

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Gerson for Congress

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

	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))....	3022.00	3447.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	3022.00	3447.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	15723.55	19235.24
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	15723.55	19235.24
8. Cash on Hand at Close of Reporting Period (from Line 27).....	5350.48	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	68176.41	

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

Gerson for Congress

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

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).....	350.00	650.00
(ii) Unitemized	172.00	297.00
(iii) TOTAL of contributions from individuals	522.00	947.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate	2500.00	2500.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	3022.00	3447.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	13131.12	19610.45
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	13131.12	19610.45
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		
	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	16153.12	23057.45

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	15723.55	19235.24
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	15723.55	19235.24

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	4920.91
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	16153.12
25. SUBTOTAL (add Line 23 and Line 24).....	21074.03
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	15723.55
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	5350.48

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

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

FOR LINE NUMBER: PAGE 5 OF 55
(check only one)
 11a 12
 11b 13a
 11c 13b
 11d 14
 15

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NAME OF COMMITTEE (In Full)
Gerson for Congress

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

Mailing Address 13727 Fordham Ave

City Apple Valley State MN Zip Code 55124

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

Name of Employer N/A Occupation Student

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 15 / 2013

Transaction ID : SA11A1.5183

Amount of Each Receipt this Period
 350.00

In-kind - monitors

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

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).....

350.00

350.00

**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 55
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

A. Full Name (Last, First, Middle Initial)
David Adam Gerson

Mailing Address 1035 Summit Ave

City South Saint Paul State MN Zip Code 55075

FEC ID number of contributing federal political committee. **C H2MN02130**

Name of Employer Occupation
Meggitt Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8479.33

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 10 / 2013

Transaction ID : SA11D.5214

Amount of Each Receipt this Period
2000.00

In-kind - 4 airline tickets at \$500 each

B. Full Name (Last, First, Middle Initial)
David Adam Gerson

Mailing Address 1035 Summit Ave

City South Saint Paul State MN Zip Code 55075

FEC ID number of contributing federal political committee. **C H2MN02130**

Name of Employer Occupation
Meggitt Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
16979.33

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 23 / 2013

Transaction ID : SA11D.5216

Amount of Each Receipt this Period
500.00

In-kind - Airline ticket

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).....

2500.00

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 7 OF 55
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

A. Full Name (Last, First, Middle Initial)
David Adam Gerson

Mailing Address 1035 Summit Ave

City South Saint Paul State MN Zip Code 55075

FEC ID number of contributing federal political committee. **C H2MN02130**

Name of Employer Occupation
Meggitt Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
12479.33

Date of Receipt
 M M / D D / Y Y Y Y
04 / 18 / 2013

Transaction ID : SA13A.4502

Amount of Each Receipt this Period
4000.00

Loan from Candidate

B. Full Name (Last, First, Middle Initial)
David Adam Gerson

Mailing Address 1035 Summit Ave

City South Saint Paul State MN Zip Code 55075

FEC ID number of contributing federal political committee. **C H2MN02130**

Name of Employer Occupation
Meggitt Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
16479.33

Date of Receipt
 M M / D D / Y Y Y Y
05 / 13 / 2013

Transaction ID : SA13A.4545

Amount of Each Receipt this Period
4000.00

Loan from Candidate

C. Full Name (Last, First, Middle Initial)
David Adam Gerson

Mailing Address 1035 Summit Ave

City South Saint Paul State MN Zip Code 55075

FEC ID number of contributing federal political committee. **C H2MN02130**

Name of Employer Occupation
Meggitt Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
21979.33

Date of Receipt
 M M / D D / Y Y Y Y
06 / 10 / 2013

Transaction ID : SA13A.4591

Amount of Each Receipt this Period
5000.00

Loan by candidate

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

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

13000.00

**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 55
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

A. Full Name (Last, First, Middle Initial)
David Adam Gerson

Mailing Address 1035 Summit Ave

City South Saint Paul State MN Zip Code 55075

FEC ID number of contributing federal political committee. **C H2MN02130**

Name of Employer Occupation
Meggitt Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
22110.45

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 30 / 2013

Transaction ID : SA13A.4622

Amount of Each Receipt this Period
131.12

Payments of Cash and other CC by Candidate

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

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).....

131.12

13131.12

**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 9 OF 55			
	<input checked="" 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)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Amazon		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2013
Mailing Address 3680 Langley Drive		Amount of Each Disbursement this Period 26.61 Transaction ID : SB17.4618
City Hebron State KY Zip Code 41048	Purpose of Disbursement Books for training 001 Category/Type	
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02		

Full Name (Last, First, Middle Initial) B. Amazon		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2013
Mailing Address 3680 Langley Drive		Amount of Each Disbursement this Period 63.61 Transaction ID : SB17.4617
City Hebron State KY Zip Code 41048	Purpose of Disbursement Coffee Maker for office 001 Category/Type	
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02		

Full Name (Last, First, Middle Initial) c. Amazon		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2013
Mailing Address 3680 Langley Drive		Amount of Each Disbursement this Period 94.90 Transaction ID : SB17.4578
City Hebron State KY Zip Code 41048	Purpose of Disbursement Books for training 001 Category/Type	
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02		

SUBTOTAL of Disbursements This Page (optional).....	185.12
TOTAL 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: (check only one)	PAGE 10 OF 55			
	<input checked="" 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)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Amazon		Date of Disbursement MM / DD / YYYY 06 / 03 / 2013
Mailing Address 3680 Langley Drive		Amount of Each Disbursement this Period 7.18 Transaction ID : SB17.4579
City Hebron State KY Zip Code 41048	Purpose of Disbursement Books for training Category/Type 001	
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02		

