



**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Nolan for Congress Volunteer Committee**

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2014 To: M M / D D / Y Y Y Y 07 / 23 / 2014

|   | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|---|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans)   |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e))....   | 88621.22                | 1177902.79                         |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....   | 0.00                    | 8762.00                            |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)).....                            | 88621.22                | 1169140.79                         |
| 7. Net Operating Expenditures   |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....  | 43312.85                | 588656.76                          |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14).....  | 0.00                    | 26550.53                           |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)).....                                      | 43312.85                | 562106.23                          |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27).....   | 624494.70               |                                    |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D).....  | 0.00                    |                                    |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D)..... | 19563.36                |                                    |

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Nolan for Congress Volunteer Committee**

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

| <b>I. RECEIPTS</b>   | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Election Cycle-to-Date</b> |
|--|---------------------------------------|--|
| <b>11. CONTRIBUTIONS (other than loans) FROM:</b>  |                                       |  |
| (a) Individuals/Persons Other Than Political Committees  |                                       |  |
| (i) Itemized (use Schedule A).....   | 27485.00                              | 414736.31                                  |
| (ii) Unitemized.....   | 11836.22                              | 153755.27                                  |
| (iii) TOTAL of contributions from individuals ▶  | 39321.22                              | 568491.58                                  |
| (b) Political Party Committees.....  | 500.00                                | 2123.14                                    |
| (c) Other Political Committees (such as PACs).....   | 48800.00                              | 607288.07                                  |
| (d) The Candidate.....   | 0.00                                  | 0.00                                       |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..                     | 88621.22                              | 1177902.79                                 |
| <b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>  | 0.00                                  | 0.00                                       |
| <b>13. LOANS:</b>  |                                       |  |
| (a) Made or Guaranteed by the Candidate.....   | 0.00                                  | 0.00                                       |
| (b) All Other Loans.....   | 0.00                                  | 0.00                                       |
| (c) TOTAL LOANS (add Lines 13(a) and (b)).....   | 0.00                                  | 0.00                                       |
| <b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>                                | 0.00                                  | 26550.53                                   |
| <b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>  | 0.00                                  | 0.00                                       |
| <b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b> | 88621.22                              | 1204453.32                                 |

**DETAILED SUMMARY PAGE**  
of Disbursements

| II. DISBURSEMENTS  | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES.....  | 43312.85                      | 588656.76                          |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES .....                        | 0.00                          | 0.00                               |
| 19. LOAN REPAYMENTS:   |                               |                                    |
| (a) Of Loans Made or Guaranteed<br>by the Candidate.....                     | 0.00                          | 0.00                               |
| (b) Of All Other Loans .....   | 0.00                          | 0.00                               |
| (c) TOTAL LOAN REPAYMENTS<br>(add Lines 19(a) and (b)).....                  | 0.00                          | 0.00                               |
| 20. REFUNDS OF CONTRIBUTIONS TO:   |                               |                                    |
| (a) Individuals/Persons Other<br>Than Political Committees .....             | 0.00                          | 3262.00                            |
| (b) Political Party Committees.....  | 0.00                          | 0.00                               |
| (c) Other Political Committees<br>(such as PACs).....                        | 0.00                          | 5500.00                            |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c)).....       | 0.00                          | 8762.00                            |
| 21. OTHER DISBURSEMENTS .....  | 0.00                          | 47563.67                           |
| 22. <b>TOTAL DISBURSEMENTS</b><br>(add Lines 17, 18, 19(c), 20(d), and 21) ► | 43312.85                      | 644982.43                          |

**III. CASH SUMMARY**

|   |           |
|---|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                                | 579186.33 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....                            | 88621.22  |
| 25. SUBTOTAL (add Line 23 and Line 24).....   | 667807.55 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                               | 43312.85  |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25)..... | 624494.70 |

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

|   |  |              |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 5 OF 71 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |              |

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)  
**Nolan for Congress Volunteer Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Robert Watkins**

Mailing Address 75 W End Ave  
Apt P10B

City State Zip Code  
New York NY 10023-7872

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

Name of Employer self Occupation writer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 02 / 2014

**Transaction ID : C10378940**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Kathrine Lehmann**

Mailing Address 895 Nebraska Ave W

City State Zip Code  
Saint Paul MN 55117-3327

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

Name of Employer Beaver Bay Inc. Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 21 / 2014

**Transaction ID : C10401020**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Karen Burthwick**

Mailing Address 22736 County Road 434

City State Zip Code  
Bovey MN 55709-8392

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 02 / 2014

**Transaction ID : C10397780**

Amount of Each Receipt this Period  
50.00

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

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

550.00

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

|   |  |              |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 6 OF 71 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |              |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Nancy Eggen Melin**

Mailing Address 2905 4th Ave E

City Hibbing State MN Zip Code 55746-2569

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

Name of Employer St. Louis County Occupation Social Worker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 02 / 2014

**Transaction ID : C10397820**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Gumecindo Ybarra**

Mailing Address 2811 E Mile 9 1/2 N

City Donna State TX Zip Code 78537-8157

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

Name of Employer Metricia, Inc. Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 21 / 2014

**Transaction ID : C10403690**

Amount of Each Receipt this Period  
**2600.00**

**C.** Full Name (Last, First, Middle Initial)  
**Sheldon S. Sturgis**

Mailing Address 1819 Mount Curve Ave

City Minneapolis State MN Zip Code 55403-1019

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

Name of Employer Performance Seed Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 14 / 2014

**Transaction ID : C10399950**

Amount of Each Receipt this Period  
**500.00**

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

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

**3200.00**

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

|   |  |              |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 7 OF 71 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |              |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Michael J. Driver**

Mailing Address 6500 Whaley Dr

City Boulder State CO Zip Code 80303-4338

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

Name of Employer Squire Patton Boggs Occupation Lawyer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 21 / 2014

**Transaction ID : C10400180**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Robert J. McFarlin Jr.**

Mailing Address 4240 Winchester Ct

City Minnetonka State MN Zip Code 55345-2555

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

Name of Employer Twin Metals Minnesota Occupation VP - Public and Govt. Affairs

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 02 / 2014

**Transaction ID : C10397821**

Amount of Each Receipt this Period  
 100.00

**C.** Full Name (Last, First, Middle Initial)  
**Kevin T. Walli**

Mailing Address 1797 Wellesley Ave

City Saint Paul State MN Zip Code 55105-2011

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

Name of Employer Fryberger Buchannan Smith & Frederick Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 18 / 2014

**Transaction ID : C10403631**

Amount of Each Receipt this Period  
 1000.00

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

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

2100.00

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

|   |  |              |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 8 OF 71 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |              |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Geoffrey G. Peterson**

Mailing Address 501 Slaters Ln  
Apt 7

City Alexandria State VA Zip Code 22314-1114

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

Name of Employer The Peterson Group Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 23 / 2014

**Transaction ID : C10405041**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Doug J. Johnson**

Mailing Address 1136 Lagoon Rd

City Tower State MN Zip Code 55790-8138

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

Name of Employer D&D Consulting Occupation Government Affairs

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 14 / 2014

**Transaction ID : C10399951**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Michael S. Fall**

Mailing Address 2990 Fraser St

City Grand Rapids State MN Zip Code 55744-4508

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

Name of Employer City of LaPrairie Occupation Mayor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 02 / 2014

**Transaction ID : C10397782**

Amount of Each Receipt this Period  
 50.00

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

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

1550.00

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

|   |  |              |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 9 OF 71 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |              |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Greg A. Topel**

Mailing Address 503 E 16th street

City Hibbing State MN Zip Code 55746

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

Name of Employer IBEW LU 294 Occupation business Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 02 / 2014

**Transaction ID : C10397812**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Darlene C. Voltin**

Mailing Address 18701 Stratford Rd Apt 122

City Minnetonka State MN Zip Code 55345-4044

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

Name of Employer FMCS Occupation Mediator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2100.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 02 / 2014

**Transaction ID : C10397822**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Betty B Ryan**

Mailing Address 11221 Hamilton Cir

City Pequot Lakes State MN Zip Code 56472-3576

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

Name of Employer Lakes Country echo Occupation Reporter

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **325.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 21 / 2014

**Transaction ID : C10403622**

Amount of Each Receipt this Period  
**300.00**

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

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

**500.00**

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 10 OF 71 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Harold A. Frederick**

Mailing Address 1030 Missouri Ave

City Duluth State MN Zip Code 55811-4922

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

Name of Employer: Fryberger, Buchanan, Smith and Frederi Occupation: Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 07 / 18 / 2014

**Transaction ID : C10403632**

Amount of Each Receipt this Period: 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Mary L. Henrickson**

Mailing Address 10256 Colorado Rd

City Bloomington State MN Zip Code 55438-1842

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

Name of Employer: quality bicycle products Occupation: board of directors

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 07 / 01 / 2014

**Transaction ID : C10378843**

Amount of Each Receipt this Period: 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Bill J Hansen Sr.**

Mailing Address PO Box 530

City Walker State MN Zip Code 56484-0530

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

Name of Employer: Retired Occupation: Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2100.00

Date of Receipt: 07 / 09 / 2014

**Transaction ID : C10390403**

Amount of Each Receipt this Period: 500.00

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

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

1500.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 11 OF 71 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Kelly Osborne**

Mailing Address 2730 W Lake St  
Apt 609

City State Zip Code  
Minneapolis MN 55416-4687

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

Name of Employer Occupation  
Duluth Metals President & CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 15 / 2014

**Transaction ID : C10396013**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Marvin Dee**

Mailing Address 380 Saint Peter St  
Ste 740

City State Zip Code  
Saint Paul MN 55102-1324

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

Name of Employer Occupation  
Duluth Metals Limited CFO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 17 / 2014

**Transaction ID : C10397053**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Thomas G. Mattson**

Mailing Address 6477 E Barker Rd

City State Zip Code  
Gilbert MN 55741-8110

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 02 / 2014

**Transaction ID : C10397803**

Amount of Each Receipt this Period  
200.00

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

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

1450.00

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

|   |   |               |
|---|---|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 12 OF 71 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |               |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Elizabeth Piper-Bach**

