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FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORIVI 3	For An Auth	orized Com	mittee		(	Office Use Only
NAME OF     COMMITTEE (in full)	TYPE OR PRINT ▼		cample: If typing, er the lines.	type	12FE4M5	
Gerson for Congress						I
ADDRESS (number and street)	PO Box 1465					
▼						
Check if different than previously reported. (ACC)	Burnsville				MN 5	55337
2. FEC IDENTIFICATION NU	JMBER ▼	CITY ▲		S	TATE A	ZIP CODE ▲
C C00523738	3	3. IS THIS REPORT	× NEW (N)	OR	AMENDE (A)	STATE ▼ DISTRICT  MN  02  1
4. TYPE OF REPORT (Cho	pose One) (b)	12-Day PRF	-Election Report	for the		
(a) Quarterly Reports:	(8)	12 Day THE		ioi tiic.	1	
April 15 Quarterly F	Report (Q1)	Ш	Primary (12P)		General (12	Runoff (12R)
			Convention (12	(C)	Special (12	S)
July 15 Quarterly R	eport (Q2)		M M /	D D /	Y Y Y Y	in the
October 15 Quarter	ly Report (Q3)	Election on				State of
January 31 Year-En	d Report (YE) (c)	30-Day <b>POS</b>	<b>ST</b> -Election Repo	rt for the:		
		П	General (30G)	Г	Runoff (30F	Special (30S)
п			denoral (eed)		Transii (ooi	i) Opeoidi (000)
Termination Report	(TER)	Election on	M M /	D D /	Y Y Y Y	in the State of
5. Covering Period 07	M / D D / Y	у у у 2016	through	M M 09	/ 0 0 /	2016
I certify that I have examined the	Gerson, David, Ac		nowledge and be	lief it is tru	e, correct and	complete.
	on, David, Adam, ,		[Electronically Fil	[ed] Da	ate 10	/ 11 / 2016
NOTE: Submission of false, errone	eous, or incomplete in	formation mav	subject the perso	n signina th	nis Report to the	penalties of 52 U.S.C. §30109
Office		<del></del>	<u>, , , , , , , , , , , , , , , , , , , </u>		·	· · · · · · · · · · · · · · · · · · ·
Use Only						FEC FORM 3 (Revised 05/2016)

#### **SUMMARY PAGE**

of Receipts and Disbursements

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FEC Form 3 (Revised 05/2016)

Write or Type Committee Name Gerson for Congress

2016 2016 09 30 01 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 0.00 131367.85 (other than loans) (from Line 11(e)) .... (b) Total Contribution Refunds 0.00 10800.00 (from Line 20(d)) ..... (c) Net Contributions (other than loans) 0.00 120567.85 (subtract Line 6(b) from Line 6(a)) ...... 7. Net Operating Expenditures (a) Total Operating Expenditures 183.88 147358.72 (from Line 17) ..... (b) Total Offsets to Operating 1505.11 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 183.88 145853.61 (subtract Line 7(b) from Line 7(a)) ...... Cash on Hand at Close of 104177.57 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 275000.00 Schedule C and/or Schedule D).....

#### For further information contact:

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

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

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3 (Revised 05/2016)

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Write or Type Committee Name

#### Gerson for Congress

Report Covering the Period: From: 07 01 2016 To: 09 30 2016

	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date		
1.	CONTRIBUTIONS (other than loans) FROM:				
	(a) Individuals/Persons Other Than				
	Political Committees (i) Itemized (use Schedule A)	0.00	115742.66		
	(ii) Unitemized	0.00	13585.19		
	(iii) TOTAL of contributions from individuals	0.00	129327.85		
	(b) Political Party Committees	0.00	0.00		
	(c) Other Political Committees (such as PACs)	0.00	1500.00		
	(d) The Candidate	0.00	540.00		
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	131367.85		
2.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00		
3.	LOANS:				
	(a) Made or Guaranteed by the Candidate	0.00	127432.59		
	(b) All Other Loans	0.00	0.00		
	(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	127432.59		
١.	OFFSETS TO OPERATING				
	EXPENDITURES (Refunds, Rebates, etc.)	0.00	1505.11		
5.	OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00		
).	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	0.00	260305.55		

**DETAILED SUMMARY PAGE** 

of Disbursements

FEC Form 3 (Revised 05/2016)