Full Name (Last, First, Middle Initial) B. Amazon		Date of Disbursement MM / DD / YYYY 06 / 03 / 2013
Mailing Address 3680 Langley Drive		Amount of Each Disbursement this Period 8.98 Transaction ID : SB17.4583
City Hebron State KY Zip Code 41048	Purpose of Disbursement Books for training Category/Type 001	
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02		

Full Name (Last, First, Middle Initial) c. Amazon		Date of Disbursement MM / DD / YYYY 06 / 05 / 2013
Mailing Address 3680 Langley Drive		Amount of Each Disbursement this Period 9.98 Transaction ID : SB17.4586
City Hebron State KY Zip Code 41048	Purpose of Disbursement Books for training Category/Type 001	
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02		

SUBTOTAL of Disbursements This Page (optional).....	26.14
TOTAL 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: (check only one)	PAGE 11 OF 55			
	<input checked="" 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)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Amazon		Date of Disbursement MM / DD / YYYY 06 / 05 / 2013
Mailing Address 3680 Langley Drive		Amount of Each Disbursement this Period 12.76 Transaction ID : SB17.4587
City Hebron State KY Zip Code 41048	Purpose of Disbursement Books for training Category/Type 001	
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02		

Full Name (Last, First, Middle Initial) B. Amazon		Date of Disbursement MM / DD / YYYY 06 / 06 / 2013
Mailing Address 3680 Langley Drive		Amount of Each Disbursement this Period 10.93 Transaction ID : SB17.4589
City Hebron State KY Zip Code 41048	Purpose of Disbursement Books for training Category/Type 001	
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02		

Full Name (Last, First, Middle Initial) c. Amazon		Date of Disbursement MM / DD / YYYY 06 / 06 / 2013
Mailing Address 3680 Langley Drive		Amount of Each Disbursement this Period 12.98 Transaction ID : SB17.4590
City Hebron State KY Zip Code 41048	Purpose of Disbursement Books for training Category/Type 001	
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02		

SUBTOTAL of Disbursements This Page (optional).....	36.67
TOTAL 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: (check only one)	PAGE 12 OF 55			
	<input checked="" 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)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Barnes and Nobles		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2013
Mailing Address 4015 Medina Rd.		Amount of Each Disbursement this Period 48.72 Transaction ID : SB17.4575
City Akron State OH Zip Code 44333	Purpose of Disbursement Training Books 001 Category/Type	
Candidate Name Gerson for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 02	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. Best Buy		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2013
Mailing Address 12600 Frontage Rd W		Amount of Each Disbursement this Period 21.44 Transaction ID : SB17.4483
City Burnsville State MN Zip Code 55337	Purpose of Disbursement Office Supplies 001 Category/Type	
Candidate Name Gerson for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 02	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) c. Best Value Copy		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2013
Mailing Address 1150 Avenue of the Americas		Amount of Each Disbursement this Period 123.30 Transaction ID : SB17.4523
City New York State NY Zip Code 10036	Purpose of Disbursement Flyers 003 Category/Type	
Candidate Name Gerson for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 02	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional).....	193.46
TOTAL 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: (check only one)	PAGE 13 OF 55			
	<input checked="" 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)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Xavier Bicott		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2013
Mailing Address 5000 W. 109 St.		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.4486
City Bloomington	State MN	
Zip Code 55437	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02	

Full Name (Last, First, Middle Initial) B. Xavier Bicott		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2013
Mailing Address 5000 W. 109 St.		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.4514
City Bloomington	State MN	
Zip Code 55437	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02	

Full Name (Last, First, Middle Initial) c. Xavier Bicott		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2013
Mailing Address 5000 W. 109 St.		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.4533
City Bloomington	State MN	
Zip Code 55437	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02	

SUBTOTAL of Disbursements This Page (optional).....	1200.00
TOTAL 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: (check only one)	PAGE 14 OF 55			
	<input checked="" 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)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Xavier Bicott		Date of Disbursement MM / DD / YYYY 05 / 07 / 2013
Mailing Address 5000 W. 109 St.		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.4542
City Bloomington	State MN	
Zip Code 55437	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02	

Full Name (Last, First, Middle Initial) B. Xavier Bicott		Date of Disbursement MM / DD / YYYY 05 / 13 / 2013
Mailing Address 5000 W. 109 St.		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.4547
City Bloomington	State MN	
Zip Code 55437	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02	

Full Name (Last, First, Middle Initial) c. Xavier Bicott		Date of Disbursement MM / DD / YYYY 05 / 14 / 2013
Mailing Address 5000 W. 109 St.		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.4549
City Bloomington	State MN	
Zip Code 55437	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name Gerson for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MN District: 02	

SUBTOTAL of Disbursements This Page (optional).....	1800.00
TOTAL 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: (check only one)	PAGE 15 OF 55			
	<input checked="" 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)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. BP		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2013
Mailing Address 7468 167th St		Amount of Each Disbursement this Period 61.95
City Rosemount	State MN	
Purpose of Disbursement Gas	Category/ Type 002	
Candidate Name Gerson for Congress		Transaction ID : SB17.4489
Office Sought: <input checked="" 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: MN	District: 02	

Full Name (Last, First, Middle Initial) B. BP		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2013
Mailing Address 7468 167th St		Amount of Each Disbursement this Period 73.66
City Rosemount	State MN	
Purpose of Disbursement Gas	Category/ Type 002	
Candidate Name Gerson for Congress		Transaction ID : SB17.4546
Office Sought: <input checked="" 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: MN	District: 02	

Full Name (Last, First, Middle Initial) C. BP		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2013
Mailing Address 7468 167th St		Amount of Each Disbursement this Period 68.86
City Rosemount	State MN	
Purpose of Disbursement Gas	Category/ Type 002	
Candidate Name Gerson for Congress		Transaction ID : SB17.4592
Office Sought: <input checked="" 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: MN	District: 02	