Mailing Address 21013 Starflower Way

City Ashburn State VA Zip Code 20147-4701

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

Name of Employer National Automobile Dealers Associatio Occupation VP, Retirement Administrators

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 02 / 2014**

**Transaction ID : C10397813**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**David Trach**

Mailing Address 139 2nd St N

City Eveleth State MN Zip Code 55734-1216

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

Name of Employer n/a Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**320.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 02 / 2014**

**Transaction ID : C10397833**

Amount of Each Receipt this Period  
**70.00**

**C.** Full Name (Last, First, Middle Initial)  
**Timothy Q. Moore**

Mailing Address 7837 Lost Lake Trail

City Lake Shore State MN Zip Code 56468-3002

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

Name of Employer Not employed Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 21 / 2014**

**Transaction ID : C10403623**

Amount of Each Receipt this Period  
**200.00**

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

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

**520.00**

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 13 OF 71 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Thomas A. Daschle**

Mailing Address 2830 Foxhall Rd NW

City Washington State DC Zip Code 20007-1129

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

Name of Employer DLA Piper Occupation Senior Policy Advisor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 23 / 2014

**Transaction ID : C10405043**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**John W. Windhorst Jr.**

Mailing Address 6566 France Ave S Apt 204

City Minneapolis State MN Zip Code 55435-1709

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

Name of Employer n/a Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 23 / 2014

**Transaction ID : C10405103**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Mark Cowan**

Mailing Address 1111 Belle Pre Way

City Alexandria State VA Zip Code 22314-6411

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

Name of Employer Cowan Strategies Occupation attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 20 / 2014

**Transaction ID : C10399943**

Amount of Each Receipt this Period  
**1000.00**

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

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

**2250.00**

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 14 OF 71 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Robert L. Olson**

Mailing Address 703 Arrowhead St

City Aurora State MN Zip Code 55705-1201

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 14 / 2014

**Transaction ID : C10399953**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Nancy C. Hutchinson**

Mailing Address PO Box 247

City Superior State WI Zip Code 54880-0247

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

Name of Employer MN Power Employee Credit Union Occupation SVP Marketing

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 14 / 2014

**Transaction ID : C10399963**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Fond du Lac Band**

Mailing Address Karen Diver, Chairwoman  
1720 Big Lake Rd

City Cloquet State MN Zip Code 55720-9702

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 23 / 2014

**Transaction ID : C10405924**

Amount of Each Receipt this Period  
**600.00**

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

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

**1200.00**

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 15 OF 71 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Frank S. Wilkinson**

Mailing Address 188 Bank St SE

City State Zip Code  
Minneapolis MN 55414-1042

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

Name of Employer Occupation  
n/a retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 16 / 2014

**Transaction ID : C10396984**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Robert K. Johnson**

Mailing Address 230 2nd St NE

City State Zip Code  
Harmony MN 55939-8826

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 14 / 2014

**Transaction ID : C10399954**

Amount of Each Receipt this Period  
2600.00

**C.** Full Name (Last, First, Middle Initial)  
**David Oberstar**

Mailing Address 525 Crystal Dr

City State Zip Code  
Duluth MN 55811-4415

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

Name of Employer Occupation  
Fryberger Buchanan Smith & Federick PA Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 18 / 2014

**Transaction ID : C10403634**

Amount of Each Receipt this Period  
250.00

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

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

3100.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 16 OF 71 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Robert J. McFarlin Jr.**

Mailing Address 4240 Winchester Ct

City State Zip Code  
Minnetonka MN 55345-2555

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

Name of Employer Occupation  
Twin Metals Minnesota VP - Public and Govt. Affairs

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**625.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 18 / 2014

**Transaction ID : C10403644**

Amount of Each Receipt this Period  
**150.00**

**B.** Full Name (Last, First, Middle Initial)  
**Karen Burthwick**

Mailing Address 22736 County Road 434

City State Zip Code  
Bovey MN 55709-8392

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 23 / 2014

**Transaction ID : C10405114**

Amount of Each Receipt this Period  
**25.00**

**C.** Full Name (Last, First, Middle Initial)  
**Fond du Lac Band**

Mailing Address Karen Diver, Chairwoman  
1720 Big Lake Rd

City State Zip Code  
Cloquet MN 55720-9702

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 23 / 2014

**Transaction ID : C10405925**

Amount of Each Receipt this Period  
**2400.00**

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

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

**2575.00**

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 17 OF 71 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Louis Fors Hill**

Mailing Address 5973 Royal Oaks Dr

City Shoreview State MN Zip Code 55126-3400

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

Name of Employer Rockwood Capital Management, Inc. Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 15 / 2014

**Transaction ID : C10396235**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**George A. Erickson**

Mailing Address 4678 Cedar Island Dr

City Eveleth State MN Zip Code 55734-4036

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

Name of Employer n/a Occupation Not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 02 / 2014

**Transaction ID : C10397815**

Amount of Each Receipt this Period  
 50.00

**C.** Full Name (Last, First, Middle Initial)  
**David J. McMillan**

Mailing Address 2724 Greysolon Rd

City Duluth State MN Zip Code 55812-2308

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

Name of Employer Minnesota Power Occupation Executive VP

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 18 / 2014

**Transaction ID : C10403645**

Amount of Each Receipt this Period  
 150.00

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

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

700.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 18 OF 71 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Eugene M. Renkin**

Mailing Address 1515 Shasta Dr  
Apt 1204

City State Zip Code  
Davis CA 95616-6676

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

Name of Employer Occupation  
n/a retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 23 / 2014

**Transaction ID : C10405105**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Nancy C. Hutchinson**

Mailing Address PO Box 247

City State Zip Code  
Superior WI 54880-0247

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

Name of Employer Occupation  
MN Power Employee Credit Union SVP Marketing

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 14 / 2014

**Transaction ID : C10399965**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Ruth Ann Jorgenson**

Mailing Address 516 Hidden View Rd

City State Zip Code  
Carlton MN 55718-9602

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

Name of Employer Occupation  
City of Thomson city clerk

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
240.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 17 / 2014

**Transaction ID : C10397096**

Amount of Each Receipt this Period  
20.00

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

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

220.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 19 OF 71 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Frank M. Ongaro**

Mailing Address 2910 Branch St

City Duluth State MN Zip Code 55812-2339

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

Name of Employer self employed Occupation mining director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 02 / 2014

**Transaction ID : C10397816**

Amount of Each Receipt this Period  
**150.00**

**B.** Full Name (Last, First, Middle Initial)  
**Aleava Rael Sayre**

Mailing Address 823 Hague Ave  
Unit 1

City Saint Paul State MN Zip Code 55104-6776

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

Name of Employer Stinson Leonard Street LLP Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 18 / 2014

**Transaction ID : C10403636**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**William Cameron**

Mailing Address 1920 Drew Ave S

City Minneapolis State MN Zip Code 55416-3618

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

Name of Employer Hanson & Efron Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 23 / 2014

**Transaction ID : C10405136**

Amount of Each Receipt this Period  
**150.00**

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

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

**550.00**

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 20 OF 71 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Erika M. Sitz**

Mailing Address 6521 154th Ln NW

City Ramsey State MN Zip Code 55303-4031

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

Name of Employer n/a Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 21 / 2014

**Transaction ID : C10403627**

Amount of Each Receipt this Period  
 150.00

Amount of Each Receipt this Period  
 400.00

**B.** Full Name (Last, First, Middle Initial)  
**Byron E Starns**

Mailing Address 2279 Riverwood Pl

City Saint Paul State MN Zip Code 55104-5648

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

Name of Employer Stinson Leonard Street LLP Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 18 / 2014

**Transaction ID : C10403637**

Amount of Each Receipt this Period  
 250.00

Amount of Each Receipt this Period  
 1250.00

**C.** Full Name (Last, First, Middle Initial)  
**David L. Strand**

Mailing Address 33801 446th Pl

City Aitkin State MN Zip Code 56431-5089

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

Name of Employer retired Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 08 / 2014

**Transaction ID : C10387987**

Amount of Each Receipt this Period  
 100.00

Amount of Each Receipt this Period  
 550.00

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

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

500.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 21 OF 71 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Bill K. Erickson**

Mailing Address 27930 Smithtown Rd

City Excelsior State MN Zip Code 55331-7911

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

Name of Employer n/a Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 23 / 2014

**Transaction ID : C10405087**

Amount of Each Receipt this Period  
 500.00

600.00

**B.** Full Name (Last, First, Middle Initial)  
**James Jackson**

Mailing Address 90 Inverrary Rd

City Pinehurst State NC Zip Code 28374-6901

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

Name of Employer Self employed Occupation Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 17 / 2014

**Transaction ID : C10397098**

Amount of Each Receipt this Period  
 1000.00

1000.00

**C.** Full Name (Last, First, Middle Initial)  
**John E. Ongaro**

Mailing Address 109 Waverly Pl

City Duluth State MN Zip Code 55803-2422

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

Name of Employer St. Louis County Occupation Lobbyist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 02 / 2014

**Transaction ID : C10397818**

Amount of Each Receipt this Period  
 100.00

400.00

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

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

1600.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 22 OF 71 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Thomas E. Anzelc**

Mailing Address 44205 Burrows Lake Ln

City State Zip Code  
Bovey MN 55709-5539

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

Name of Employer Occupation  
MN State House Representative

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 02 / 2014

**Transaction ID : C10397788**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Dennis M. McGrann**

Mailing Address 150 N Carolina Ave SE

City State Zip Code  
Washington DC 20003-1841

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

Name of Employer Occupation  
Lockridge Grindal Nauen Federal Relati Director of Federal Public Affairs

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
220.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 02 / 2014

**Transaction ID : C10397808**

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
**Ronald R Dicklich**

Mailing Address 31621 Spruce Dr

City State Zip Code  
Pengilly MN 55775-2055

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

Name of Employer Occupation  
Self Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 02 / 2014

**Transaction ID : C10397828**

Amount of Each Receipt this Period  
100.00

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

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

550.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 23 OF 71 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Phillip C. Larson**

Mailing Address 120 Greenwood Ln

City Duluth State MN Zip Code 55803-2409

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

Name of Employer Duluth Metals Ltd Occupation geologist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 18 / 2014