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		II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPI	ERATING EXPENDITURES	183.88	147358.72
18.		ANSFERS TO OTHER THORIZED COMMITTEES	0.00	0.00
19.	LOA	AN 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.	REF	FUNDS OF CONTRIBUTIONS TO:		
	(a)	Individuals/Persons Other Than Political Committees	0.00	10800.00
				, , ,
	(b)	Political Party Committees Other Political Committees	0.00	0.00
	(c)	(such as PACs)	0.00	0.00
	(d)	TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	10800.00
21.	ОТІ	HER DISBURSEMENTS	0.00	0.00
22.		TAL DISBURSEMENTS d Lines 17, 18, 19(c), 20(d), and 21)	183.88	158158.72
		III. CASH SU	MMARY	
23.	CAS	SH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	104361.45
24	то	TAL RECEIPTS THIS PERIOD (from Line 1	16, page 3)	0.00
25.	SUI	BTOTAL (add Line 23 and Line 24)		104361.45
26.	TO	TAL DISBURSEMENTS THIS PERIOD (fron	m Line 22)	183.88
27.		SH ON HAND AT CLOSE OF REPORTING	S PERIOD	104177.57

#### SCHEDULE B (FEC Form 3)

**PAGE** 5 46 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **x** 17 18 19a Detailed Summary Page 20a 20b 20c 21

ITEMIZED DISBURSEMENTS 19b 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) Date of Disbursement Go Daddy 2016 25 Mailing Address 14455 N. Hayden Rd. #219 City State Zip Code **FEC Identification Number** Α7 Scottsdale 85260 Purpose of Disbursement Website 003 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2018 Office Sought: House 95.88 Senate Primary General Transaction ID: SB17.6923 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) **USPS** Date of Disbursement Mailing Address 7287 153rd St 2016 19 City State Zip Code **FEC Identification Number** MN Apple Valley 55124 Purpose of Disbursement 003 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2018 85.00 Office Sought: House Senate Primary General Transaction ID: SB17.6925 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing Address City State Zip Code **FEC Identification Number** Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 180.88 TOTAL This Period (last page this line number only)..... 180.88

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

PAGE 6
FOR LINE NUMBER: (check only one)

13a 13b

OF

		130				
NAME OF COMMITTEE (In Full)  Gerson for Congress		Transaction ID : SC/10.4392				
		I				
LOAN SOURCE Full Name (Last, First, Mic Gerson, David, Adam, ,	ldle Initial)	☐ Memo Item				
Mailing Address PO Box 1465		General Other (specify) ▼				
City	State	ZIP Code  ** Personal Funds of the Candidate				
Burnsville	MN	55337 Personal Funds of the Candidate				
Original Amount of Loan	Cumulative Pay	ment To Date  Balance Outstanding at Close of This Period				
16554.96	,	0.00				
TERMS Date Incurred	D	ate Due Interest Rate Secured: (If none, enter 0)				
M05M / D29D / Y Ž01Ž Y	M M / D D	/				
List All Endorsers or Guarantors (if any) to	o Loan Source					
1. Full Name (Last, First, Middle Initial)		Name of Employer				
Mailing Address		Occupation				
		Amount				
City State	ZIP Code	Guaranteed Outstanding:				
2. Full Name (Last, First, Middle Initial)	'	Name of Employer				
Mailing Address		Occupation				
		Amount				
City	ZIP Code	Guaranteed Outstanding:				
3. Full Name (Last, First, Middle Initial)	•	Name of Employer				
Mailing Address		Occupation				
		Amount				
City	ZIP Code	Guaranteed Outstanding:				
4. Full Name (Last, First, Middle Initial)	•	Name of Employer				
Mailing Address		Occupation				
		Amount				
City State	ZIP Code	Guaranteed Outstanding:				
SUBTOTALS This Period This Page (optional)		16554.96				
TOTALS This Period (last page in this line only	r)	······································				
Carry outstanding balance only to LINE 3, Sch	edule D, for this	line. If no Schedule D, carry forward to appropriate line of Summary.				

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

PAGE 7 OF
FOR LINE NUMBER:
(check only one)

13a 13b

						•				130
AME OF COMMITTEE (In Full) Gerson for Congress					Transa	action II	D : SC/10.4	365		
LOAN SOURCE Full Name (Last, First, Middle Initial)  Gerson, David, Adam, ,  Mailing Address PO Box 1465					Memo Iten	<b>X</b>	tion: 2012 Primary General Other (spec			
		I <b>a.</b> .				<del>  -</del>				
City  Burnsville		State MN	ZIP Code 55337			×	Personal I	unds of	the Car	ndidate
			Do	lanaa O	tatandina	at Class	of Thio	Daviad		
	Original Amount of Loan Cumulative Payment To  10000.00					iance o	utstanding		0000.00	_
TERMS Date Incurred		D	ate Due		Interest Ra			Sed	cured:	
<sup>M</sup> 07 <sup>M</sup> / <sup>D</sup> 19 <sup>D</sup> / Y Ž01Ž	Υ	M M / D D	/ Y YNA			0.00	% (apr)		Yes	<b>x</b> No
List All Endorsers or Guarantors	(if any) t	o Loan Source								
1. Full Name (Last, First, Middle II	nitial)		Nar	ne of Emp	oloyer					
Mailing Address			Occ	cupation						
	Γ_	T		ount aranteed	_	-			-	
City	State	ZIP Code		standing:		7	7			
2. Full Name (Last, First, Middle In	tial)	1	Nar	Name of Employer						
Mailing Address				cupation						
City	State	ZIP Code	Gua	ount aranteed standing:		7	,			
3. Full Name (Last, First, Middle In	tial)		Nar	Name of Employer						
Mailing Address			Occ	Occupation						
City	State	ZIP Code	Gua	ount aranteed standing:		7	7			
4. Full Name (Last, First, Middle In	tial)			ne of Emp	oloyer					
Mailing Address			Occ	cupation						
0::	lo	710.0		ount aranteed						
City	State	ZIP Code		standing:		7	7			
SUBTOTALS This Period This Page (o	ptional)				▶		7	, 1	0000.00	)
TOTALS This Period (last page in this					▶		7	7	1 /	
Carry outstanding balance only to LIP	NE 3, Sch	nedule D, for this	line. If no S	chedule <b>C</b>	D, carry for	rward to	o appropri	ate line d	of Sumi	mary.