SUBTOTAL of Disbursements This Page (optional).....	204.47
TOTAL 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: (check only one)	PAGE 16 OF 55			
	<input checked="" 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)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. BP		Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2013
Mailing Address 7468 167th St		Amount of Each Disbursement this Period 61.90
City Rosemount	State MN	
Zip Code 55068	Purpose of Disbursement Gas	Transaction ID : SB17.4599
Candidate Name Gerson for Congress	Category/ Type 002	
Office Sought: <input checked="" 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: MN District: 02		

Full Name (Last, First, Middle Initial) B. Constitution Party of Minnesota		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2013
Mailing Address PO Box 224		Amount of Each Disbursement this Period 10.00
City Redwood Falls	State MN	
Zip Code 56283	Purpose of Disbursement Entry to Convention	Transaction ID : SB17.4570
Candidate Name Gerson for Congress	Category/ Type 003	
Office Sought: <input checked="" 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: MN District: 02		

Full Name (Last, First, Middle Initial) c. Culvers		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2013
Mailing Address 4725 Hwy 13 W		Amount of Each Disbursement this Period 6.24
City Savage	State MN	
Zip Code 55378	Purpose of Disbursement Food for volunteers	Transaction ID : SB17.4557
Candidate Name Gerson for Congress	Category/ Type 003	
Office Sought: <input checked="" 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: MN District: 02		

SUBTOTAL of Disbursements This Page (optional).....	78.14
TOTAL 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: (check only one)	PAGE 17 OF 55			
	<input checked="" 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)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Delta Air		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2013
Mailing Address 1030 Delta Blvd		Amount of Each Disbursement this Period 5.00 Transaction ID : SB17.4488
City Atlanta State GA Zip Code 30320	Purpose of Disbursement Airfare 002 Category/Type	
Candidate Name Gerson for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 02	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. Delta Air		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2013
Mailing Address 1030 Delta Blvd		Amount of Each Disbursement this Period 5.00 Transaction ID : SB17.4567
City Atlanta State GA Zip Code 30320	Purpose of Disbursement Air Fare 002 Category/Type	
Candidate Name Gerson for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 02	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) c. Steven Demitrius		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2013
Mailing Address 13727 Fordham Ave		Amount of Each Disbursement this Period 350.00 Transaction ID : SB17.5184
City Apple Valley State MN Zip Code 55124	Purpose of Disbursement In-kind - monitors Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional).....	360.00
TOTAL 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: (check only one)	PAGE 18 OF 55			
	<input checked="" 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)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. David Adam Gerson		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2013
Mailing Address 1035 Summit Ave		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.5215
City South Saint Paul	State MN	
Zip Code 55075	Purpose of Disbursement In-kind - 4 airline tickets at \$500 each	Category/ Type
Candidate Name	Office Sought: <input checked="" 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: MN District: 02	

Full Name (Last, First, Middle Initial) B. David Adam Gerson		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2013
Mailing Address 1035 Summit Ave		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.5217
City South Saint Paul	State MN	
Zip Code 55075	Purpose of Disbursement In-kind - Airline ticket	Category/ Type
Candidate Name	Office Sought: <input checked="" 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: MN District: 02	

Full Name (Last, First, Middle Initial) c. Go Daddy		Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2013
Mailing Address 14455 N. Hayden Rd. #219		Amount of Each Disbursement this Period 10.00 Transaction ID : SB17.4607
City Scottsdale	State AZ	
Zip Code 85260	Purpose of Disbursement Web hosting	Category/ Type 001
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02	

SUBTOTAL of Disbursements This Page (optional).....	2510.00
TOTAL 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: (check only one)	PAGE 19 OF 55			
	<input checked="" 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)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Gold Nugget Tavern		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2013
Mailing Address 14401 Excelsior Blvd.		Amount of Each Disbursement this Period 35.45 Transaction ID : SB17.4513
City Minnetonka	State MN	
Purpose of Disbursement Food		Category/ Type 001
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN	District: 02	

Full Name (Last, First, Middle Initial) B. Got Print		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2013
Mailing Address 7651 N. San Fernando Rd.		Amount of Each Disbursement this Period 28.28 Transaction ID : SB17.4565
City Burbank	State CA	
Purpose of Disbursement Business Cards		Category/ Type 001
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN	District: 02	

Full Name (Last, First, Middle Initial) C. Got Print		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2013
Mailing Address 7651 N. San Fernando Rd.		Amount of Each Disbursement this Period 32.27 Transaction ID : SB17.4603
City Burbank	State CA	
Purpose of Disbursement Business Cards		Category/ Type 001
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN	District: 02	

SUBTOTAL of Disbursements This Page (optional).....	96.00
TOTAL 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: (check only one)		PAGE 20 OF 55	
	<input checked="" 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)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Got Print		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2013
Mailing Address 7651 N. San Fernando Rd.		Amount of Each Disbursement this Period 32.27 Transaction ID : SB17.4604
City Burbank State CA Zip Code 91505	Purpose of Disbursement Business Cards Category/Type 001	
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02		

Full Name (Last, First, Middle Initial) B. Got Print		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2013
Mailing Address 7651 N. San Fernando Rd.		Amount of Each Disbursement this Period 32.27 Transaction ID : SB17.4605
City Burbank State CA Zip Code 91505	Purpose of Disbursement Business Cards Category/Type 001	
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02		

Full Name (Last, First, Middle Initial) c. Hibachi Grill		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2013
Mailing Address 1201 South Robert Street		Amount of Each Disbursement this Period 33.77 Transaction ID : SB17.4530
City West Saint Paul State MN Zip Code 55118	Purpose of Disbursement Food for Volunteers Category/Type 003	
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02		