**Transaction ID : C10403648**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Gregory A. Fontaine**

Mailing Address 10624 Humboldt Ave S

City Minneapolis State MN Zip Code 55431-4123

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

Name of Employer Stinson Leonard Street LLP Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 18 / 2014

**Transaction ID : C10403638**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Burma Olson Brekke**

Mailing Address 13278 Deerwood Trl

City Crosslake State MN Zip Code 56442-4038

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

Name of Employer n/a Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **850.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 23 / 2014

**Transaction ID : C10405138**

Amount of Each Receipt this Period  
**250.00**

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

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

**750.00**

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 24 OF 71 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

**A.** Full Name (Last, First, Middle Initial)  
**John Bradovich**

Mailing Address 108 5th St SW

City Chisholm State MN Zip Code 55719-2023

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 23 / 2014

**Transaction ID : C10405089**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Bernie H. Beaver**

Mailing Address 6225 Fox Meadow Ln

City Minneapolis State MN Zip Code 55436-1161

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

Name of Employer n/a Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 23 / 2014

**Transaction ID : C10405099**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Frank Altman**

Mailing Address 2515 Ridgewater Drive

City Minnetonka State MN Zip Code 55304

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

Name of Employer Community Reinvestment Fund, Inc. Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **625.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 18 / 2014

**Transaction ID : C10404000A**

Amount of Each Receipt this Period  
**125.00**

\* Earmarked Contribution: See Below

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

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

**325.00**

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 25 OF 71 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

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

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_  
Conduit total listed in Agg. field \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_  
**8740.22**

Date of Receipt  

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 20  |   | 2014    |

**Transaction ID : C10404000AB**

Amount of Each Receipt this Period  

|        |
|--------|
| 125.00 |
|--------|

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial)  
**Barbara L. Forster**

Mailing Address **901 S. 2nd St. #603**

City **Mpls** State **MN** Zip Code **55415**

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

Name of Employer **n/a** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_  
**4750.00**

Date of Receipt  

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 18  |   | 2014    |

**Transaction ID : C10404030A**

Amount of Each Receipt this Period  

|        |
|--------|
| 250.00 |
|--------|

\* Earmarked Contribution: See Below

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

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_  
Conduit total listed in Agg. field \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_  
**8740.22**

Date of Receipt  

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 20  |   | 2014    |

**Transaction ID : C10404030AB**

Amount of Each Receipt this Period  

|        |
|--------|
| 250.00 |
|--------|

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

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

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

|        |
|--------|
| 250.00 |
|        |

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 26 OF 71 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Linda A. Kittler**

Mailing Address **PO Box 278**

City **Isle** State **MN** Zip Code **56342-0278**

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

Name of Employer **Not employed** Occupation **Not employed**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **220.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 11 / 2014**

**Transaction ID : C10400130A**

Amount of Each Receipt this Period  
**50.00**

\* Earmarked Contribution: See Below

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

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation **Conduit total listed in Agg. field**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **8740.22**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 13 / 2014**

**Transaction ID : C10400130AB**

Amount of Each Receipt this Period  
**50.00**

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

**C.** Full Name (Last, First, Middle Initial)  
**Samuel L. Stern**

Mailing Address **175 Game Farm Road N.**

City **Independence** State **MN** Zip Code **55359-9492**

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

Name of Employer **Samuel L. Stern P.L.L.C.** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **515.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 17 / 2014**

**Transaction ID : C10403972A**

Amount of Each Receipt this Period  
**15.00**

\* Earmarked Contribution: See Below

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

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

**65.00**

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 27 OF 71 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

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

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_  
Conduit total listed in Agg. field \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_  
**8740.22**

Date of Receipt  

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 20  |   | 2014    |

**Transaction ID : C10403972AB**

Amount of Each Receipt this Period  

|       |       |       |       |       |
|-------|-------|-------|-------|-------|
| _____ | _____ | _____ | _____ | _____ |
|       |       |       |       | 15.00 |

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial)  
**Tim Nolan**

Mailing Address **5431 Pleasant Avenue South**

City **Minneapolis** State **MN** Zip Code **55419**

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

Name of Employer **Self** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_  
**500.00**

Date of Receipt  

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 18  |   | 2014    |

**Transaction ID : C10404032A**

Amount of Each Receipt this Period  

|       |       |       |       |        |
|-------|-------|-------|-------|--------|
| _____ | _____ | _____ | _____ | _____  |
|       |       |       |       | 100.00 |

\* Earmarked Contribution: See Below

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

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_  
Conduit total listed in Agg. field \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_  
**8740.22**

Date of Receipt  

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 20  |   | 2014    |

**Transaction ID : C10404032AB**

Amount of Each Receipt this Period  

|       |       |       |       |        |
|-------|-------|-------|-------|--------|
| _____ | _____ | _____ | _____ | _____  |
|       |       |       |       | 100.00 |

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

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

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

|       |       |       |       |        |
|-------|-------|-------|-------|--------|
| _____ | _____ | _____ | _____ | _____  |
|       |       |       |       | 100.00 |

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 28 OF 71 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Betty Jo Scarrow**

Mailing Address 38422 Oasis Road

City LINDSTROM State MN Zip Code 55045

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

Name of Employer none Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 19 / 2014

**Transaction ID : C10404062A**

Amount of Each Receipt this Period  
 75.00

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **8740.22**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 20 / 2014

**Transaction ID : C10404062AB**

Amount of Each Receipt this Period  
 75.00

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

**C.** Full Name (Last, First, Middle Initial)  
**Arvonne S. Fraser**

Mailing Address 110 Bank St SE #503

City Minneapolis State MN Zip Code 55414

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

Name of Employer none Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 16 / 2014

**Transaction ID : C10403943A**

Amount of Each Receipt this Period  
 100.00

\* Earmarked Contribution: See Below

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

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

175.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 29 OF 71 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

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

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_  
Conduit total listed in Agg. field \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_  
**8740.22**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 20 / 2014**

**Transaction ID : C10403943AB**

Amount of Each Receipt this Period  
 \_\_\_\_\_  
**100.00**

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial)  
**Julie K. Straw**

Mailing Address **12404 Arrowhead Lane**

City **Crosslake** State **MN** Zip Code **56442**

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

Name of Employer **John Wiley & Sons** Occupation **Executive**

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_  
**1300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 15 / 2014**

**Transaction ID : C10403924A**

Amount of Each Receipt this Period  
 \_\_\_\_\_  
**100.00**

\* Earmarked Contribution: See Below

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

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_  
Conduit total listed in Agg. field \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_  
**8740.22**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 20 / 2014**

**Transaction ID : C10403924AB**

Amount of Each Receipt this Period  
 \_\_\_\_\_  
**100.00**

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

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

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

\_\_\_\_\_

\_\_\_\_\_

**100.00**

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 30 OF 71 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Darlene Anderson**

Mailing Address 22585 E.Lake Hubert Dr.

City Brainerd State MN Zip Code 56401

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

Name of Employer none Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
235.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 16 / 2014

**Transaction ID : C10403955A**

Amount of Each Receipt this Period  
25.00

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
8740.22

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 20 / 2014

**Transaction ID : C10403955AB**

Amount of Each Receipt this Period  
25.00

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

**C.** Full Name (Last, First, Middle Initial)  
**Frederick Smith**

Mailing Address 1425 W. 28th St. #221

City Minneapolis State MN Zip Code 55408

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

Name of Employer none Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 18 / 2014

**Transaction ID : C10404015A**

Amount of Each Receipt this Period  
200.00

\* Earmarked Contribution: See Below

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

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

225.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 31 OF 71 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

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

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_  
Conduit total listed in Agg. field \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_  
**8740.22**

Date of Receipt  

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 20  |   | 2014    |

**Transaction ID : C10404015AB**

Amount of Each Receipt this Period  

|        |
|--------|
| 200.00 |
|--------|

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial)  
**Robert Meek**

Mailing Address **2680 Oxford St. N., #145**

City **Roseville** State **MN** Zip Code **55113-2026**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_  
Self-Employed **Writer**

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_  
**375.00**

Date of Receipt  

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 07  |   | 2014    |

**Transaction ID : C10400105A**

Amount of Each Receipt this Period  

|       |
|-------|
| 25.00 |
|-------|

\* Earmarked Contribution: See Below

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

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_  
Conduit total listed in Agg. field \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_  
**8740.22**

Date of Receipt  

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 13  |   | 2014    |

**Transaction ID : C10400105AB**

Amount of Each Receipt this Period  

|       |
|-------|
| 25.00 |
|-------|

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

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

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

|       |
|-------|
| 25.00 |
|       |

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 32 OF 71 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

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

Mailing Address 712 Saddle Wood Drive

City Eagan State MN Zip Code 55123-1692

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

Name of Employer self Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 10 / 2014

**Transaction ID : C10400125A**

Amount of Each Receipt this Period  
500.00

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
8740.22

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 13 / 2014

**Transaction ID : C10400125AB**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

**C.** Full Name (Last, First, Middle Initial)  
**Judith Lee Stone**

Mailing Address 15 2nd St NE

City Washington State DC Zip Code 20002

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

Name of Employer n/a Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
485.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 16 / 2014

**Transaction ID : C10403946A**

Amount of Each Receipt this Period  
35.00

\* Earmarked Contribution: See Below

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

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

535.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 33 OF 71 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

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

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_  
Conduit total listed in Agg. field \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_  
**8740.22**

Date of Receipt  

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 20  |   | 2014    |

**Transaction ID : C10403946AB**

Amount of Each Receipt this Period  

|       |       |       |       |              |
|-------|-------|-------|-------|--------------|
| _____ | _____ | _____ | _____ | _____        |
|       |       |       |       | <b>35.00</b> |

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial)  
**Robert W. Knighton**

Mailing Address **2011 Featherstone Drive**

City **Duluth** State **MN** Zip Code **55803-2244**

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

Name of Employer **Not employed** Occupation **Not employed**

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_  
**550.00**

Date of Receipt  

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 22  |   | 2014    |

**Transaction ID : C10405077A**

Amount of Each Receipt this Period  

|       |       |       |       |               |
|-------|-------|-------|-------|---------------|
| _____ | _____ | _____ | _____ | _____         |
|       |       |       |       | <b>100.00</b> |