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

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FOR LINE NUMBER: (check only one)

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		13b			
AME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4381			
LOAN SOURCE Full Name (Last, First, Mailing Address PO Box 1465	Middle Initial)	☐ Memo Item  Election: 2012  ## Primary  General  Other (specify) ▼			
City Burnsville	State	ZIP Code  55337  Personal Funds of the Candidate			
Original Amount of Loan 5000.00	Cumulative Pa	byment To Date  Balance Outstanding at Close of This Period  0.00  5000.00			
TERMS Date Incurred	M " M / D " D	Date Due Interest Rate (If none, enter 0)  O / Y YNAY Y 0.00 % (apr)  Yes X 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	ZIP Code	Amount Guaranteed Outstanding:			
2. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City	ZIP Code	Amount Guaranteed Outstanding:			
3. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City	ZIP Code	Amount Guaranteed Outstanding:			
4. Full Name (Last, First, Middle Initial)	<b>'</b>	Name of Employer			
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:			
UBTOTALS This Period This Page (optional)					
	Schedule D. for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.			

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

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FOR LINE NUMBER: (check only one)

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4468
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Floation: 2042
Gerson, David, Adam, ,	viidule iriitiai)	☐ Memo Item
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code  F5007  Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
5.00	9	0.00 5.00
TERMS Date Incurred	[	Date Due Interest Rate Secured: (If none, enter 0)
M 07M / D24D / Y Ž01Ž Y	M M / D D	y YNA Y 0.00
List All Endorsers or Guarantors (if any	) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	·	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional		5.00
TOTALS This Period (last page in this line of	nly)	······
Carry outstanding balance only to LINE 3, S	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4128
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2012
Gerson, David, Adam, ,	viidaio iriitiaiy	Memo Item    Clection: 2012
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code  F5007  Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
5000.00	,	0.00 5000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M07 <sup>M</sup> / D26 <sup>D</sup> / Y Ž01Ž Y	M M / D D	/ Y YNA Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any	) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	<u>'</u>	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optiona	I)	
CODICIALS THIS FERIOR THIS Fage (options		5000.00
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Carry outstanding balance only to LINE 3, S	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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Transaction ID: SC/10.4389 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville 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: (If none, enter 0) 0.00 D01D <sup>M</sup>80<sup>M</sup> Ž01Ž Yna Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code 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.

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

FOR LINE NUMBER: (check only one)

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4129
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Memo Item Election: 2012
Gerson, David, Adam, ,	Wilder Filler	Memo Item    Clection: 2012
Mailing Address PO Box 1465		Other (specify) ▼
City	State	ZIP Code  Scool Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
5000.00		0.00 5000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M08M / D10D / Y Z01Ž Y	M M / D D	/ YNAY Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if an	y) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	- I	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	•	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
CURTOTAL O This Deviced This Deve (aution	-10	
SUBTOTALS This Period This Page (option	aı)	5000.00
TOTALS This Period (last page in this line	only)	
Carry outstanding balance only to LINE 3,	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4470
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Election: 0040
Gerson, David, Adam, ,	viidale Illitial)	☐ Memo Item
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code  F5007  Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
6.00		0.00 6.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
<sup>M</sup> 08 <sup>M</sup> / □10 □ / □ Ž01Ž □ Y	M M / D D	/ Y YNA Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any	) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	·	Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (options	al)	
CODICIALS THIS FEHOU THIS FAGE (OPHONE	٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠	6.00
TOTALS This Period (last page in this line of	only)	······································
Carry outstanding balance only to LINE 3,	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4130
LOAN SOURCE Full Name (Last, First, M	Middle Initial)	Memo Item Election: 2012
Gerson, David, Adam, ,	madio miliary	Memo Item    Clection: 2012
Mailing Address PO Box 1465		Other (specify) ▼
City	State	ZIP Code  Second Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
1000.00	,	0.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M08M / D17D / Y Ž01Ž Y	M M / D D	/ Y YNAY Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any)	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	1	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional	l)·····	1000.00
TOTALS This Period (last page in this line o	nly)	······
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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OF