SUBTOTAL of Disbursements This Page (optional).....	98.31
TOTAL 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: (check only one)	PAGE 21 OF 55			
	<input checked="" 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)
Gerson for Congress

A. Holiday Station Store

Full Name (Last, First, Middle Initial)
Mailing Address 2322 Washington Ave North

City Minneapolis State MN Zip Code 55411

Purpose of Disbursement Gas
Candidate Name **Gerson for Congress** Category/Type 002

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: MN District: 02

Date of Disbursement: 04 / 12 / 2013

Amount of Each Disbursement this Period: 58.23
Transaction ID : SB17.4482

B. Holiday Station Store

Full Name (Last, First, Middle Initial)
Mailing Address 2322 Washington Ave North

City Minneapolis State MN Zip Code 55411

Purpose of Disbursement Gas
Candidate Name **Gerson for Congress** Category/Type 002

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: MN District: 02

Date of Disbursement: 04 / 16 / 2013

Amount of Each Disbursement this Period: 100.00
Transaction ID : SB17.4487

c. Holiday Station Store

Full Name (Last, First, Middle Initial)
Mailing Address 2322 Washington Ave North

City Minneapolis State MN Zip Code 55411

Purpose of Disbursement Gas
Candidate Name **Gerson for Congress** Category/Type 002

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: MN District: 02

Date of Disbursement: 04 / 22 / 2013

Amount of Each Disbursement this Period: 100.00
Transaction ID : SB17.4510

SUBTOTAL of Disbursements This Page (optional) 258.23

TOTAL 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: (check only one)		PAGE 22 OF 55	
	<input checked="" 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)
Gerson for Congress

A. Holiday Station Store

Full Name (Last, First, Middle Initial)
Mailing Address 2322 Washington Ave North

City Minneapolis State MN Zip Code 55411

Purpose of Disbursement Gas

Candidate Name **Gerson for Congress**

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: MN District: 02

Date of Disbursement: 04 / 24 / 2013

Amount of Each Disbursement this Period: 56.51

Transaction ID : SB17.4519

Category/Type: 002

B. Holiday Station Store

Full Name (Last, First, Middle Initial)
Mailing Address 2322 Washington Ave North

City Minneapolis State MN Zip Code 55411

Purpose of Disbursement Ice

Candidate Name **Gerson for Congress**

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: MN District: 02

Date of Disbursement: 04 / 29 / 2013

Amount of Each Disbursement this Period: 4.99

Transaction ID : SB17.4527

Category/Type: 003

c. Holiday Station Store

Full Name (Last, First, Middle Initial)
Mailing Address 2322 Washington Ave North

City Minneapolis State MN Zip Code 55411

Purpose of Disbursement gas

Candidate Name **Gerson for Congress**

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: MN District: 02

Date of Disbursement: 04 / 29 / 2013

Amount of Each Disbursement this Period: 200.00

Transaction ID : SB17.4531

Category/Type: 003

SUBTOTAL of Disbursements This Page (optional) 261.50

TOTAL 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: (check only one)	PAGE 23 OF 55			
	<input checked="" 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)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Holiday Station Store		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2013
Mailing Address 2322 Washington Ave North		Amount of Each Disbursement this Period 62.90 Transaction ID : SB17.4543
City Minneapolis	State MN	
Purpose of Disbursement Gas	Category/ Type 002	
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN	District: 02	

Full Name (Last, First, Middle Initial) B. Holiday Station Store		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2013
Mailing Address 2322 Washington Ave North		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.4548
City Minneapolis	State MN	
Purpose of Disbursement Gas	Category/ Type 002	
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN	District: 02	

Full Name (Last, First, Middle Initial) c. Home Goods		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2013
Mailing Address 2100 North Snelling Ave		Amount of Each Disbursement this Period 32.13 Transaction ID : SB17.4554
City Roseville	State MN	
Purpose of Disbursement Solicitation Material - Empty Vessel	Category/ Type 003	
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN	District: 02	

SUBTOTAL of Disbursements This Page (optional).....	195.03
TOTAL 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: (check only one)	PAGE 24 OF 55			
	<input checked="" 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)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. King Cab Co.		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2013
Mailing Address 3706 Mount Vernon Avenue		Amount of Each Disbursement this Period 30.00 Transaction ID : SB17.4621
City Alexandria	State VA	
Zip Code 22305	Purpose of Disbursement Taxi	Category/ Type 002
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02	

Full Name (Last, First, Middle Initial) B. Kmart		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2013
Mailing Address 10 W Lake Street		Amount of Each Disbursement this Period 28.99 Transaction ID : SB17.4526
City Minneapolis	State MN	
Zip Code 55408	Purpose of Disbursement Snacks for Volunteers	Category/ Type 003
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02	

Full Name (Last, First, Middle Initial) c. Leadership Institute		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2013
Mailing Address 1101 N. Highland St.		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.4495
City Arlington	State VA	
Zip Code 22201	Purpose of Disbursement Tuition	Category/ Type 001
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02	

SUBTOTAL of Disbursements This Page (optional).....	308.99
TOTAL 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: (check only one)	PAGE 25 OF 55			
	<input checked="" 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)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Leadership Institute		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2013
Mailing Address 1101 N. Highland St.		Amount of Each Disbursement this Period 50.00 Transaction ID : SB17.4566
City Arlington	State VA	
Zip Code 22201	Purpose of Disbursement Tuition	Category/ Type 001
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02	

Full Name (Last, First, Middle Initial) B. Leadership Institute		Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2013
Mailing Address 1101 N. Highland St.		Amount of Each Disbursement this Period 15.00 Transaction ID : SB17.4600
City Arlington	State VA	
Zip Code 22201	Purpose of Disbursement Tuition	Category/ Type 001
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02	