\* Earmarked Contribution: See Below

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

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_  
Conduit total listed in Agg. field \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_  
**8740.22**

Date of Receipt  

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 23  |   | 2014    |

**Transaction ID : C10405077AB**

Amount of Each Receipt this Period  

|       |       |       |       |               |
|-------|-------|-------|-------|---------------|
| _____ | _____ | _____ | _____ | _____         |
|       |       |       |       | <b>100.00</b> |

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

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

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

|       |       |       |       |               |
|-------|-------|-------|-------|---------------|
| _____ | _____ | _____ | _____ | _____         |
|       |       |       |       | <b>100.00</b> |
| _____ | _____ | _____ | _____ | _____         |

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 34 OF 71 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Jill G. Sletten**

Mailing Address 199 Carol Lane

City Saint Paul State MN Zip Code 55118-4539

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

Name of Employer Sletten Government Affairs & Public Po Occupation lobbyist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **210.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 15 / 2014

**Transaction ID : C10403928A**

Amount of Each Receipt this Period  
 25.00

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **8740.22**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 20 / 2014

**Transaction ID : C10403928AB**

Amount of Each Receipt this Period  
 25.00

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

**C.** Full Name (Last, First, Middle Initial)  
**Craig Trygstad**

Mailing Address 3930 Country Club Drive

City Lewiston State ID Zip Code 83501-8628

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

Name of Employer Self Occupation Education writer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 18 / 2014

**Transaction ID : C10404008A**

Amount of Each Receipt this Period  
 75.00

\* Earmarked Contribution: See Below

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

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

100.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 35 OF 71 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

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

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**8740.22**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 20 / 2014**

**Transaction ID : C10404008AB**

Amount of Each Receipt this Period  
**75.00**

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial)  
**Robert W. Mohs**

Mailing Address **3270 North Lake Shore Drive**

City **Chicago** State **IL** Zip Code **60657**

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

Name of Employer Occupation  
**none not employed**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1100.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 02 / 2014**

**Transaction ID : C10400058A**

Amount of Each Receipt this Period  
**100.00**

\* Earmarked Contribution: See Below

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

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**8740.22**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 06 / 2014**

**Transaction ID : C10400058AB**

Amount of Each Receipt this Period  
**100.00**

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

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

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

**100.00**

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)   | PAGE 36 OF 71 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Jeske I. Noordergraaf**

Mailing Address 39750 Poor Farm Rd

City North Branch State MN Zip Code 55056-6288

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

Name of Employer Sunrise Equine Veterinary Services Occupation Veterinarian

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **345.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 19 / 2014

**Transaction ID : C10404059A**

Amount of Each Receipt this Period  
 20.00

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **8740.22**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 20 / 2014

**Transaction ID : C10404059AB**

Amount of Each Receipt this Period  
 20.00

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

20.00

27485.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 37 OF 71 |
|   | <input type="checkbox"/> 11a<br>12 <input checked="" type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>Senate District 5 DFL</b>   |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>07 / 02 / 2014 |
| Mailing Address Mr. Mike Fall, Treasurer<br>2990 Fraser St  |  | <b>Transaction ID : C10397834</b>                            |
| City<br>Grand Rapids  | State Zip Code<br>MN 55744-4508              |  |
| FEC ID number of contributing federal political committee.<br>C   | Amount of Each Receipt this Period<br>500.00 |  |
| Name of Employer  | Occupation                                   | Permissible funds  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>1000.00            |  |

|   |                                    |                         |
|---|------------------------------------|-------------------------|
| Full Name (Last, First, Middle Initial)   |                                    | Date of Receipt         |
| Mailing Address   |                                    | M M / D D / Y Y Y Y Y Y |
| City  | State Zip Code                     |                         |
| FEC ID number of contributing federal political committee.<br>C   | Amount of Each Receipt this Period |                         |
| Name of Employer  | Occupation                         |                         |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date             |                         |

|   |                                    |                         |
|---|------------------------------------|-------------------------|
| Full Name (Last, First, Middle Initial)   |                                    | Date of Receipt         |
| Mailing Address   |                                    | M M / D D / Y Y Y Y Y Y |
| City  | State Zip Code                     |                         |
| FEC ID number of contributing federal political committee.<br>C   | Amount of Each Receipt this Period |                         |
| Name of Employer  | Occupation                         |                         |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date             |                         |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 500.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... | 500.00 |

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)   | PAGE 38 OF 71 |
|   | <input type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input checked="" type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

Full Name (Last, First, Middle Initial)  
BAKERY, CONFECTIONERY, TOBACCO WORKERS AND GRAIN MILLERS INTERNATIONAL UNION PAC

A. Mailing Address 10401 CONNECTICUT AVENUE

City KENSINGTON State MD Zip Code 20895

FEC ID number of contributing federal political committee. **C** C00127621

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 23 / 2014

**Transaction ID : C10411820**

Amount of Each Receipt this Period  
 1000.00

Full Name (Last, First, Middle Initial)  
**B. Anna Eshoo For Congress**

Mailing Address 555 Capitol Mall Ste 1425

City Sacramento State CA Zip Code 95814-4602

FEC ID number of contributing federal political committee. **C** C00258475

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 17 / 2014

**Transaction ID : C10403730**

Amount of Each Receipt this Period  
 2000.00

Full Name (Last, First, Middle Initial)  
**C. PALLONE FOR CONGRESS**

Mailing Address PO BOX 3176

City LONG BRANCH State NJ Zip Code 07740

FEC ID number of contributing federal political committee. **C** C00226928

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 23 / 2014

**Transaction ID : C10405120**

Amount of Each Receipt this Period  
 2000.00

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

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

5000.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)   | PAGE 39 OF 71 |
|   | <input type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input checked="" type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

**A.** Full Name (Last, First, Middle Initial)  
**ARCELORMITTAL USA LLC GOOD GOVERNMENT COMMITTEE**

Mailing Address 1808 EYE STREET NW  
5TH FLOOR

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C C00104109**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 17 / 2014

**Transaction ID : C10403691**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**FILEMON VELA FOR CONGRESS**

Mailing Address 2929 MOSSROCK STREET  
SUITE 215

City SAN ANTONIO State TX Zip Code 78230

FEC ID number of contributing federal political committee. **C C00513531**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 17 / 2014

**Transaction ID : C10403731**

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
**KELLEY DRYE & WARREN POLITICAL ACTION COMMITTEE**

Mailing Address 3050 K STREET NW SUITE 400

City WASHINGTON State DC Zip Code 20007

FEC ID number of contributing federal political committee. **C C00301929**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 17 / 2014

**Transaction ID : C10403692**

Amount of Each Receipt this Period  
1000.00

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

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

5000.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)   | PAGE 40 OF 71 |
|   | <input type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input checked="" type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Wadena County DFL**

Mailing Address 34730 County Road 23  
Melvin Kinnunen, Chair

City Menahga State MN Zip Code 56464-2567

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1200.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 21 / 2014

**Transaction ID : C10403682**

Amount of Each Receipt this Period  
200.00

Permissible Funds

**B.** Full Name (Last, First, Middle Initial)  
**CHICAGO BOARD OPTIONS EXCHANGE PAC**

Mailing Address 400 S. LASALLE STREET

City CHICAGO State IL Zip Code 60605

FEC ID number of contributing federal political committee. **C** C00100693

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 17 / 2014

**Transaction ID : C10403732**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**FAEGREBD PAC**

Mailing Address 300 N. MERIDIAN STREET  
SUITE 2700

City INDIANAPOLIS State IN Zip Code 46204

FEC ID number of contributing federal political committee. **C** C00386904

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 21 / 2014

**Transaction ID : C10403673**

Amount of Each Receipt this Period  
1000.00

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

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

2200.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 41 OF 71 |
|   | <input type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input checked="" type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

**A.** Full Name (Last, First, Middle Initial)  
**UNITED STATES STEEL CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 600 GRANT STREET, ROOM 669

City State Zip Code  
PITTSBURGH PA 15219

FEC ID number of contributing federal political committee. **C** C00030676

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5500.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 17 / 2014

**Transaction ID : C10403713**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**CME GROUP INC. PAC**

Mailing Address 20 SOUTH WACKER DRIVE

City State Zip Code  
CHICAGO IL 60606

FEC ID number of contributing federal political committee. **C** C00076299

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 17 / 2014

**Transaction ID : C10403733**

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
**ALLETE PAC**

Mailing Address 30 WEST SUPERIOR STREET

City State Zip Code  
DULUTH MN 55802

FEC ID number of contributing federal political committee. **C** C00142489

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2250.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 23 / 2014

**Transaction ID : C10405053**

Amount of Each Receipt this Period  
1000.00

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

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

5500.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 42 OF 71 |
|   | <input type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input checked="" type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

**A.** Full Name (Last, First, Middle Initial)  
**TRANSPORT WORKERS UNION POLITICAL CONTRIBUTIONS COMMITTEE**

Mailing Address **501 THIRD ST. NW 9TH FLOOR**

City **WASHINGTON** State **DC** Zip Code **20001**

FEC ID number of contributing federal political committee. **C C00008268**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_ **6500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 17 / 2014**

**Transaction ID : C10403734**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **1500.00**

**B.** Full Name (Last, First, Middle Initial)  
**LABORERS' INTERNATIONAL UNION OF NORTH AMERICA #LIUNA# PAC**

Mailing Address **905 16TH ST., N.W.  
SECOND FLOOR**

City **WASHINGTON** State **DC** Zip Code **20006**

FEC ID number of contributing federal political committee. **C C00007922**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_ **7500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 23 / 2014**

**Transaction ID : C10405044**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **2500.00**

**C.** Full Name (Last, First, Middle Initial)  
**UNITED ASSOCIATION POLITICAL EDUCATION COMMITTEE (UNITED ASSOCIATION OF JOURNEYMEN AND APP**

Mailing Address **THREE PARK PLACE**

City **ANNAPOLIS** State **MD** Zip Code **21401**

FEC ID number of contributing federal political committee. **C C00012476**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_ **10000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 23 / 2014**

**Transaction ID : C10405054**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **2500.00**

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

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

\_\_\_\_\_ **6500.00**

\_\_\_\_\_

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

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

FOR LINE NUMBER: PAGE 43 OF 71  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