		100		
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4131		
LOAN SOURCE Full Name (Last, First, I	Middle Initial)	Memo Item Election: 2012		
Gerson, David, Adam, ,	Memo Item    Clection: 2012			
Mailing Address PO Box 1465	Other (specify)			
City	City State ZIP Code			
Burnsville	MN	55337 Personal Funds of the Candidate		
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period		
1000.00	l ,	0.00 1000.00		
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)		
M08M / D20D / Y Ž01Ž Y	M M / D D	/ Y YNAY Y 0.00 % (apr) Yes X No		
List All Endorsers or Guarantors (if any	) to Loan Source			
Full Name (Last, First, Middle Initial)	<u>,                                      </u>	Name of Employer		
Mailing Address		Occupation		
		Amount		
City	Guaranteed Outstanding:			
2. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount Guaranteed		
City	City State ZIP Code Guaranteed Outstanding:			
3. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
	I	Amount		
City	ZIP Code	Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Initial)	-	Name of Employer		
Mailing Address		Occupation		
		Amount		
City	ZIP Code	Guaranteed Outstanding:		
CURTOTAL C This Deviced This Degre (entires	Λ.			
SUBTOTALS This Period This Page (optional		1000.00		
TOTALS This Period (last page in this line of	nly)	······································		
Carry outstanding balance only to LINE 3, 5	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.		

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

FOR LINE NUMBER: (check only one)

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4442
LOAN SOURCE Full Name (Last, First, N	liddle Initial)	Floation: 2044
Gerson, David, Adam, ,	Memo Item  Election: 2014    x   Primary   General	
Mailing Address PO Box 1465	Other (specify) ▼	
City	State	ZIP Code  Second Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
479.33	,	0.00 479.33
TERMS Date Incurred		Date Due Interest Rate Secured: (If none, enter 0)
M02M / D22D / Y Ž013 Y	M M / D D	/ Y 1/Ĭ/20Ž0 Y 0.00
List All Endorsers or Guarantors (if any)	to Loan Source	
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City State	Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)	·	Name of Employer
Mailing Address		Occupation
		Amount
City	Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional		
		7
TOTALS This Period (last page in this line or	nly)	······
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

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OF

IAME OF COMMITTEE (In Gerson for Congres			Transa	action ID : SC/10.4444
Gerson, David, Ac	n Election: 2014  x Primary  General			
Mailing Address PO Box 1465	Other (specify) ▼			
City		State	ZIP Code	X Personal Funds of the Candidate
Burnsville		MN	55337	Torsonal Funds of the Canadate
Original Amount of Loa	n	Cumulative Page	yment To Date Ba	alance Outstanding at Close of This Period
	3000.00		0.00	3000.00
TERMS Date Inc.	urred	С	Date Due Interest Ra	
M02M / D25D /	<sup>Y</sup> Ž013 <sup>Y</sup>	M M / D D		0.00 % (apr) Yes X No
List All Endorsers or G	, ,	o Loan Source		
1. Full Name (Last, Firs	st, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	7
2. Full Name (Last, First	t, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
0:1	lo	710 0 1	Amount Guaranteed	
City	State	ZIP Code	Outstanding:	9 9
3. Full Name (Last, First	t, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed	
•		Zir Code	Outstanding:	9 9
4. Full Name (Last, First	t, Middle Initial)		Name of Employer	
Mailing Address		Occupation	Occupation	
City	State	ZIP Code	Amount Guaranteed	
Oity	State	Zii Oode	Outstanding:	9 9
SUBTOTALS This Period T	his Page (optional)			3000.00
TOTALS This Period (last p	page in this line only	·) ·······		
Carry outstanding balance	only to LINE 3 Sob	nedule D for this	s line If no Schedule D. carry fo	rward to appropriate line of Summary.
Carry outstanding balance	only to LINE 3, Sch	neaule D, for this	s line. It no Schedule D, carry fo	rward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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OF

		100		
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4464		
LOAN SOURCE Full Name (Last, First, N	liddle Initial)	Memo Item Election: 2014		
Gerson, David, Adam, ,	Memo Item    Clection: 2014			
Mailing Address PO Box 1465	Other (specify)			
City	City State ZIP Code			
Burnsville	MN	55337 Personal Funds of the Candidate		
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period		
3000.00	,	0.00 3000.00		
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)		
M03M / D26D / Y Ž013 Y	M M / D D	/ Y 1/1/2020 Y 0.00 % (apr) Yes X No		
List All Endorsers or Guarantors (if any)	to Loan Source			
1. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount		
City	City State ZIP Code Guaranteed Outstanding:			
2. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount Guaranteed		
City	ZIP Code	Outstanding:		
3. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount		
City State	ZIP Code	Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount		
City State	ZIP Code	Guaranteed Outstanding:		
SUBTOTALS This Period This Page (optional				
COSTOTATO THIS FEROU THIS FAGE (OPLICHAL	,	3000.00		
TOTALS This Period (last page in this line or	nly)	······································		
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.		

