: E1009 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address 70 E 6th Street		Amount of Each Disbursement this Period 879.59
City Chaska State MN Zip Code 55318-	Purpose of Disbursement AIRFARE	
Candidate Name	Category/Type	[MEMO ITEM] MEMO: AIRFARE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4634.65
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)
NorthStar Leadership PAC

Full Name (Last, First, Middle Initial) A. Northwest Airlines		Transaction ID: E1010 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address 70 E 6th Street		Amount of Each Disbursement this Period 5.00
City Chaska State MN Zip Code 55318-	[MEMO ITEM] MEMO: CHANGE FEE	
Purpose of Disbursement CHANGE FEE Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Northwest Airlines		Transaction ID: E1004 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address 70 E 6th Street		Amount of Each Disbursement this Period 10.00
City Chaska State MN Zip Code 55318-	[MEMO ITEM] MEMO: CHANGE FEE	
Purpose of Disbursement CHANGE FEE Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Northwest Airlines		Transaction ID: E1006 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address 70 E 6th Street		Amount of Each Disbursement this Period 5.80
City Chaska State MN Zip Code 55318-	[MEMO ITEM] MEMO: CHANGE FEE	
Purpose of Disbursement CHANGE FEE Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
NorthStar Leadership PAC

Full Name (Last, First, Middle Initial) A. Northwest Airlines		Transaction ID: E1005 Date of Disbursement 04 / 27 / 2006
Mailing Address 70 E 6th Street		Amount of Each Disbursement this Period 1344.40
City Chaska State MN Zip Code 55318-	Purpose of Disbursement AIRFARE Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: AIRFARE

Full Name (Last, First, Middle Initial) B. Premiere One Executive		Transaction ID: E1015 Date of Disbursement 04 / 27 / 2006
Mailing Address 1346 S Mansfield Ave		Amount of Each Disbursement this Period 1100.32
City Los Angeles State CA Zip Code 90019-	Purpose of Disbursement GROUND TRANSPORTATION Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: GROUND TRANSPORTATION

Full Name (Last, First, Middle Initial) C. Sage Travel		Transaction ID: E1003 Date of Disbursement 04 / 27 / 2006
Mailing Address 1107 Hazeltine Blvd		Amount of Each Disbursement this Period 35.00
City Chaska State MN Zip Code 55318-	Purpose of Disbursement AGENT FEES Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: AGENT FEES

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)

PAGE 23 / 37

<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)
NorthStar Leadership PAC

Full Name (Last, First, Middle Initial) A. Sofitel Hotels		Transaction ID: E1014 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address 8555 Beverly Blvd		Amount of Each Disbursement this Period 326.54
City Los Angeles	State CA Zip Code 90048-	
Purpose of Disbursement LODGING		[MEMO ITEM] MEMO: LODGING
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. US Airways		Transaction ID: E1002 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address 2345 Crystal Drive		Amount of Each Disbursement this Period 214.30
City Arlington	State VA Zip Code 22227-	
Purpose of Disbursement AIRFARE		[MEMO ITEM] MEMO: AIRFARE
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Elan Services - VISA		Transaction ID: E989 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address PO Box 790408		Amount of Each Disbursement this Period 5.00
City Saint Louis	State MO Zip Code 63179-	
Purpose of Disbursement CREDIT CARD FEES		CREDIT CARD FEES
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	5.00
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)

PAGE 24 / 37

<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)
NorthStar Leadership PAC

Full Name (Last, First, Middle Initial) A. Elan Services - VISA		Transaction ID: E1016 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6
Mailing Address PO Box 790408		Amount of Each Disbursement this Period 2352.15
City Saint Louis State MO Zip Code 63179-		
Purpose of Disbursement CREDIT CARD PAYMENT: SEE BELOW		CREDIT CARD PAYMENT: SEE BELOW
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Northwest Airlines		Transaction ID: E1022 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6
Mailing Address 70 E 6th Street		Amount of Each Disbursement this Period 1230.21
City Chaska State MN Zip Code 55318-		
Purpose of Disbursement AIRFARE		[MEMO ITEM] MEMO: AIRFARE
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Sage Travel		Transaction ID: E1020 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6
Mailing Address 1107 Hazeltine Blvd		Amount of Each Disbursement this Period 105.00
City Chaska State MN Zip Code 55318-		
Purpose of Disbursement AGENT FEES		[MEMO ITEM] MEMO: AGENT FEES
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2352.15
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)
NorthStar Leadership PAC