**A.** Full Name (Last, First, Middle Initial)  
**DORSEY NATIONAL FUND**

Mailing Address 50 SOUTH SIXTH STREET

City State Zip Code  
MINNEAPOLIS MN 55402

FEC ID number of contributing federal political committee. **C C00018945**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 02 / 2014

**Transaction ID : C10397835**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**CLIFFS' POLITICAL ACTION COMMITTEE**

Mailing Address 200 PUBLIC SQUARE SUITE 3300

City State Zip Code  
CLEVELAND OH 44114

FEC ID number of contributing federal political committee. **C C00039016**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 17 / 2014

**Transaction ID : C10403715**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN IRON AND STEEL INSTITUTE POLITICAL ACTION COMMITTEE (STEEL PAC)**

Mailing Address 25 MASSACHUSETTS AVE, NW SUITE 800  
SUITE 800

City State Zip Code  
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C C00295097**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 17 / 2014

**Transaction ID : C10403725**

Amount of Each Receipt this Period  
1000.00

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

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

4000.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 44 OF 71 |
|   | <input type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input checked="" type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

**A.** Full Name (Last, First, Middle Initial)  
**MIKE THOMPSON FOR CONGRESS**

Mailing Address 5429 MADISON AVENUE

City State Zip Code  
SACRAMENTO CA 95841

FEC ID number of contributing federal political committee. **C C00326363**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 23 / 2014

**Transaction ID : C10405926**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**VARGAS FOR CONGRESS**

Mailing Address 330 ENCINITAS BLVD., SUITE 101

City State Zip Code  
ENCINITAS CA 92024

FEC ID number of contributing federal political committee. **C C00497321**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 21 / 2014

**Transaction ID : C10403677**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**MIKE THOMPSON FOR CONGRESS**

Mailing Address 5429 MADISON AVENUE

City State Zip Code  
SACRAMENTO CA 95841

FEC ID number of contributing federal political committee. **C C00326363**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 17 / 2014

**Transaction ID : C10403727**

Amount of Each Receipt this Period  
2000.00

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

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

3500.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)   | PAGE 45 OF 71 |
|   | <input type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input checked="" type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

**A.** Full Name (Last, First, Middle Initial)  
**THE FARMERS EDUCATION & CO-OPERATIVE UNION OF AMERICA PAC (NATFARMPAC)**

Mailing Address **20 F STREET SUITE 300, NW**

City **WASHINGTON** State **DC** Zip Code **20001**

FEC ID number of contributing federal political committee. **C C00151019**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 17 / 2014**

**Transaction ID : C10403737**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**JACKIE SPEIER FOR CONGRESS**

Mailing Address **PO BOX 112**

City **BURLINGAME** State **CA** Zip Code **94011**

FEC ID number of contributing federal political committee. **C C00443705**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 23 / 2014**

**Transaction ID : C10405117**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**Coalition for a Better Minneapolis**

Mailing Address **3644 Bryant Ave S**

City **Minneapolis** State **MN** Zip Code **55409**

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 14 / 2014**

**Transaction ID : C10399967**

Amount of Each Receipt this Period  
**1000.00**

Permissible Funds

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

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

**2500.00**

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 46 OF 71 |
|   | <input type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input checked="" type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

**A.** Full Name (Last, First, Middle Initial)  
**COMMITTEE ON PIPE AND TUBE IMPORTS FEDERAL PAC**

Mailing Address 900 SEVENTH STREET NW SUITE 500

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>WASHINGTON | State<br>DC | Zip Code<br>20001 |
|--------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00436485

|                  |            |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 17 / 2014

**Transaction ID : C10403718**

Amount of Each Receipt this Period  
500.00

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

Mailing Address PO BOX 984

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>WILLOWS | State<br>CA | Zip Code<br>95988 |
|-----------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00500637

|                  |            |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 17 / 2014

**Transaction ID : C10403728**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN POSTAL WORKERS UNION COMMITTEE ON POLITICAL ACTION**

Mailing Address 1300 L STREET NW

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>WASHINGTON | State<br>DC | Zip Code<br>20005 |
|--------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00010322

|                  |            |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 11 / 2014

**Transaction ID : C10399898**

Amount of Each Receipt this Period  
1500.00

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

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

3000.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 47 OF 71 |
|   | <input type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input checked="" type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

**A.** Full Name (Last, First, Middle Initial)  
**MINEPAC, A POLITICAL ACTION COMMITTEE OF THE NATIONAL MINING ASSOCIATION**

Mailing Address 101 CONSTITUION AVE, NW  
SUITE 500 EAST

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00304634**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 17 / 2014

**Transaction ID : C10403719**

Amount of Each Receipt this Period  
2000.00

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

Mailing Address 555 CAPITOL MALL, SUITE 1425

City SACRAMENTO State CA Zip Code 95814

FEC ID number of contributing federal political committee. **C C00557850**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 17 / 2014

**Transaction ID : C10403729**

Amount of Each Receipt this Period  
2600.00

**C.** Full Name (Last, First, Middle Initial)  
**DEMOCRATS WIN SEATS (DWS PAC)**

Mailing Address PO BOX 83142

City GAITHERSBURG State MD Zip Code 20883

FEC ID number of contributing federal political committee. **C C00425470**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 23 / 2014

**Transaction ID : C10405119**

Amount of Each Receipt this Period  
5000.00

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

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

9600.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)   | PAGE 48 OF 71 |
|   | <input type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input checked="" type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

**A.** Full Name (Last, First, Middle Initial)  
**COMMITTEE TO ELECT ALAN GRAYSON**

Mailing Address PO Box 536447

City Orlando State FL Zip Code 32853-6447

FEC ID number of contributing federal political committee. **C** C00424713

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 21 / 2014

**Transaction ID : C10405075A**

Amount of Each Receipt this Period  
2000.00

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
8740.22

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 23 / 2014

**Transaction ID : C10405075AB**

Amount of Each Receipt this Period  
2000.00

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

2000.00

48800.00

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)             |                                    | PAGE 49 OF 71                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

|  |                              |   |
|--|------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Wells Fargo Bank</b>  |                              | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 09 / 2014 |
| Mailing Address 222 W Superior St<br>Ste 100   |                              | Amount of Each Disbursement this Period<br>14.00              |
| City Duluth  | State MN Zip Code 55802-1940 |   |
| Purpose of Disbursement<br>Service fee   | Candidate Name               | Transaction ID : D723575                                      |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |                              |   |
| State: District:   | Category/Type                |   |

|  |                              |   |
|--|------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>B. MN Department of Revenue</b>                                    |                              | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 01 / 2014 |
| Mailing Address Withholding Division<br>Mail Station 6501  |                              | Amount of Each Disbursement this Period<br>335.00             |
| City Saint Paul  | State MN Zip Code 55146-0001 |   |
| Purpose of Disbursement<br>Payroll taxes   | Candidate Name               | Transaction ID : D723576                                      |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |                              |   |
| State: District:   | Category/Type                |   |

|  |                              |   |
|--|------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>c. MN Department of Revenue</b>                                    |                              | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 15 / 2014 |
| Mailing Address Withholding Division<br>Mail Station 6501  |                              | Amount of Each Disbursement this Period<br>167.00             |
| City Saint Paul  | State MN Zip Code 55146-0001 |   |
| Purpose of Disbursement<br>Payroll taxes   | Candidate Name               | Transaction ID : D723577                                      |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |                              |   |
| State: District:   | Category/Type                |   |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 516.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 50 OF 71                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. AT&amp;T</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 07 / 2014                       |
| Mailing Address PO Box 2969  |   | Amount of Each Disbursement this Period<br>53.60<br><b>Transaction ID : D723641</b> |
| City<br>Omaha  | State<br>NE   |   |
| Zip Code<br>68103-2969   | Purpose of Disbursement<br>Telephone expense  | Category/<br>Type   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. AT&amp;T</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 07 / 2014                       |
| Mailing Address PO Box 2969  |   | Amount of Each Disbursement this Period<br>53.60<br><b>Transaction ID : D723642</b> |
| City<br>Omaha  | State<br>NE   |   |
| Zip Code<br>68103-2969   | Purpose of Disbursement<br>Telephone expense  | Category/<br>Type   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. AT&amp;T</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 14 / 2014                       |
| Mailing Address PO Box 2969  |   | Amount of Each Disbursement this Period<br>53.60<br><b>Transaction ID : D723643</b> |
| City<br>Omaha  | State<br>NE   |   |
| Zip Code<br>68103-2969   | Purpose of Disbursement<br>Telephone expense  | Category/<br>Type   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |   |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 160.80 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 51 OF 71                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

|  |   |  |  |
|--|---|--|--|
| Full Name (Last, First, Middle Initial)  |   | Date of Disbursement   |  |
| <b>A. Service Printers</b>               |   | M M / D D / Y Y Y Y<br>07 / 08 / 2014  |  |
| Mailing Address 127 E 2nd St             |   | Amount of Each Disbursement this Period  |  |
| City Duluth State MN Zip Code 55805-1702 |   | 1030.28  |  |
| Purpose of Disbursement Printing expense |   | Transaction ID : D723578   |  |
| Candidate Name                           |   | Category/Type  |  |
| Office Sought:                           | House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> | Disbursement For: 2014   |  |
| State:                                   | District:   | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |

|  |   |  |  |
|--|---|--|--|
| Full Name (Last, First, Middle Initial)      |   | Date of Disbursement   |  |
| <b>B. National Democratic Club</b>           |   | M M / D D / Y Y Y Y<br>07 / 11 / 2014  |  |
| Mailing Address 30 Ivy St SE                 |   | Amount of Each Disbursement this Period  |  |
| City Washington State DC Zip Code 20003-4006 |   | 10.00  |  |
| Purpose of Disbursement Dues                 |   | Transaction ID : D723579   |  |
| Candidate Name                               |   | Category/Type  |  |
| Office Sought:                               | House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> | Disbursement For: 2014   |  |
| State:                                       | District:   | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |

|   |   |  |  |
|---|---|--|--|
| Full Name (Last, First, Middle Initial)     |   | Date of Disbursement   |  |
| <b>C. Charter Communications</b>            |   | M M / D D / Y Y Y Y<br>07 / 01 / 2014  |  |
| Mailing Address PO Box 78876                |   | Amount of Each Disbursement this Period  |  |
| City Milwaukee State WI Zip Code 53278-0001 |   | 80.00  |  |
| Purpose of Disbursement Internet/Cable      |   | Transaction ID : D723580   |  |
| Candidate Name                              |   | Category/Type  |  |
| Office Sought:                              | House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> | Disbursement For: 2014   |  |
| State:                                      | District:   | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |