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

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Transaction ID: SC/10.4502 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville 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: (If none, enter 0) 0.00 D 18D M 04M ž013 1/1/20 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code 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.

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

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OF

		130
AME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4545
LOAN SOURCE Full Name (Last, First, I Gerson, David, Adam, ,	Middle Initial)	Memo Item Election: 2014    X   Primary   General
Mailing Address PO Box 1465		Other (specify) ▼ ————————————————————————————————————
City	State	ZIP Code  55337  Personal Funds of the Candidate
Burnsville Original Amount of Loan	Cumulative Pa	
4000.00	Cumulative Fa	ment To Date  Balance Outstanding at Close of This Period  0.00  4000.00
TERMS Date Incurred	С	ate Due Interest Rate Secured: (If none, enter 0)
M05 <sup>M</sup> / D13 <sup>D</sup> / Y Ž013 Y	M M / D D	/ Y 1/1/20 Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any	) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City	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
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optiona		
FOTALS This Period (last page in this line of		, 100000
		7
Carry outstanding balance only to LINE 3, S	schedule D, for this	line. If no Schedule D, carry forward to appropriate line of Summary.

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Transaction ID: SC/10.4591 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville 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: (If none, enter 0) 0.00 <sup>D</sup>10<sup>D</sup> M 06M ž013 1/1/20 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code 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.

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4622
LOAN SOURCE Full Name (Last, First, N	liddle Initial)	Floation: 2044
Gerson, David, Adam, ,	☐ Memo Item	
Mailing Address PO Box 1465	Other (specify)   ———————————————————————————————————	
City	State	ZIP Code  F5007  Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
131.12		0.00 131.12
TERMS Date Incurred	[	Date Due Interest Rate Secured: (If none, enter 0)
M06 <sup>M</sup> / D30 <sup>D</sup> / Y Ž013 Y	M M / D D	/ Y 1/1/20 Y 0.00
List All Endorsers or Guarantors (if any)	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)	·	Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City State	Outstanding:	
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	,	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional		
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TOTALS This Period (last page in this line or	nly)	
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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OF

		100		
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5169		
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Memo Item Election: 2014		
Gerson, David, Adam, ,	Memo Item    Clection: 2014			
Mailing Address PO Box 1465	Other (specify)			
City				
Burnsville	MN	55337 Personal Funds of the Candidate		
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period		
5000.00		0.00 5000.00		
TERMS Date Incurred	Γ	Date Due Interest Rate Secured:		
M07 <sup>M</sup> / D05 <sup>D</sup> / Y 2013 Y	M M / D D	0.00 % (apr) Yes X No		
List All Endorsers or Guarantors (if any	/) to Loan Source			
1. Full Name (Last, First, Middle Initial)	,	Name of Employer		
Mailing Address		Occupation		
		Amount		
City	Guaranteed Outstanding:			
2. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount Guaranteed		
City	State ZIP Code Guaranteed Outstanding:			
3. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount		
City	ZIP Code	Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Initial)	1	Name of Employer		
Mailing Address		Occupation		
		Amount		
City	ZIP Code	Guaranteed Outstanding:		
SUBTOTALS This Period This Page (option				
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Carry outstanding balance only to LINE 3,	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.		

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AME OF COMMITTEE (In Full) Gerson for Congress			•	Transa	ction ID : SC/10.5170	
LOAN SOURCE Full Name (Last, First, Middle Initial)  Gerson, David, Adam, ,				☐ Memo Item	Memo Item Election: 2014  x Primary  General	
Mailing Address PO Box 1465					Other (specify)	
City		State	ZIP Code		Personal Funds of the Candidate	
Burnsville Original Amount of Loan		Cumulative Pay	ment To Date	Ba	lance Outstanding at Close of This Period	
5000	0.00	ournalative ray	THORIT TO DATE	0.00	5000.00	
TERMS Date Incurred		D	ate Due	Interest Ra		
M07 <sup>M</sup> / D29 <sup>D</sup> / Y Ž013	Y	M M / D D	/ Y 1)/1/20	) Y	% (apr) Yes X No	
List All Endorsers or Guarantors	(if any) to	Loan Source	,			
1. Full Name (Last, First, Middle I	nitial)		Nam	e of Employer		
Mailing Address			Occi	upation		
City	State	ZIP Code		unt ranteed standing:	9 9 9	
2. Full Name (Last, First, Middle In	2. Full Name (Last, First, Middle Initial)			e of Employer		
Mailing Address			Occi	upation		
City	City State ZIP Code			ranteed standing:	7	
3. Full Name (Last, First, Middle In	itial)		Nam	e of Employer		
Mailing Address			Occi	upation		
City	State	ZIP Code		unt ranteed standing:	7	
4. Full Name (Last, First, Middle In	itial)	!	Nam	e of Employer		
Mailing Address			Occi	upation		
City	State	ZIP Code		unt ranteed standing:	9 9	
SUBTOTALS This Period This Page (	SUBTOTALS This Period This Page (optional)					
TOTALS This Period (last page in this	line only	·)		······	, , , , , , , , , , , , , , , , , , , ,	
Carry outstanding balance only to LI	NE 3, Sch	edule D, for this	line. If no Sc	hedule D, carry for	ward to appropriate line of Summary.	