A. Sutton Place Hotel Full Name (Last, First, Middle Initial) Mailing Address 21 E Bellevue Pl City Chicago State IL Zip Code 60611-1174 Purpose of Disbursement LODGING - POLITICAL EVENT Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: E1023 Date of Disbursement 05 / 30 / 2006 Amount of Each Disbursement this Period 267.15 [MEMO ITEM] MEMO: LODGING - POLITICAL EVENT
---	--	--

B. United Airlines Full Name (Last, First, Middle Initial) Mailing Address 1107 Hazeltine City Chaska State MN Zip Code 55318- Purpose of Disbursement AIRFARE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: E1019 Date of Disbursement 05 / 30 / 2006 Amount of Each Disbursement this Period 309.30 [MEMO ITEM] MEMO: AIRFARE
---	--	--

C. United Airlines Full Name (Last, First, Middle Initial) Mailing Address 1107 Hazeltine City Chaska State MN Zip Code 55318- Purpose of Disbursement AIRFARE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: E1018 Date of Disbursement 05 / 30 / 2006 Amount of Each Disbursement this Period 309.30 [MEMO ITEM] MEMO: AIRFARE
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

**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)

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<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)
NorthStar Leadership PAC

Full Name (Last, First, Middle Initial) A. United Airlines		Transaction ID: E1017 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6
Mailing Address 1107 Hazeltine		Amount of Each Disbursement this Period 149.30
City Chaska State MN Zip Code 55318-	Purpose of Disbursement AIRFARE Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: AIRFARE

Full Name (Last, First, Middle Initial) B. Elan Services - VISA		Transaction ID: E1035 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 6
Mailing Address PO Box 790408		Amount of Each Disbursement this Period 5.00
City Saint Louis State MO Zip Code 63179-	Purpose of Disbursement CREDIT CARD FEES Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	CREDIT CARD FEES

Full Name (Last, First, Middle Initial) C. FedEx Kinkos		Transaction ID: E1024 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6
Mailing Address 8300 City Centre Drive		Amount of Each Disbursement this Period 102.64
City Woodbury State MN Zip Code 55125-	Purpose of Disbursement DELIVERY Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	DELIVERY

SUBTOTAL of Disbursements This Page (optional) ▶	107.64
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)

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<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)
NorthStar Leadership PAC

Full Name (Last, First, Middle Initial) A. Sarah Hazen		Transaction ID: E977 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 6	
Mailing Address 1484 Canfield		Amount of Each Disbursement this Period 215.05	
City Saint Paul State MN Zip Code 55108-	Purpose of Disbursement PAC ADMINISTRATIVE CONSULTANT	Category/ Type PAC ADMINISTRATIVE CONSULTANT	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Sarah Hazen		Transaction ID: E983 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6	
Mailing Address 1484 Canfield		Amount of Each Disbursement this Period 215.05	
City Saint Paul State MN Zip Code 55108-	Purpose of Disbursement PAC ADMINISTRATIVE CONSULTANT	Category/ Type PAC ADMINISTRATIVE CONSULTANT	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Sarah Hazen		Transaction ID: E993 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 1484 Canfield		Amount of Each Disbursement this Period 215.05	
City Saint Paul State MN Zip Code 55108-	Purpose of Disbursement PAC ADMINISTRATIVE CONSULTANT	Category/ Type PAC ADMINISTRATIVE CONSULTANT	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	645.15
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)

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<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)
NorthStar Leadership PAC

A. Sarah Hazen Full Name (Last, First, Middle Initial) Mailing Address 1484 Canfield City Saint Paul State MN Zip Code 55108-		Transaction ID: E1027 Date of Disbursement 05 / 30 / 2006 Amount of Each Disbursement this Period 195.50
Purpose of Disbursement PAC ADMINISTRATIVE CONSULTANT Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Category/Type PAC ADMINISTRATIVE CONSULTANT

B. Sarah Hazen Full Name (Last, First, Middle Initial) Mailing Address 1484 Canfield City Saint Paul State MN Zip Code 55108-		Transaction ID: E1033 Date of Disbursement 06 / 14 / 2006 Amount of Each Disbursement this Period 117.30
Purpose of Disbursement PAC ADMINISTRATIVE CONSULTANT Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Category/Type PAC ADMINISTRATIVE CONSULTANT

C. Loffler Companies Full Name (Last, First, Middle Initial) Mailing Address 1101 E 78th St Ste 200 City Minneapolis State MN Zip Code 55420-1402		Transaction ID: E994 Date of Disbursement 05 / 12 / 2006 Amount of Each Disbursement this Period 62.38
Purpose of Disbursement MAINTENANCE FEE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Category/Type MAINTENANCE FEE

SUBTOTAL of Disbursements This Page (optional) ▶	375.18
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)
NorthStar Leadership PAC