Full Name (Last, First, Middle Initial) c. Lerum Auto		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2013
Mailing Address 6420 Penn Ave S.		Amount of Each Disbursement this Period 67.98 Transaction ID : SB17.4582
City Richfield	State MN	
Zip Code 55423	Purpose of Disbursement Gas	Category/ Type 002
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02	

SUBTOTAL of Disbursements This Page (optional).....	132.98
TOTAL 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: (check only one)		PAGE 26 OF 55	
	<input checked="" 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)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Libertarian Party of Minnesota		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2013
Mailing Address 1201 42 1/2 Ave NE		Amount of Each Disbursement this Period 50.00 Transaction ID : SB17.4537
City Colombia Heights	State MN	
Zip Code 55421	Purpose of Disbursement Booth Fee	Category/ Type 003
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02	

Full Name (Last, First, Middle Initial) B. Malwarebytes		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2013
Mailing Address 10 Almaden Blvd.		Amount of Each Disbursement this Period 24.95 Transaction ID : SB17.4597
City San Jose	State CA	
Zip Code 95113	Purpose of Disbursement Anti-virus software	Category/ Type 001
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02	

Full Name (Last, First, Middle Initial) c. Minnesota CD2 Republicans		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2013
Mailing Address 16526 West 78th St. #112		Amount of Each Disbursement this Period 480.00 Transaction ID : SB17.4474
City Eden Prairie	State MN	
Zip Code 55346	Purpose of Disbursement Tickets for Reagan Dinner	Category/ Type 003
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02	

SUBTOTAL of Disbursements This Page (optional).....	554.95
TOTAL 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: (check only one)	PAGE 27 OF 55			
	<input checked="" 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)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Office Max		Date of Disbursement MM / DD / YYYY 04 / 04 / 2013
Mailing Address 14121 Aldrich Ave S		Amount of Each Disbursement this Period 86.21 Transaction ID : SB17.4477
City Burnsville	State MN	
Purpose of Disbursement Office Supplies	Category/ Type 001	
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02	

Full Name (Last, First, Middle Initial) B. Office Max		Date of Disbursement MM / DD / YYYY 04 / 08 / 2013
Mailing Address 14121 Aldrich Ave S		Amount of Each Disbursement this Period 6.99 Transaction ID : SB17.4478
City Burnsville	State MN	
Purpose of Disbursement Office Supplies	Category/ Type 001	
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02	

Full Name (Last, First, Middle Initial) c. RLC Minnesota		Date of Disbursement MM / DD / YYYY 04 / 22 / 2013
Mailing Address PO Box 1422		Amount of Each Disbursement this Period 40.00 Transaction ID : SB17.4517
City St. Paul	State MN	
Purpose of Disbursement Dues	Category/ Type 003	
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02	

SUBTOTAL of Disbursements This Page (optional).....	133.20
TOTAL 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: (check only one)		PAGE 28 OF 55	
	<input checked="" 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)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. RLC Minnesota		Date of Disbursement MM / DD / YYYY 04 / 22 / 2013
Mailing Address PO Box 1422		Amount of Each Disbursement this Period 15.00 Transaction ID : SB17.4518
City St. Paul	State MN	
Zip Code 55114	Purpose of Disbursement Table at Convention	Category/ Type 003
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02	

Full Name (Last, First, Middle Initial) B. Scott County Fair		Date of Disbursement MM / DD / YYYY 06 / 28 / 2013
Mailing Address 7151 W. 190th St.		Amount of Each Disbursement this Period 285.00 Transaction ID : SB17.4614
City Jordan	State MN	
Zip Code 55352	Purpose of Disbursement Booth at fair	Category/ Type 003
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02	

Full Name (Last, First, Middle Initial) c. SD 65 Republicans		Date of Disbursement MM / DD / YYYY 05 / 06 / 2013
Mailing Address 525 Park Street, Suite 250		Amount of Each Disbursement this Period 30.00 Transaction ID : SB17.4541
City St. Paul	State MN	
Zip Code 55103	Purpose of Disbursement Entrance to Event	Category/ Type 003
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02	

SUBTOTAL of Disbursements This Page (optional).....	330.00
TOTAL 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: (check only one)	PAGE 29 OF 55			
	<input checked="" 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)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Secretary of State		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2013
Mailing Address 180 State Building 100 Rev Martin Luther King Jr Blvd		Amount of Each Disbursement this Period 11.00 Transaction ID : SB17.4619
City St Paul State MN Zip Code 55155	Purpose of Disbursement Maps 001 Category/Type	
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02		

Full Name (Last, First, Middle Initial) B. Secretary of State		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2013
Mailing Address 180 State Building 100 Rev Martin Luther King Jr Blvd		Amount of Each Disbursement this Period 44.00 Transaction ID : SB17.4520
City St Paul State MN Zip Code 55155	Purpose of Disbursement Voter Data 003 Category/Type	
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02		

Full Name (Last, First, Middle Initial) c. Secretary of State		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2013
Mailing Address 180 State Building 100 Rev Martin Luther King Jr Blvd		Amount of Each Disbursement this Period 35.00 Transaction ID : SB17.4598
City St Paul State MN Zip Code 55155	Purpose of Disbursement Maps 001 Category/Type	
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02		

SUBTOTAL of Disbursements This Page (optional).....	90.00
TOTAL 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: (check only one)	PAGE 30 OF 55			
	<input checked="" 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)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Skype		Date of Disbursement MM / DD / YYYY 06 / 19 / 2013
Mailing Address 23-29 Rives de Clausen		Amount of Each Disbursement this Period 30.00 Transaction ID : SB17.4606
City Luxembourg	State ZZ	
Purpose of Disbursement VOIP	Category/ Type 001	
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02	