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|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 1120.28 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 52 OF 71                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Winpisinger &amp; Associates, Inc.</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>07 / 08 / 2014</b> |
| Mailing Address 315 Inspiration Ln   |  | Amount of Each Disbursement this Period<br><b>1803.90</b>            |
| City Gaithersburg State MD Zip Code 20878-5808   | Purpose of Disbursement Administrative services/Compliance |  |
| Candidate Name   | Category/Type  | <b>Transaction ID : D723581</b>                                      |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District:   |  |

|  |                                 |  |
|--|---------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Winpisinger &amp; Associates, Inc.</b>  |                                 | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>07 / 15 / 2014</b> |
| Mailing Address 315 Inspiration Ln   |                                 | Amount of Each Disbursement this Period<br><b>68.00</b>              |
| City Gaithersburg State MD Zip Code 20878-5808   | Purpose of Disbursement Postage |  |
| Candidate Name   | Category/Type                   | <b>Transaction ID : D723632</b>                                      |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District:                |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Justin Perpich</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>07 / 01 / 2014</b> |
| Mailing Address 4211 W 7th St  |   | Amount of Each Disbursement this Period<br><b>242.00</b>             |
| City Duluth State MN Zip Code 55807-1529   | Purpose of Disbursement Mileage reimbursement |  |
| Candidate Name   | Category/Type                                 | <b>Transaction ID : D723611</b>                                      |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District:                              |  |

|   |                |
|---|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | <b>2113.90</b> |
| <b>TOTAL</b> This Period (last page this line number only)..... |                |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 53 OF 71                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Justin Perpich</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 01 / 2014                       |
| Mailing Address 4211 W 7th St   |  | Amount of Each Disbursement this Period<br>82.90<br><b>Transaction ID : D723612</b> |
| City<br>Duluth  | State<br>MN  |   |
| Purpose of Disbursement<br>Health insurance   |  | Category/<br>Type   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: _____  | District: _____  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Justin Perpich</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 01 / 2014                         |
| Mailing Address 4211 W 7th St   |  | Amount of Each Disbursement this Period<br>1086.44<br><b>Transaction ID : D723613</b> |
| City<br>Duluth  | State<br>MN  |   |
| Purpose of Disbursement<br>Salary   |  | Category/<br>Type   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: _____  | District: _____  |   |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Fitger's Inn</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 22 / 2014                        |
| Mailing Address 600 E Superior St   |  | Amount of Each Disbursement this Period<br>401.83<br><b>Transaction ID : D723582</b> |
| City<br>Duluth  | State<br>MN  |  |
| Purpose of Disbursement<br>Travel/Lodging   |  | Category/<br>Type  |
| Candidate Name  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: _____  | District: _____  |  |

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|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 1571.17 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 54 OF 71                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Perkins Coie LLP</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 01 / 2014                        |
| Mailing Address 1201 3rd Ave<br>Client Accounting   |  | Amount of Each Disbursement this Period<br>439.85<br><b>Transaction ID : D723583</b> |
| City Seattle  | State WA Zip Code 98101-3029   |  |
| Purpose of Disbursement<br>Legal services   | Category/Type  |  |
| Candidate Name  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |  |  |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Google</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 07 / 2014                       |
| Mailing Address 1600 Amphitheatre Pkwy  |  | Amount of Each Disbursement this Period<br>99.00<br><b>Transaction ID : D723626</b> |
| City Mountain View  | State CA Zip Code 94043-1351   |   |
| Purpose of Disbursement<br>Website expense  | Category/Type  |   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Voter Activation Network</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 03 / 2014                       |
| Mailing Address 48 Grove St<br>Ste 202  |  | Amount of Each Disbursement this Period<br>75.00<br><b>Transaction ID : D723584</b> |
| City Somerville   | State MA Zip Code 02144-2500   |   |
| Purpose of Disbursement<br>Voter file   | Category/Type  |   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

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|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 613.85 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |               |  |  |  |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 55 OF 71 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Union House Inc.</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 08 / 2014 |
| Mailing Address 26796 Felton Ave  |  | Amount of Each Disbursement this Period<br>2395.00            |
| City<br>Wyoming   | State<br>MN  |   |
| Zip Code<br>55092-9609  | Purpose of Disbursement<br>Printing expense  | Transaction ID : D723585                                      |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Enid Swaggert</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 01 / 2014 |
| Mailing Address 13347 Park St   |  | Amount of Each Disbursement this Period<br>1184.59            |
| City<br>Baxter  | State<br>MN  |   |
| Zip Code<br>56425-8363  | Purpose of Disbursement<br>Salary  | Transaction ID : D723588                                      |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Enid Swaggert</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 15 / 2014 |
| Mailing Address 13347 Park St   |  | Amount of Each Disbursement this Period<br>1184.59            |
| City<br>Baxter  | State<br>MN  |   |
| Zip Code<br>56425-8363  | Purpose of Disbursement<br>Salary  | Transaction ID : D723589                                      |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

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|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 4764.18 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |               |  |  |  |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 56 OF 71 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Dotti Mavromatis</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 01 / 2014                         |
| Mailing Address 6 E St SE   |  | Amount of Each Disbursement this Period<br>4000.00<br><b>Transaction ID : D723586</b> |
| City Washington   | State DC   |   |
| Zip Code 20003-2611   | Purpose of Disbursement Fundraising consulting fee   | Category/Type   |
| Candidate Name  | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |   |
| Disbursement For: 2014  | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General                                     |   |
| <input type="checkbox"/> Other (specify)                              | State: District:   |   |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Michael Hollenhorst</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 11 / 2014                        |
| Mailing Address 100 3rd Ave S<br>Unit 602                                |  | Amount of Each Disbursement this Period<br>512.67<br><b>Transaction ID : D723587</b> |
| City Minneapolis   | State MN   |  |
| Zip Code 55401-2702  | Purpose of Disbursement Event expenses   | Category/Type  |
| Candidate Name   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |  |
| Disbursement For: 2014   | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General                                     |  |
| <input type="checkbox"/> Other (specify)                                 | State: District:   |  |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Department of Employment and Economic Development</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 01 / 2014                       |
| Mailing Address 332 Minnesota Street   |  | Amount of Each Disbursement this Period<br>56.46<br><b>Transaction ID : D723634</b> |
| City Saint Paul  | State MN   |   |
| Zip Code 55101   | Purpose of Disbursement Payroll taxes  | Category/Type   |
| Candidate Name   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |   |
| Disbursement For: 2014   | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General                                     |   |
| <input type="checkbox"/> Other (specify)   | State: District:   |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 4569.13 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |               |  |  |  |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 57 OF 71 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Department of Employment and Economic Development</b>                    |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 15 / 2014 |
| Mailing Address 332 Minnesota Street  |  | Amount of Each Disbursement this Period<br>27.60              |
| City<br>Saint Paul  | State<br>MN  |   |
| Zip Code<br>55101   | Purpose of Disbursement<br>Payroll taxes   | Transaction ID : D723635                                      |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. New Blue Interactive LLC</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 15 / 2014 |
| Mailing Address 4906 Glen Cove Parkway  |  | Amount of Each Disbursement this Period<br>2000.00            |
| City<br>Bethesda  | State<br>MD  |   |
| Zip Code<br>20816   | Purpose of Disbursement<br>Media strategy consulting fee   | Transaction ID : D723599                                      |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Pamela M. McCrory</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 01 / 2014 |
| Mailing Address 19346 Swallow Dr SE<br>Lot 17   |  | Amount of Each Disbursement this Period<br>1818.10            |
| City<br>Cass Lake   | State<br>MN  |   |
| Zip Code<br>56633-3532  | Purpose of Disbursement<br>Salary  | Transaction ID : D723600                                      |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 3845.70 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |               |  |  |  |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 58 OF 71 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Pamela M. McCrory</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 01 / 2014                        |
| Mailing Address 19346 Swallow Dr SE<br>Lot 17  |   | Amount of Each Disbursement this Period<br>545.00<br><b>Transaction ID : D723636</b> |
| City<br>Cass Lake  | State<br>MN   |  |
| Zip Code<br>56633-3532   | Purpose of Disbursement<br>Mileage reimbursement  | Category/<br>Type  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Tom Trotter</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 01 / 2014                        |
| Mailing Address 425 New Jersey Avenue, SE  |   | Amount of Each Disbursement this Period<br>350.00<br><b>Transaction ID : D723601</b> |
| City<br>Washington   | State<br>DC   |  |
| Zip Code<br>20003  | Purpose of Disbursement<br>Event room fee   | Category/<br>Type  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |  |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>c. United States Treasury</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 01 / 2014                         |
| Mailing Address Internal Revenue Service   |   | Amount of Each Disbursement this Period<br>1994.36<br><b>Transaction ID : D723602</b> |
| City<br>Ogden  | State<br>UT   |   |
| Zip Code<br>84201-0001   | Purpose of Disbursement<br>Payroll taxes  | Category/<br>Type   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |   |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 2889.36 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 59 OF 71                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. United States Treasury</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 15 / 2014                        |
| Mailing Address Internal Revenue Service   |   | Amount of Each Disbursement this Period<br>998.66<br><b>Transaction ID : D723603</b> |
| City<br>Ogden  | State<br>UT   |  |
| Zip Code<br>84201-0001   | Purpose of Disbursement<br>Payroll taxes  | Category/<br>Type  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. USPS</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 16 / 2014                        |
| Mailing Address PO Box 9998  |   | Amount of Each Disbursement this Period<br>409.85<br><b>Transaction ID : D723604</b> |
| City<br>Brainerd   | State<br>MN   |  |
| Zip Code<br>56401-9998   | Purpose of Disbursement<br>Postage  | Category/<br>Type  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |  |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. USPS</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 17 / 2014                       |
| Mailing Address PO Box 9998  |   | Amount of Each Disbursement this Period<br>11.30<br><b>Transaction ID : D723606</b> |
| City<br>Brainerd   | State<br>MN   |   |
| Zip Code<br>56401-9998   | Purpose of Disbursement<br>Postage  | Category/<br>Type   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |   |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 1419.81 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 60 OF 71                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. USPS</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 21 / 2014 |
| Mailing Address PO Box 9998   |  | Amount of Each Disbursement this Period<br>98.00              |
| City<br>Brainerd  | State<br>MN  |   |
| Zip Code<br>56401-9998  | Purpose of Disbursement<br>Postage   | Transaction ID : D723607                                      |
| Candidate Name  | Category/<br>Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. USPS</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 21 / 2014 |
| Mailing Address PO Box 9998   |  | Amount of Each Disbursement this Period<br>11.30              |
| City<br>Brainerd  | State<br>MN  |   |
| Zip Code<br>56401-9998  | Purpose of Disbursement<br>Postage   | Transaction ID : D723608                                      |
| Candidate Name  | Category/<br>Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Wells Fargo Payroll</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 01 / 2014 |
| Mailing Address 1650 W 82nd St  |  | Amount of Each Disbursement this Period<br>62.25              |
| City<br>Bloomington   | State<br>MN  |   |
| Zip Code<br>55431-1419  | Purpose of Disbursement<br>Payroll service fee   | Transaction ID : D723609                                      |
| Candidate Name  | Category/<br>Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 171.55 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 61 OF 71                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Wells Fargo Payroll</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 15 / 2014 |
| Mailing Address 1650 W 82nd St   |   | Amount of Each Disbursement this Period<br>58.23              |
| City<br>Bloomington  | State<br>MN   |   |
| Zip Code<br>55431-1419   | Purpose of Disbursement<br>Payroll service fee  | Category/<br>Type   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Kendal E. Killian</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 01 / 2014 |
| Mailing Address 3644 Bryant Ave S  |   | Amount of Each Disbursement this Period<br>2316.50            |
| City<br>Minneapolis  | State<br>MN   |   |
| Zip Code<br>55409-1018   | Purpose of Disbursement<br>Salary   | Category/<br>Type   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Kendal E. Killian</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 15 / 2014 |
| Mailing Address 3644 Bryant Ave S  |   | Amount of Each Disbursement this Period<br>1964.75            |
| City<br>Minneapolis  | State<br>MN   |   |
| Zip Code<br>55409-1018   | Purpose of Disbursement<br>Salary   | Category/<br>Type   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |   |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 4339.48 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 62 OF 71                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