A. Elizabeth Maruggi Full Name (Last, First, Middle Initial) Mailing Address 660 Howell Street S City Saint Paul State MN Zip Code 55116-		Transaction ID: E980 Date of Disbursement 04 / 27 / 2006
Purpose of Disbursement PAC FUNDRAISING CONSULTANT Candidate Name		Amount of Each Disbursement this Period 625.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PAC FUNDRAISING CONSULTANT

B. Elizabeth Maruggi Full Name (Last, First, Middle Initial) Mailing Address 660 Howell Street S City Saint Paul State MN Zip Code 55116-		Transaction ID: E1025 Date of Disbursement 05 / 30 / 2006
Purpose of Disbursement PAC FUNDRAISING CONSULTANT Candidate Name		Amount of Each Disbursement this Period 625.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PAC FUNDRAISING CONSULTANT

C. Richard Nelson Full Name (Last, First, Middle Initial) Mailing Address 1975 Portland Ave City Saint Paul State MN Zip Code 55104-		Transaction ID: E985 Date of Disbursement 04 / 27 / 2006
Purpose of Disbursement PAC FUNDRAISING CONSULTANT Candidate Name		Amount of Each Disbursement this Period 2000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PAC FUNDRAISING CONSULTANT

SUBTOTAL of Disbursements This Page (optional)	3250.00
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)

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<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)
NorthStar Leadership PAC

Full Name (Last, First, Middle Initial) A. Richard Nelson		Transaction ID: E1026 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 1975 Portland Ave		Amount of Each Disbursement this Period 2000.00	
City Saint Paul State MN Zip Code 55104-	Purpose of Disbursement PAC FUNDRAISING CONSULTANT	Category/ Type PAC FUNDRAISING CONSULTANT	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Patton Boggs, LLP		Transaction ID: E976 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 6	
Mailing Address 2550 M Street NW		Amount of Each Disbursement this Period 517.02	
City Washington State DC Zip Code 20037-	Purpose of Disbursement LEGAL FEES	Category/ Type LEGAL FEES	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Patton Boggs, LLP		Transaction ID: E1032 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 6	
Mailing Address 2550 M Street NW		Amount of Each Disbursement this Period 281.46	
City Washington State DC Zip Code 20037-	Purpose of Disbursement LEGAL FEES	Category/ Type LEGAL FEES	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	2798.48
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)
NorthStar Leadership PAC

A. Full Name (Last, First, Middle Initial) St. Paul Hotel		Transaction ID: E992 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 350 Market St		Amount of Each Disbursement this Period 2292.97
City Saint Paul State MN Zip Code 55102-	PAC EVENT FOOD AND ROOM RENTAL	
Purpose of Disbursement PAC EVENT FOOD AND ROOM RENTAL		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) SuperValu		Transaction ID: E990 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6
Mailing Address PO Box 990		Amount of Each Disbursement this Period 927.90
City Minneapolis State MN Zip Code 55440-0990	AIRFARE REIMB.	
Purpose of Disbursement AIRFARE REIMB.		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) US Postmaster		Transaction ID: E978 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 6
Mailing Address 316 Robert Street North		Amount of Each Disbursement this Period 39.00
City Saint Paul State MN Zip Code 55101-	STAMPS	
Purpose of Disbursement STAMPS		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3259.87
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)

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<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)
NorthStar Leadership PAC

Full Name (Last, First, Middle Initial)

A. U.S. Treasury

Mailing Address U.S. Treasury

City Ogden State UT Zip Code 84201-

Purpose of Disbursement
FEDERAL TAXES

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: E991

Date of Disbursement

05 / 12 / 2006

Amount of Each Disbursement this Period

530.57

FEDERAL TAXES

SUBTOTAL of Disbursements This Page (optional)

530.57

TOTAL This Period (last page this line number only)

33480.46

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 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

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NAME OF COMMITTEE (In Full)
NorthStar Leadership PAC

Full Name (Last, First, Middle Initial) A. Bachmann for Congress		Transaction ID: E970 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address PO Box 49756		Amount of Each Disbursement this Period 5000.00
City Blaine State MN Zip Code 55449-0756	Purpose of Disbursement Category/Type	
Candidate Name MICHELE M BACHMANN	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Bouchard for US Senate		Transaction ID: E1040 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address PO Box 159		Amount of Each Disbursement this Period 5000.00
City Royal Oak State MI Zip Code 48068-	Purpose of Disbursement Category/Type	
Candidate Name MICHAEL J BOUCHARD	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Friends of Mike McGavick		Transaction ID: E1034 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 9 / 2 0 0 6
Mailing Address PO Box 9247		Amount of Each Disbursement this Period 5000.00
City Seattle State WA Zip Code 98109-0247	Purpose of Disbursement Category/Type	
Candidate Name MICHAEL SEAN MCGAVICK	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 00	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	15000.00
TOTAL This Period (last page this line number only) ▶	(Empty field)