Full Name (Last, First, Middle Initial) B. Staples		Date of Disbursement MM / DD / YYYY 04 / 03 / 2013
Mailing Address 2100 Snelling Ave North		Amount of Each Disbursement this Period 47.75 Transaction ID : SB17.4475
City Roseville	State MN	
Purpose of Disbursement Operating Supplies	Category/ Type 001	
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02	

Full Name (Last, First, Middle Initial) c. SuperAmerica		Date of Disbursement MM / DD / YYYY 04 / 11 / 2013
Mailing Address 2250 Cliff Rd		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.4479
City Eagan	State MN	
Purpose of Disbursement Gas	Category/ Type 002	
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02	

SUBTOTAL of Disbursements This Page (optional).....	177.75
TOTAL 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: (check only one)	PAGE 31 OF 55		
	<input checked="" 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)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. SuperAmerica		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2013
Mailing Address 2250 Cliff Rd		Amount of Each Disbursement this Period 50.00
City Eagan State MN Zip Code 55122	Purpose of Disbursement Gas	
Candidate Name Gerson for Congress		Transaction ID : SB17.4503
Office Sought: <input checked="" 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: MN District: 02	Category/Type 002	

Full Name (Last, First, Middle Initial) B. SuperAmerica		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2013
Mailing Address 2250 Cliff Rd		Amount of Each Disbursement this Period 150.00
City Eagan State MN Zip Code 55122	Purpose of Disbursement Gas	
Candidate Name Gerson for Congress		Transaction ID : SB17.4509
Office Sought: <input checked="" 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: MN District: 02	Category/Type 002	

Full Name (Last, First, Middle Initial) c. SuperAmerica		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2013
Mailing Address 2250 Cliff Rd		Amount of Each Disbursement this Period 300.00
City Eagan State MN Zip Code 55122	Purpose of Disbursement Gas	
Candidate Name Gerson for Congress		Transaction ID : SB17.4532
Office Sought: <input checked="" 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: MN District: 02	Category/Type 002	

SUBTOTAL of Disbursements This Page (optional).....	500.00
TOTAL 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: (check only one)		PAGE 32 OF 55	
	<input checked="" 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)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. SuperAmerica		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2013
Mailing Address 2250 Cliff Rd		Amount of Each Disbursement this Period 300.00 Transaction ID : SB17.4616
City Eagan	State MN	
Zip Code 55122	Purpose of Disbursement Gas	Category/ Type 002
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02	

Full Name (Last, First, Middle Initial) B. SuperAmerica		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2013
Mailing Address 2250 Cliff Rd		Amount of Each Disbursement this Period 150.00 Transaction ID : SB17.4571
City Eagan	State MN	
Zip Code 55122	Purpose of Disbursement Gas	Category/ Type 002
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02	

Full Name (Last, First, Middle Initial) c. SuperAmerica		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2013
Mailing Address 2250 Cliff Rd		Amount of Each Disbursement this Period 150.00 Transaction ID : SB17.4572
City Eagan	State MN	
Zip Code 55122	Purpose of Disbursement Gas	Category/ Type 002
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02	

SUBTOTAL of Disbursements This Page (optional).....	600.00
TOTAL 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: (check only one)	PAGE 33 OF 55			
	<input checked="" 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)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. SuperAmerica		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2013
Mailing Address 2250 Cliff Rd		Amount of Each Disbursement this Period 300.00 Transaction ID : SB17.4594
City Eagan State MN Zip Code 55122	Purpose of Disbursement Gas 002 Category/Type	
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02		

Full Name (Last, First, Middle Initial) B. SuperAmerica		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2013
Mailing Address 2250 Cliff Rd		Amount of Each Disbursement this Period 300.00 Transaction ID : SB17.4609
City Eagan State MN Zip Code 55122	Purpose of Disbursement Gas 002 Category/Type	
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02		

Full Name (Last, First, Middle Initial) c. SuperAmerica		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2013
Mailing Address 2250 Cliff Rd		Amount of Each Disbursement this Period 57.33 Transaction ID : SB17.4610
City Eagan State MN Zip Code 55122	Purpose of Disbursement Gas 002 Category/Type	
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02		

SUBTOTAL of Disbursements This Page (optional).....	657.33
TOTAL 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: (check only one)	PAGE 34 OF 55		
	<input checked="" 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)
Gerson for Congress

Full Name (Last, First, Middle Initial)
A. SuperTarget

Mailing Address 810 County Rd 42

City Burnsville State MN Zip Code 55337

Purpose of Disbursement Paper

Candidate Name **Gerson for Congress**

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: MN District: 02

Date of Disbursement: 06 / 24 / 2013

Amount of Each Disbursement this Period: 6.21

Transaction ID : SB17.4608

Category/Type: 001

Full Name (Last, First, Middle Initial)
B. Tax Payers League of Minnesota

Mailing Address 1402 Concordia Avenue

City St. Paul State MN Zip Code 55104

Purpose of Disbursement Booth Cost for Tax Payers Rally

Candidate Name **Gerson for Congress**

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: MN District: 02

Date of Disbursement: 04 / 16 / 2013

Amount of Each Disbursement this Period: 150.00

Transaction ID : SB17.4492

Category/Type: 004

Full Name (Last, First, Middle Initial)
c. TT Automotive

Mailing Address 601 East 66th St.