|  |  |  |   |  |  |
|--|--|--|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. North Central States Regional Council</b> |  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 01 / 2014 |  |  |
| Mailing Address of Carpenters N2216 Bodde Road   |  |  | Amount of Each Disbursement this Period<br>250.00             |  |  |
| City<br>Kaukauna   | State<br>WI  | Zip Code<br>54130  | Transaction ID : D723616                                      |  |  |
| Purpose of Disbursement<br>Office rent   |  | Category/<br>Type  |   |  |  |
| Candidate Name   |  |  |   |  |  |
| Office Sought:   | House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |  |  |
| State:   | District:  |  |   |  |  |

|   |  |  |   |  |  |
|---|--|--|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Michael Misterek</b> |  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 15 / 2014 |  |  |
| Mailing Address 211 N 1st St<br>Ste 480                               |  |  | Amount of Each Disbursement this Period<br>3750.00            |  |  |
| City<br>Minneapolis   | State<br>MN  | Zip Code<br>55401-1413   | Transaction ID : D723574                                      |  |  |
| Purpose of Disbursement<br>Consulting fee debt payment                |  | Category/<br>Type  |   |  |  |
| Candidate Name  |  |  |   |  |  |
| Office Sought:  | House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |  |  |
| State:  | District:  |  |   |  |  |

|  |  |  |   |  |  |
|--|--|--|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Carmine's</b> |  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 17 / 2014 |  |  |
| Mailing Address 425 7th St NW                                  |  |  | Amount of Each Disbursement this Period<br>85.50              |  |  |
| City<br>Washington   | State<br>DC  | Zip Code<br>20004  | Transaction ID : D723591                                      |  |  |
| Purpose of Disbursement<br>Meal                                |  | Category/<br>Type  |   |  |  |
| Candidate Name   |  |  |   |  |  |
| Office Sought:   | House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |  |  |
| State:   | District:  |  |   |  |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 4085.50 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 63 OF 71                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

|   |                                    |  |       |
|---|------------------------------------|--|-------|
| Full Name (Last, First, Middle Initial)               |                                    | Date of Disbursement   |       |
| A. First Data   |                                    | M M / D D / Y Y Y Y<br>07 / 03 / 2014  |       |
| Mailing Address 5565 Glenridge Connector NE, Suite    |                                    | Amount of Each Disbursement this Period                                      |       |
| City Atlanta  | State GA                           | Zip Code 30342   | 38.45 |
| Purpose of Disbursement<br>Credit card processing fee |                                    | Transaction ID : D723592   |       |
| Candidate Name  |                                    | Category/Type  |       |
| Office Sought:  | House <input type="checkbox"/>     | Disbursement For: 2014   |       |
|   | Senate <input type="checkbox"/>    | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General |       |
|   | President <input type="checkbox"/> | <input type="checkbox"/> Other (specify)                                     |       |
| State:  | District:                          |  |       |

|   |                                    |  |       |
|---|------------------------------------|--|-------|
| Full Name (Last, First, Middle Initial)               |                                    | Date of Disbursement   |       |
| B. First Data   |                                    | M M / D D / Y Y Y Y<br>07 / 03 / 2014  |       |
| Mailing Address 5565 Glenridge Connector NE, Suite    |                                    | Amount of Each Disbursement this Period                                      |       |
| City Atlanta  | State GA                           | Zip Code 30342   | 84.08 |
| Purpose of Disbursement<br>Credit card processing fee |                                    | Transaction ID : D723593   |       |
| Candidate Name  |                                    | Category/Type  |       |
| Office Sought:  | House <input type="checkbox"/>     | Disbursement For: 2014   |       |
|   | Senate <input type="checkbox"/>    | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General |       |
|   | President <input type="checkbox"/> | <input type="checkbox"/> Other (specify)                                     |       |
| State:  | District:                          |  |       |

|   |                                    |  |        |
|---|------------------------------------|--|--------|
| Full Name (Last, First, Middle Initial)               |                                    | Date of Disbursement   |        |
| C. First Data   |                                    | M M / D D / Y Y Y Y<br>07 / 03 / 2014  |        |
| Mailing Address 5565 Glenridge Connector NE, Suite    |                                    | Amount of Each Disbursement this Period                                      |        |
| City Atlanta  | State GA                           | Zip Code 30342   | 280.10 |
| Purpose of Disbursement<br>Credit card processing fee |                                    | Transaction ID : D723594   |        |
| Candidate Name  |                                    | Category/Type  |        |
| Office Sought:  | House <input type="checkbox"/>     | Disbursement For: 2014   |        |
|   | Senate <input type="checkbox"/>    | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General |        |
|   | President <input type="checkbox"/> | <input type="checkbox"/> Other (specify)                                     |        |
| State:  | District:                          |  |        |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 402.63 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |               |  |  |  |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 64 OF 71 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

|   |   |  |   |  |  |
|---|---|--|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Kathleen M. Connolly</b> |   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 17 / 2014 |  |  |
| Mailing Address 5321 Clinton Avenue South                                 |   |  | Amount of Each Disbursement this Period<br>4000.00            |  |  |
| City<br>Minneapolis   | State<br>MN   | Zip Code<br>55419  | Transaction ID : D723595                                      |  |  |
| Purpose of Disbursement<br>Fundraising consulting fee                     |   | Category/<br>Type  |   |  |  |
| Candidate Name  |   |  |   |  |  |
| Office Sought:  | House<br><input type="checkbox"/><br>Senate<br><input type="checkbox"/> President<br><input type="checkbox"/> | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |  |  |
| State:  | District:   |  |   |  |  |

|   |   |  |   |  |  |
|---|---|--|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Kathleen M. Connolly</b> |   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 17 / 2014 |  |  |
| Mailing Address 5321 Clinton Avenue South                                 |   |  | Amount of Each Disbursement this Period<br>485.50             |  |  |
| City<br>Minneapolis   | State<br>MN   | Zip Code<br>55419  | Transaction ID : D723596                                      |  |  |
| Purpose of Disbursement<br>Mileage reimbursement                          |   | Category/<br>Type  |   |  |  |
| Candidate Name  |   |  |   |  |  |
| Office Sought:  | House<br><input type="checkbox"/><br>Senate<br><input type="checkbox"/> President<br><input type="checkbox"/> | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |  |  |
| State:  | District:   |  |   |  |  |