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AME OF COMMITTEE (In Full) Gerson for Congress				Transac	tion ID : SC/10.5172	
LOAN SOURCE Full Name (Last, First, Middle Initial)  Gerson, David, Adam, ,				☐ Memo Item	Do Item Election: 2014  X Primary  General	
Mailing Address PO Box 1465					Other (specify) ▼	
City		State MN	ZIP Code		✗ Personal Funds of the Candidate	
Burnsville Original Amount of Loan		Cumulative Pay	55337 ment To Date	Bala	nce Outstanding at Close of This Period	
5000	.00	ournalative ray	J.	0.00	5000.00	
TERMS Date Incurred		D	ate Due	Interest Rate (If none, enter		
M08 <sup>M</sup> / D19 <sup>D</sup> / Y Ž01Š	Υ	M M / D D	/ Y 1ÿ1/2Ŏ	0.0	00 % (apr) Yes X No	
List All Endorsers or Guarantors	(if any) to	o Loan Source				
1. Full Name (Last, First, Middle I	nitial)		Name of	f Employer		
Mailing Address			Occupat	tion		
City	State	ZIP Code	Amount Guarant Outstand	eed	g g	
2. Full Name (Last, First, Middle In	2. Full Name (Last, First, Middle Initial)			f Employer		
Mailing Address			Occupat	tion		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
3. Full Name (Last, First, Middle In	itial)		Name o	f Employer		
Mailing Address			Occupat	tion		
City	State	ZIP Code	Amount Guarant Outstan	eed	, , , , , , ,	
4. Full Name (Last, First, Middle In	itial)	!	Name o	f Employer		
Mailing Address			Occupat	tion		
City	State	ZIP Code	Amount Guarant Outstand	eed	7	
SUBTOTALS This Period This Page (o	SUBTOTALS This Period This Page (optional)					
FOTALS This Period (last page in this	line only	·)		···········		
Carry outstanding balance only to LII	NE 3, Sch	edule D, for this	line. If no Sched	lule D, carry forw	vard to appropriate line of Summary.	

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OF

						130			
	ME OF COMMITTEE (In Full) Serson for Congress				Tran	saction ID : SC/10.5173			
Ľ									
	LOAN SOURCE Full Name (Last, Gerson, David, Adam, ,	First, Mic	ldle Initial)		☐ Memo It	em Election: 2014  x Primary			
						General			
	Mailing Address PO Box 1465					Other (specify)			
	City		State	ZIP Co		Personal Funds of the Candidate			
	Burnsville		MN	55337		1 ersonal i unus oi the Candidate			
	Original Amount of Loan		Cumulative Pay	yment To	Date	Balance Outstanding at Close of This Period			
	5000	0.00	7		0.00	5000.00			
	TERMS Date Incurred		D	Date Due	Interest I (If none, e				
	M09M / D12D / Y Z013	Y	M M / D D	/ Y	1)1/20 Y	0.00 % (apr) Yes X No			
	List All Endorsers or Guarantors	(if any) to	o Loan Source						
	1. Full Name (Last, First, Middle I				Name of Employer				
	Mailing Address				Occupation				
					Amount				
	City State ZIP Code				Guaranteed Outstanding:	9 9			
	2. Full Name (Last, First, Middle In	itial)			Name of Employer				
	Mailing Address				Occupation				
					Amount				
	City	State	ZIP Code		Guaranteed Outstanding:				
	3. Full Name (Last, First, Middle In	itial)			Name of Employer				
	Mailing Address				Occupation				
					Amount				
	City	State	ZIP Code		Guaranteed Outstanding:				
	4. Full Name (Last, First, Middle In	itial)			Name of Employer				
	Mailing Address				Occupation				
					Amount				
	City	State	ZIP Code		Guaranteed Outstanding:	9 9			
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_	Carry outstanding balance only to LII	NE 3, Sch	edule D, for this	s line. If	no Schedule D, carry	forward to appropriate line of Summary.			
			•						