City Richfield State MN Zip Code 55423

Purpose of Disbursement Gas

Candidate Name **Gerson for Congress**

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: MN District: 02

Date of Disbursement: 05 / 20 / 2013

Amount of Each Disbursement this Period: 75.00

Transaction ID : SB17.4560

Category/Type: 002

SUBTOTAL of Disbursements This Page (optional)..... 231.21

TOTAL 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: (check only one)	PAGE 35 OF 55			
	<input checked="" 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)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Paul Tuschy		Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2013
Mailing Address 2865 Upper 79th Ct. E		Amount of Each Disbursement this Period 350.00 Transaction ID : SB17.4507
City Inver Grove Heights	State MN	
Zip Code 55076	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02	

Full Name (Last, First, Middle Initial) B. Paul Tuschy		Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2013
Mailing Address 2865 Upper 79th Ct. E		Amount of Each Disbursement this Period 350.00 Transaction ID : SB17.4508
City Inver Grove Heights	State MN	
Zip Code 55076	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02	

Full Name (Last, First, Middle Initial) c. Paul Tuschy		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2013
Mailing Address 2865 Upper 79th Ct. E		Amount of Each Disbursement this Period 350.00 Transaction ID : SB17.4534
City Inver Grove Heights	State MN	
Zip Code 55076	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02	

SUBTOTAL of Disbursements This Page (optional).....	1050.00
TOTAL 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: (check only one)		PAGE 36 OF 55	
	<input checked="" 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)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Paul Tuschy		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2013
Mailing Address 2865 Upper 79th Ct. E		Amount of Each Disbursement this Period 350.00 Transaction ID : SB17.4550
City Inver Grove Heights	State MN	
Zip Code 55076	Purpose of Disbursement Canvassing	Category/ Type 001
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) B. Paul Tuschy		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2013
Mailing Address 2865 Upper 79th Ct. E		Amount of Each Disbursement this Period 350.00 Transaction ID : SB17.4551
City Inver Grove Heights	State MN	
Zip Code 55076	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02	

Full Name (Last, First, Middle Initial) c. Paul Tuschy		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2013
Mailing Address 2865 Upper 79th Ct. E		Amount of Each Disbursement this Period 550.00 Transaction ID : SB17.4562
City Inver Grove Heights	State MN	
Zip Code 55076	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name Gerson for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MN District: 02	

SUBTOTAL of Disbursements This Page (optional).....	1250.00
TOTAL 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: (check only one)	PAGE 37 OF 55			
	<input checked="" 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)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Paul Tuschy		Date of Disbursement MM / DD / YYYY 06 / 03 / 2013
Mailing Address 2865 Upper 79th Ct. E		Amount of Each Disbursement this Period 550.00 Transaction ID : SB17.4584
City Inver Grove Heights	State MN	
Zip Code 55076	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02	

Full Name (Last, First, Middle Initial) B. Paul Tuschy		Date of Disbursement MM / DD / YYYY 06 / 03 / 2013
Mailing Address 2865 Upper 79th Ct. E		Amount of Each Disbursement this Period 550.00 Transaction ID : SB17.4585
City Inver Grove Heights	State MN	
Zip Code 55076	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02	

Full Name (Last, First, Middle Initial) c. Paul Tuschy		Date of Disbursement MM / DD / YYYY 06 / 17 / 2013
Mailing Address 2865 Upper 79th Ct. E		Amount of Each Disbursement this Period 550.00 Transaction ID : SB17.4601
City Inver Grove Heights	State MN	
Zip Code 55076	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02	

SUBTOTAL of Disbursements This Page (optional).....	1650.00
TOTAL 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: (check only one)	PAGE 38 OF 55			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Paul Tuschy		Date of Disbursement MM / DD / YYYY 06 / 17 / 2013
Mailing Address 2865 Upper 79th Ct. E		Amount of Each Disbursement this Period 550.00 Transaction ID : SB17.4602
City Inver Grove Heights	State MN	
Zip Code 55076	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02	

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement MM / DD / YYYY 04 / 03 / 2013
Mailing Address 7287 153rd St		Amount of Each Disbursement this Period 1.32 Transaction ID : SB17.4476
City Apple Valley	State MN	
Zip Code 55124	Purpose of Disbursement Postage	Category/ Type 001
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02	

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement MM / DD / YYYY 06 / 25 / 2013
Mailing Address 7287 153rd St		Amount of Each Disbursement this Period 2.75 Transaction ID : SB17.4611
City Apple Valley	State MN	
Zip Code 55124	Purpose of Disbursement Postage	Category/ Type 001
Candidate Name Gerson for Congress	Office Sought: <input checked="" 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: MN District: 02	

SUBTOTAL of Disbursements This Page (optional).....	554.07
TOTAL This Period (last page this line number only).....	15723.55

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) Transaction ID : SC/10.4392
Gerson for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) David Adam Gerson	[PERSONAL FUNDS]	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1035 Summit Ave		
City South Saint Paul	State MN	ZIP Code 55075

Original Amount of Loan 16554.96	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 16554.96
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TERMS

Date Incurred M 05 / D 29 / Y 2012	Date Due M M / D D / Y 1/1/2020	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	16554.96
TOTALS This Period (last page in this line only).....	
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Gerson for Congress

Transaction ID : SC/10.4365

LOAN SOURCE Full Name (Last, First, Middle Initial)
David Adam Gerson

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
1035 Summit Ave

City State ZIP Code
South Saint Paul MN 55075

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
10000.00	0.00	10000.00

TERMS

Date Incurred: M 07 / D 19 / Y 2012
 Date Due: M M / D D / Y NA
 Interest Rate: 0.00 % (apr)
 Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	10000.00
TOTALS This Period (last page in this line only).....	▶	[]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Gerson for Congress

Transaction ID : SC/10.4381

LOAN SOURCE Full Name (Last, First, Middle Initial)
David Adam Gerson

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
1035 Summit Ave

City State ZIP Code
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
5000.00 0.00 5000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 07 / D 24 / Y 2012 M M / D D / Y NA % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶ 5000.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Gerson for Congress** Transaction ID : **SC/10.4468**