|  |   |  |   |  |  |
|--|---|--|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. NGP VAN, Inc.</b> |   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 02 / 2014 |  |  |
| Mailing Address 1101 15th Street, NAW Suite 500                    |   |  | Amount of Each Disbursement this Period<br>150.00             |  |  |
| City<br>Washington   | State<br>DC   | Zip Code<br>20005  | Transaction ID : D723598                                      |  |  |
| Purpose of Disbursement<br>Software database & support             |   | Category/<br>Type  |   |  |  |
| Candidate Name   |   |  |   |  |  |
| Office Sought:   | House<br><input type="checkbox"/><br>Senate<br><input type="checkbox"/> President<br><input type="checkbox"/> | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |  |  |
| State:   | District:   |  |   |  |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 4635.50 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 65 OF 71                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. ActBlue Technical Services</b>                                  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 06 / 2014                       |
| Mailing Address 14 Arrow St<br>Ste 11  |  | Amount of Each Disbursement this Period<br>45.75<br><b>Transaction ID : D723424</b> |
| City Cambridge   | State MA Zip Code 02138-5106   |   |
| Purpose of Disbursement<br>Service Fees  | Candidate Name   | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. ActBlue Technical Services</b>                                  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 13 / 2014                       |
| Mailing Address 14 Arrow St<br>Ste 11  |  | Amount of Each Disbursement this Period<br>33.97<br><b>Transaction ID : D723425</b> |
| City Cambridge   | State MA Zip Code 02138-5106   |   |
| Purpose of Disbursement<br>Service Fees  | Candidate Name   | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:   |  |   |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. ActBlue Technical Services</b>                                  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 20 / 2014                        |
| Mailing Address 14 Arrow St<br>Ste 11  |  | Amount of Each Disbursement this Period<br>181.20<br><b>Transaction ID : D723686</b> |
| City Cambridge   | State MA Zip Code 02138-5106   |  |
| Purpose of Disbursement<br>Service Fees  | Candidate Name   | Category/<br>Type  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:   |  |  |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 260.92 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 66 OF 71                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. ActBlue Technical Services</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 23 / 2014                       |
| Mailing Address 14 Arrow St<br>Ste 11   |  | Amount of Each Disbursement this Period<br>85.33<br><b>Transaction ID : D723848</b> |
| City Cambridge  | State MA Zip Code 02138-5106   |   |
| Purpose of Disbursement<br>Service Fees   | Category/Type  |   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. BGS Bar &amp; Grill</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 07 / 2014                        |
| Mailing Address 5494 Hwy 7  |  | Amount of Each Disbursement this Period<br>293.18<br><b>Transaction ID : D723620</b> |
| City Virginia   | State MN Zip Code 55792  |  |
| Purpose of Disbursement<br>Meal   | Category/Type  |  |
| Candidate Name  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Holiday Inn Mountain Iron</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 08 / 2014                        |
| Mailing Address 8570 Rock Ridge Dr  |  | Amount of Each Disbursement this Period<br>217.56<br><b>Transaction ID : D723628</b> |
| City Mountain Iron  | State MN Zip Code 55768  |  |
| Purpose of Disbursement<br>Travel/Lodging   | Category/Type  |  |
| Candidate Name  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |  |  |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 596.07 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 67 OF 71                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Holiday Inn Mountain Iron</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 08 / 2014                        |
| Mailing Address 8570 Rock Ridge Dr   |   | Amount of Each Disbursement this Period<br>222.31<br><b>Transaction ID : D723629</b> |
| City<br>Mountain Iron  | State<br>MN   |  |
| Zip Code<br>55768  | Purpose of Disbursement<br>Travel/Lodging   | Category/<br>Type  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Honsa-Binder Printing, Inc.</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 01 / 2014                        |
| Mailing Address 320 Spruce Street  |   | Amount of Each Disbursement this Period<br>383.63<br><b>Transaction ID : D723630</b> |
| City<br>St. Paul   | State<br>MN   |  |
| Zip Code<br>55101-2445   | Purpose of Disbursement<br>Printing expense   | Category/<br>Type  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. JW Marriott</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 16 / 2014                        |
| Mailing Address 151 West Adams Street  |   | Amount of Each Disbursement this Period<br>236.02<br><b>Transaction ID : D723631</b> |
| City<br>Chicago  | State<br>IL   |  |
| Zip Code<br>60603  | Purpose of Disbursement<br>Travel/Lodging   | Category/<br>Type  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |  |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 841.96 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 68 OF 71                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

**A. Mesabi Daily News**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 956

City Virginia State MN Zip Code 55792

Purpose of Disbursement Advertising

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 07 / 08 / 2014

Amount of Each Disbursement this Period: 2000.00

Transaction ID : D723633

**B. Ye Old Pickle Factory**

Full Name (Last, First, Middle Initial)  
Mailing Address 25534 Murray Road PO Box 410

City Nisswa State MN Zip Code 56468

Purpose of Disbursement Event catering

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 07 / 10 / 2014

Amount of Each Disbursement this Period: 1185.91

Transaction ID : D723644

**C. Hon. Richard Nolan**

Full Name (Last, First, Middle Initial)  
Mailing Address 31516 Old Bridge Rd

City Crosby State MN Zip Code 56441-2235

Purpose of Disbursement Expenses (see below if itemized)

Candidate Name Hon. Richard Nolan

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 07 / 15 / 2014

Amount of Each Disbursement this Period: 703.87

Transaction ID : D723573

**SUBTOTAL** of Disbursements This Page (optional) ..... 3889.87

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

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 69 OF 71                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Minnesota Secretary of State</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>05 / 27 / 2014</b> |
| Mailing Address 100 Rev. Dr. Martin Luther King Jr  |  | Amount of Each Disbursement this Period<br><b>300.00</b>             |
| City<br>Saint Paul  | State<br>MN  | Zip Code<br>55155  |
| Purpose of Disbursement<br>Filing fee   | Category/<br>Type  |  |
| Candidate Name  | Transaction ID : <b>D723638</b>  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>[MEMO ITEM]</b>   |
| State: District:  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Tratoria Alberto Restaurant</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>07 / 15 / 2014</b> |
| Mailing Address 506 8th St SE   |  | Amount of Each Disbursement this Period<br><b>306.10</b>             |
| City<br>Washington  | State<br>DC  | Zip Code<br>20003  |
| Purpose of Disbursement<br>Meal   | Category/<br>Type  |  |
| Candidate Name  | Transaction ID : <b>D723640</b>  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>[MEMO ITEM]</b>   |
| State: District:  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Kathleen M. Connolly</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>07 / 17 / 2014</b> |
| Mailing Address 5321 Clinton Avenue South   |  | Amount of Each Disbursement this Period<br><b>52.11</b>              |
| City<br>Minneapolis   | State<br>MN  | Zip Code<br>55419  |
| Purpose of Disbursement<br>Expenses (see below if itemized)   | Category/<br>Type  |  |
| Candidate Name  | Transaction ID : <b>D723597</b>  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |  |  |

|   |              |
|---|--------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | <b>52.11</b> |
| <b>TOTAL</b> This Period (last page this line number only)..... |              |

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 70 OF 71                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Nolan for Congress Volunteer Committee**

|  |                              |  |
|--|------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>A. USPS</b>  |                              | Date of Disbursement<br>MM / DD / YYYY<br>07 / 17 / 2014 |
| Mailing Address PO Box 9998  |                              | Amount of Each Disbursement this Period<br>\$ 52.11      |
| City Brainerd  | State MN Zip Code 56401-9998 |  |
| Purpose of Disbursement Postage  | Candidate Name               | Transaction ID : D723605                                 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |                              |  |
| State: District:   | Category/Type                | [MEMO ITEM]  |

|  |                |   |
|--|----------------|---|
| Full Name (Last, First, Middle Initial)<br><b>B.</b>   |                | Date of Disbursement<br>MM / DD / YYYY  |
| Mailing Address  |                | Amount of Each Disbursement this Period |
| City   | State Zip Code |   |
| Purpose of Disbursement  | Candidate Name | Transaction ID                          |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |                |   |
| State: District:   | Category/Type  |   |

|  |                |   |
|--|----------------|---|
| Full Name (Last, First, Middle Initial)<br><b>C.</b>   |                | Date of Disbursement<br>MM / DD / YYYY  |
| Mailing Address  |                | Amount of Each Disbursement this Period |
| City   | State Zip Code |   |
| Purpose of Disbursement  | Candidate Name | Transaction ID                          |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |                |   |
| State: District:   | Category/Type  |   |

|   |             |
|---|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | \$ 0.00     |
| <b>TOTAL</b> This Period (last page this line number only)..... | \$ 42859.68 |

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

|   |   |
|---|---|
| (Use separate schedule(s) for each numbered line) | PAGE 71 OF 71   |
|   | FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10 |

NAME OF COMMITTEE (In Full)

**Nolan for Congress Volunteer Committee**

|   |       |   |
|---|-------|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>Hon. Richard Nolan</b> |       | Nature of Debt (Purpose):<br>Reimbursements |
| Mailing Address 31516 Old Bridge Rd   |       |   |
| City  | State | Zip Code                                    |
| Crosby  | MN    | 56441-2235                                  |

|   |                                   |   |
|---|-----------------------------------|---|
| Outstanding Balance Beginning This Period | <b>Transaction ID : D667023</b>   |   |
| <input type="text" value="8268.36"/>      |                                   |   |
| Amount Incurred This Period               | Payment This Period               | Outstanding Balance at Close of This Period |
| <input type="text" value="0.00"/>         | <input type="text" value="0.00"/> | <input type="text" value="8268.36"/>        |

|  |       |  |
|--|-------|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>Enid Swaggert</b> |       | Nature of Debt (Purpose):<br>Reimbursement |
| Mailing Address 13347 Park St  |       |  |
| City   | State | Zip Code                                   |
| Baxter   | MN    | 56425-8363                                 |

|   |                                   |   |
|---|-----------------------------------|---|
| Outstanding Balance Beginning This Period | <b>Transaction ID : D691864</b>   |   |
| <input type="text" value="45.00"/>        |                                   |   |
| Amount Incurred This Period               | Payment This Period               | Outstanding Balance at Close of This Period |
| <input type="text" value="0.00"/>         | <input type="text" value="0.00"/> | <input type="text" value="45.00"/>          |

|   |       |   |
|---|-------|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>Michael Misterek</b> |       | Nature of Debt (Purpose):<br>Consultant - Field |
| Mailing Address 211 N 1st St<br>Ste 480   |       |   |
| City  | State | Zip Code  |
| Minneapolis   | MN    | 55401-1413                                      |

|   |                                      |   |
|---|--------------------------------------|---|
| Outstanding Balance Beginning This Period | <b>Transaction ID : D667034</b>      |   |
| <input type="text" value="15000.00"/>     |                                      |   |
| Amount Incurred This Period               | Payment This Period                  | Outstanding Balance at Close of This Period |
| <input type="text" value="0.00"/>         | <input type="text" value="3750.00"/> | <input type="text" value="11250.00"/>       |

|  |                                       |
|--|---------------------------------------|
| 1) <b>SUBTOTALS</b> This Period This Page (optional) .....                                       | <input type="text" value="19563.36"/> |
| 2) <b>TOTALS</b> This Period (last page this line number only) .....                             | <input type="text" value="19563.36"/> |
| 3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....                          | <input type="text" value="0.00"/>     |
| 4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶ | <input type="text" value="19563.36"/> |