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

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OF

NAME OF COMMITTEE (In Gerson for Congres			Trans	action ID : SC/10.5174				
Gerson, David, A	•	ddle Initial)	☐ Memo Iter	Election: 2014  X Primary General				
Mailing Address PO Box 1465				Other (specify)				
City		State	ZIP Code	▼ Personal Funds of the Candidate				
Burnsville		MN	55337	1 Craoriai i unua oi tric Garialdate				
Original Amount of Loa	an	Cumulative Page	yment To Date Ba	alance Outstanding at Close of This Period				
	3000.00		0.00	3000.00				
TERMS Date Inc	urred	С	Pate Due Interest Ra (If none, en					
M09M / D30D /	<sup>Y</sup> ž01š <sup>Y</sup>	M M / D D		0.00 % (apr) Yes X No				
List All Endorsers or C	, ,,	o Loan Source						
1. Full Name (Last, Fire	st, Middle Initial)		Name of Employer					
Mailing Address			Occupation					
City	State	ZIP Code	Amount Guaranteed Outstanding:	Guaranteed				
2. Full Name (Last, Firs	t, Middle Initial)		Name of Employer					
Mailing Address			Occupation					
0:1	0	710 0 1	Amount Guaranteed	Amount Guaranteed				
City	State	ZIP Code	Outstanding:	<u> </u>				
3. Full Name (Last, Firs	t, Middle Initial)		Name of Employer					
Mailing Address			Occupation					
City	State	ZIP Code	Amount Guaranteed					
•		Zir Code	Outstanding:	7				
4. Full Name (Last, Firs	t, Middle Initial)		Name of Employer					
Mailing Address			Occupation	Occupation				
City	State	ZIP Code	Amount Guaranteed					
City	State	ZIP Code	Outstanding:	9 9				
SUBTOTALS This Period	This Page (optional)			3000.00				
TOTALS This Period (last	page in this line only	v)	· · · · · · · · · · · · · · · · · · ·	9 9 555				
Carry outstanding halance	a only to LINE 2 Sob	nedule D. for this	s line If no Schedule D. correcte	rward to appropriate line of Summary.				
Carry outstanding palance	e only to LINE 3. Sch	iedule D, for this	s ime. ii no Schedule D, carry fo	rward to appropriate line of Summary.				

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5202
LOAN SOURCE Full Name (Last, First, N	liddle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	nadic iiiliaij	Memo Item    Clection: 2014
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code  F5007  Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
5000.00	,	0.00 5000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured:
M10M / D04D / Y Ž013 Y	M M / D D	/ Y 1ÿ1/2ŏ Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any)	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
2. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
	1	Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)	•	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	· '	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional	<b>\</b>	
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TOTALS This Period (last page in this line or	nly)	······································
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

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OF

		100			
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5203			
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Memo Item Election: 2014			
Gerson, David, Adam, ,	viidaio iriitai)	Memo Item    Clection: 2014			
Mailing Address PO Box 1465		Other (specify)			
City	State	ZIP Code  F5007  Personal Funds of the Candidate			
Burnsville	MN	55337			
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period			
5000.00		0.00 5000.00			
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)			
M10 <sup>M</sup> / D16 <sup>D</sup> / Y Ž01Š	M M / D D	/ Y 1ÿ1/2ŏ Y 0.00 % (apr) Yes X No			
List All Endorsers or Guarantors (if any	) to Loan Source				
1. Full Name (Last, First, Middle Initial)	,	Name of Employer			
Mailing Address		Occupation			
		Amount			
City	ZIP Code	Guaranteed Outstanding:			
2. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
		Amount Guaranteed			
City	ZIP Code	Outstanding:			
3. Full Name (Last, First, Middle Initial)	·	Name of Employer			
Mailing Address		Occupation			
		Amount			
City	ZIP Code	Guaranteed Outstanding:			
4. Full Name (Last, First, Middle Initial)	<u>'</u>	Name of Employer			
Mailing Address		Occupation			
		Amount			
City	ZIP Code	Guaranteed Outstanding:			
CURTOTALS This Deviced This Dega (entire)	SI)				
SUBTOTALS This Period This Page (options	11)	5000.00			
TOTALS This Period (last page in this line of	only)	······································			
Carry outstanding balance only to LINE 3,	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.			

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

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OF

IAME OF COMMITTEE (In F Gerson for Congress			Trans	action ID : SC/10.5204				
LOAN SOURCE Full Na Gerson, David, Ada	•	ddle Initial)	☐ Memo Itel	Election: 2014  X Primary General				
Mailing Address PO Box 1465				Other (specify)				
City		State	ZIP Code	X Personal Funds of the Candidate				
Burnsville		MN	55337	Fersonal Funds of the Candidate				
Original Amount of Loan		Cumulative Pa	yment To Date Ba	alance Outstanding at Close of This Period				
	5000.00	2	0.00	5000.00				
TERMS Date Incur	rred	С	ate Due Interest Ra					
M10M / D23D /	<sup>Y</sup> Ž013 <sup>Y</sup>	M M / D D		0.00 % (apr) Yes No				
List All Endorsers or Gu	` *,	o 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					
City	State	ZIP Code	Outstanding:	<u> </u>				
3. Full Name (Last, First,	Middle Initial)		Name of Employer					
Mailing Address			Occupation					
City	State	ZIP Code	Amount Guaranteed					
		Zii Gode	Outstanding:	9				
4. Full Name (Last, First,	Middle Initial)		Name of Employer					
Mailing Address			Occupation	Occupation				
City	State	ZIP Code	Amount Guaranteed					
Oity	State	Zii Oode	Outstanding:	9 9				
SUBTOTALS This Period Th	nis Page (optional)			5000.00				
FOTALS This Period (last pa	age in this line only	γ) ·······						
Carry outstanding balance	only to LINE 3 Sch	nedule D for this	line If no Schedule D. carry fo	prward to appropriate line of Summary.				

