

McGoldrick for Congress
36 Moonlight Bay
Stillwater, MN 55082

RECEIVED
2012 OCT 25 PM 12:13
FEC MAIL CENTER

~~April 13, 2012~~

10/15/12

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

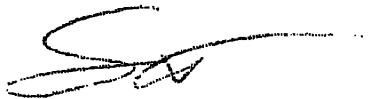
The FEC - assigned, 9-digit ID is C00518498.

Please find enclosed FEC Form 3 Report of Receipts and Disbursements.

If there are any errors or omissions on this report, please contact me at 651-263-6778.

Thank you for your assistance.

Sincerely,



Scott R. Martin
Assistant Treasurer

R. J. McGoldrick
Candidate
651-387-1000

12030932286

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

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1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5

McGaldrick for Congress

ADDRESS (number and street)

36 Moonlight BAY

Check if different than previously reported. (ACC)

Stillwater MN 55082

2. FEC IDENTIFICATION NUMBER

C00518498

3. IS THIS REPORT X NEW (N) OR AMENDED (A) CITY STATE ZIP CODE STATE DISTRICT MN LA

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
July 15 Quarterly Report (Q2)
* October 15 Quarterly Report (Q3)
January 31 Year-End Report (YE)

X Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P) General (12G) Runoff (12R)
Convention (12C) Special (12S)
Election on MM/DD/YYYY in the State of

(c) 30-Day POST-Election Report for the:

General (30G) Runoff (30R) Special (30S)
Election on MM/DD/YYYY in the State of

5. Covering Period 03/31/2012 through 09/30/2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Greg Heck

Signature of Treasurer

Date 10/15/2012

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Report Covering the Period: From:

M 4 ' 01 ' 2012

To:

M 9 ' 30 ' 2012

COLUMN A
This Period

COLUMN B
Election Cycle-to-Date

6. Net Contributions (other than loans)

(a) Total Contributions
(other than loans) (from Line 11(e))

(b) Total Contribution Refunds
(from Line 20(d))

(c) Net Contributions (other than loans)
(subtract Line 6(b) from Line 6(a))

7. Net Operating Expenditures

(a) Total Operating Expenditures
(from Line 17)

(b) Total Offsets to Operating
Expenditures (from Line 14)

(c) Net Operating Expenditures
(subtract Line 7(b) from Line 7(a))

8. Cash on Hand at Close of
Reporting Period (from Line 27)

9. Debts and Obligations Owed TO
the Committee (Itemize all on
Schedule C and/or Schedule D)

10. Debts and Obligations Owed BY
the Committee (Itemize all on
Schedule C and/or Schedule D)

For further information contact:

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

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

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DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

Report Covering the Period: From:

" 4 ' 01 ' 2012

To:

" 9 ' 30 ' 2012

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A)

(ii) Unitemized

(iii) TOTAL of contributions from individuals ▶

(b) Political Party Committees.....

(c) Other Political Committees (such as PACs).....

(d) The Candidate

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

11,000.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

(b) All Other Loans.....

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

15. OTHER RECEIPTS (Dividends, Interest, etc.)

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

11,000.00

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DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	,	,	.	,	,	.
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	,	,	.	,	,	.
19. LOAN REPAYMENTS:						
(a) Of Loans Made or Guaranteed by the Candidate.....	,	,	.	,	,	.
(b) Of All Other Loans	,	,	.	,	,	.
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	,	,	.	,	,	.
20. REFUNDS OF CONTRIBUTIONS TO:						
(a) Individuals/Persons Other Than Political Committees	,	,	.	,	,	.
(b) Political Party Committees.....	,	,	.	,	,	.
(c) Other Political Committees (such as PACs)	,	,	.	,	,	.
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	,	,	.	,	,	.
21. OTHER DISBURSEMENTS	,	,	.	,	,	.
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	,	,	.	,	,	.

III. CASH SUMMARY

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

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**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		OF
	<input type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 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)

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

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

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

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

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**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	OF
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21		

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NAME OF COMMITTEE (In Full)
McGoldrick for Congress

Full Name (Last, First, Middle Initial) <i>Hello V. King</i>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address <i>1005 W Franklin</i>		Amount of Each Disbursement this Period , , .
City <i>Minneapolis</i>	State <i>MN</i>	
Zip Code <i>55405</i>		Amount of Each Disbursement this Period , , .
Purpose of Disbursement <i>Campaign Organization</i>		
Candidate Name <i>Brian McGoldrick</i>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial)		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period , , .
City	State	
Zip Code		Amount of Each Disbursement this Period , , .
Purpose of Disbursement		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial)		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period , , .
City	State	
Zip Code		Amount of Each Disbursement this Period , , .
Purpose of Disbursement		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

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

12030932292

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

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

10/16/12

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked

Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date

Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked


 PREPARER

10/25/12
 DATE PREPARED

(3/2005)

12030932293