**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 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

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NAME OF COMMITTEE (In Full)
NorthStar Leadership PAC

Full Name (Last, First, Middle Initial) A. Friends of George Allen		Transaction ID: E1000 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6
Mailing Address PO Box 6859		Amount of Each Disbursement this Period 5000.00
City Arlington State VA Zip Code 22206-0859	Category/ Type	
Purpose of Disbursement		
Candidate Name GEORGE ALLEN		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 00	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Jerry Weller for Congress		Transaction ID: E975 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 6
Mailing Address 1155 21st St NW Ste 330		Amount of Each Disbursement this Period 2000.00
City Washington State DC Zip Code 20036-3308	Category/ Type	
Purpose of Disbursement		
Candidate Name GERALD C JERRY WELLER		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 11	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Michael Barrett for Congress		Transaction ID: E999 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address PO Box 240		Amount of Each Disbursement this Period 5000.00
City Long Prairie State MN Zip Code 56347-0240	Category/ Type	
Purpose of Disbursement		
Candidate Name MICHAEL JAMES BARRETT		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 07	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	12000.00
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 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

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NAME OF COMMITTEE (In Full)
NorthStar Leadership PAC

Full Name (Last, First, Middle Initial) A. Michael Steele Exploratory Committee		Transaction ID: E986 Date of Disbursement																					
Mailing Address PO Box 347		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	7		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		2	7		2	0	0	6														
City Annapolis	State MD	Zip Code 21404-	Amount of Each Disbursement this Period																				
Purpose of Disbursement		<input type="text"/>	<input type="text" value="4900.00"/>																				
Candidate Name MICHAEL STEELE		Category/ Type																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: MD	District: 03																						

Full Name (Last, First, Middle Initial) B. Nebraska Families for Pete Ricketts, Inc		Transaction ID: E973 Date of Disbursement																					
Mailing Address 11225 Davenport St Ste 108		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		2	3		2	0	0	6														
City Omaha	State NE	Zip Code 68154-2641	Amount of Each Disbursement this Period																				
Purpose of Disbursement		<input type="text"/>	<input type="text" value="5000.00"/>																				
Candidate Name PETE RICKETTS		Category/ Type																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: NE	District: 00																						

Full Name (Last, First, Middle Initial) C. Raese for Senate Committee		Transaction ID: E969 Date of Disbursement																					
Mailing Address PO Box 262		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		2	3		2	0	0	6														
City Morgantown	State WV	Zip Code 26507-0262	Amount of Each Disbursement this Period																				
Purpose of Disbursement		<input type="text"/>	<input type="text" value="5000.00"/>																				
Candidate Name JOHN REEVES RAESE		Category/ Type																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: WV	District: 00																						

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="14900.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 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

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NAME OF COMMITTEE (In Full)
NorthStar Leadership PAC

Full Name (Last, First, Middle Initial) A. Rod Grams for Congress		Transaction ID: E972	
Mailing Address PO Box 16070		Date of Disbursement 05 / 23 / 2006	
City Duluth	State MN	Zip Code 55816-0070	Amount of Each Disbursement this Period 5000.00
Purpose of Disbursement PRIMARY CONTRIBUTION		Category/ Type	
Candidate Name RODNEY DWIGHT GRAMS		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MN District: 08		

PRIMARY CONTRIBUTION

Full Name (Last, First, Middle Initial) B. Tom Kean For US Senate		Transaction ID: E987	
Mailing Address PO Box 225		Date of Disbursement 04 / 27 / 2006	
City Colonia	State NJ	Zip Code 07067-0225	Amount of Each Disbursement this Period 4900.00
Purpose of Disbursement		Category/ Type	
Candidate Name THOMAS H JR KEAN		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NJ District: 00		

SUBTOTAL of Disbursements This Page (optional)	9900.00
TOTAL This Period (last page this line number only)	51800.00

Form/Schedule: **F3XA**

Transaction ID: **C00386573**

Regarding the letter of July 28, 2006, on Schedule A supporting Line 11(c) we have amended our report so that individuals are no longer in the address line of PAC contributions. The individuals listed were contact names and the contributions were not earmarked contributions. As to our administrative expenses, you will note that on page 27 of the report there are payments made to Sarah Hazen as an administrative consultant. As to rent, utilities, telephone service and supplies, we are billed by FLS Connect for these services. We are billed regularly and regularly report these expenses. The next payment will be disclosed on our 3rd quarter filing.