LOAN SOURCE Full Name (Last, First, Middle Initial) **David Adam Gerson** *[PERSONAL FUNDS]* Election: 2012
 Primary
 General
 Other (specify) ▼

Mailing Address
1035 Summit Ave

City State ZIP Code
South Saint Paul MN 55075

Original Amount of Loan 5.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 5.00
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TERMS

Date Incurred M 07 / D 24 / Y 2012	Date Due M M / D D / Y NA	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	[] 5.00
TOTALS This Period (last page in this line only).....	[]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Gerson for Congress

Transaction ID : SC/10.4128

LOAN SOURCE Full Name (Last, First, Middle Initial)

David Adam Gerson

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
1035 Summit Ave

City State ZIP Code
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
5000.00 0.00 5000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 07 / D 26 / Y 2012 M M / D D / Y NA % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶ 5000.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Gerson for Congress

Transaction ID : SC/10.4389

LOAN SOURCE Full Name (Last, First, Middle Initial)
David Adam Gerson

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
1035 Summit Ave

City State ZIP Code
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
5000.00 0.00 5000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
08 / 01 / 2012 M M / D D / Y Y Y Y na 0.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 5000.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Gerson for Congress

Transaction ID : SC/10.4129

LOAN SOURCE Full Name (Last, First, Middle Initial)
David Adam Gerson

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
1035 Summit Ave

City State ZIP Code
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
5000.00 0.00 5000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
08 / 10 / 2012 M M / D D / Y Y NA 0.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... 5000.00

TOTALS This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Gerson for Congress** Transaction ID : **SC/10.4470**

LOAN SOURCE Full Name (Last, First, Middle Initial) **David Adam Gerson** *[PERSONAL FUNDS]* Election: 2012
 Primary
 General
 Other (specify) ▼

Mailing Address
 1035 Summit Ave

City State ZIP Code
 South Saint Paul MN 55075

Original Amount of Loan 6.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 6.00
---------------------------------	------------------------------------	---

TERMS

Date Incurred M 08 / D 10 / Y 2012	Date Due M / D / Y NA	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶ [] 6.00
TOTALS This Period (last page in this line only).....	▶ []

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Gerson for Congress

Transaction ID : SC/10.4130

LOAN SOURCE Full Name (Last, First, Middle Initial)
David Adam Gerson

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
1035 Summit Ave

City State ZIP Code
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
1000.00 0.00 1000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 08 / D 17 / Y 2012 M M / D D / Y NA % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... 1000.00

TOTALS This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Gerson for Congress

Transaction ID : SC/10.4131

LOAN SOURCE Full Name (Last, First, Middle Initial)
David Adam Gerson

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
1035 Summit Ave

City State ZIP Code
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
1000.00 0.00 1000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
08 / 20 / 2012 M M / D D / Y Y NA 0.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 1000.00

TOTALS This Period (last page in this line only)..... ▶ []

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Gerson for Congress

Transaction ID : SC/10.4442

LOAN SOURCE Full Name (Last, First, Middle Initial)
David Adam Gerson

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
1035 Summit Ave

City State ZIP Code
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
479.33 0.00 479.33

TERMS

Date Incurred Date Due Interest Rate Secured:
02 / 22 / 2013 M M / D D / 1/1/2020 Y 0.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶ 479.33

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) Transaction ID : SC/10.4444
Gerson for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) David Adam Gerson	[PERSONAL FUNDS]	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1035 Summit Ave		

City	State	ZIP Code
South Saint Paul	MN	55075

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
3000.00	0.00	3000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 02 / D 25 / Y 2013	M M / D D / Y 1/1/2020	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional).....	<input style="width: 100%;" type="text" value="3000.00"/>
TOTALS This Period (last page in this line only).....	<input style="width: 100%;" type="text"/>
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Gerson for Congress

Transaction ID : SC/10.4464

LOAN SOURCE Full Name (Last, First, Middle Initial)
David Adam Gerson

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
1035 Summit Ave

City State ZIP Code
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
3000.00 0.00 3000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 03 / D 26 / Y 2013 M M / D D / Y 1/1/2020 Y 0.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 3000.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Gerson for Congress

Transaction ID : SC/10.4502

LOAN SOURCE Full Name (Last, First, Middle Initial)
David Adam Gerson

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
1035 Summit Ave

City State ZIP Code
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
4000.00 0.00 4000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 04 / D 18 / Y 2013 M M / D D / Y 1/1/20 0.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶ 4000.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Gerson for Congress

Transaction ID : SC/10.4545

LOAN SOURCE Full Name (Last, First, Middle Initial)
David Adam Gerson

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
1035 Summit Ave

City State ZIP Code
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
4000.00 0.00 4000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 05 / D 13 / Y 2013 M M / D D / Y 1/1/20 0.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶ 4000.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Gerson for Congress

Transaction ID : SC/10.4591

LOAN SOURCE Full Name (Last, First, Middle Initial)
David Adam Gerson

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
1035 Summit Ave

City State ZIP Code
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
5000.00 0.00 5000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 06 / D 10 / Y 2013 M M / D D / Y 1/1/20 0.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 5000.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Gerson for Congress** Transaction ID : **SC/10.4622**

LOAN SOURCE Full Name (Last, First, Middle Initial) **David Adam Gerson** *[PERSONAL FUNDS]* Election: 2014
 Primary
 General
 Other (specify) ▼

Mailing Address
1035 Summit Ave

City State ZIP Code
South Saint Paul MN 55075

Original Amount of Loan 131.12	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 131.12
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TERMS

Date Incurred M 06 / D 30 / Y 2013	Date Due M M / D D / Y 1/1/20	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	131.12
TOTALS This Period (last page in this line only).....	▶	68176.41

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.