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

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OF

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Transaction ID: SC/10.5205 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville 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: (If none, enter 0) 0.00 M 1 1 M D04D ž013 1/1/20 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code 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.

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

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5206
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	nadic iritialy	Memo Item    Clection: 2014
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code  F5007  Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
4000.00	,	0.00 4000.00
TERMS Date Incurred	]	Date Due Interest Rate Secured: (If none, enter 0)
M11M / D13D / Y 2013 Y	M M / D D	/ Y 1//1/20 Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any)	to Loan Source	
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	<b>'</b>	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optiona	)	4000 00
COLUMN TO THE TOTAL THE TAGE (OPTIONA	,	4000.00
TOTALS This Period (last page in this line of	ly)	······································
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

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OF

									130
AME OF COMMITTEE (In Full) Gerson for Congress					Trans	action II	D : SC/10.520	)7	
Gerson, David, Adam, ,							tion: 2014 Primary General	E.)	
Mailing Address PO Box 1465							Other (specif	y) <b>▼</b>	
City Burnsville		State MN	ZIP Cod 55337	de		×	Personal Fu	unds of th	e Candidate
Original Amount of Loan	Date	В:	alance C	Outstanding a	t Close o	f This Period			
3000.0	,	0.00			7	-	000.00		
TERMS Date Incurred		D	ate Due		Interest Ra (If none, en			Secui	red:
M11M / D19D / Y Ž013	Y	M M / D D	/ Y	1)1/20 Y		0.00	% (apr)	Y	res 🗶 No
List All Endorsers or Guarantors (if	anv) to	Loan Source							
1. Full Name (Last, First, Middle Init	• •			Name of Em	ployer				
Mailing Address				Occupation					
				Amount					
City	State	ZIP Code		Guaranteed Outstanding:					
2. Full Name (Last, First, Middle Initia	al)	1		Name of Employer					
Mailing Address				Occupation					
				Amount					
City	State	ZIP Code		Guaranteed Outstanding:		7	7		
3. Full Name (Last, First, Middle Initial	al)			Name of Employer					
Mailing Address				Occupation					
				Amount					
City	State	ZIP Code		Guaranteed Outstanding:		7	7		
4. Full Name (Last, First, Middle Initial	al)			Name of Employer					
Mailing Address		Occupation							
		Amount					_		
City	State	ZIP Code		Guaranteed Outstanding:		7	- 9		
SUBTOTALS This Period This Page (op	tional)				. г				
TOTALS This Period (last page in this li						++	7	30	000.00
					•		7	7	
Carry outstanding balance only to LINE	3, Sch	edule D, for this	line. If	no Schedule I	D, carry fo	rward t	o appropriat	e line of	Summary.

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

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OF

LOAN SOURCE Full Nam Gerson, David, Adai	•	ddle Initial)	☐ Mer	no Item Election: 2014  x Primary  Conorel			
Mailing Address PO Box 1465				General Other (specify) ▼			
City Burnsville		State	ZIP Code	Personal Funds of the Candidate			
Original Amount of Loan		Cumulative Pa	yment To Date	Balance Outstanding at Close of This Period			
, , , , ,	4000.00	,	0.00	4000.00			
TERMS Date Incurre	d ž013 <sup>Y</sup>	M M / D		rest Rate Secured: one, enter 0)			
			171720	% (apr) Yes No			
List All Endorsers or Gua  1. Full Name (Last, First, I	, ,,	to Loan Source	Name of Employe	er			
Mailing Address			Occupation				
Mailing Address				·			
City	State	ZIP Code	Amount Guaranteed Outstanding:	9 9			
2. Full Name (Last, First, M	liddle Initial)		Name of Employe	er			
Mailing Address			Occupation	Occupation			
			Amount Guaranteed				
City	State	ZIP Code	Outstanding:				
3. Full Name (Last, First, M	fiddle Initial)		Name of Employe	er			
Mailing Address			Occupation				
City	State	ZIP Code	Amount Guaranteed				
4. Full Name (Last, First, M	liddle Initial)			Outstanding:  Name of Employer			
Mailing Address			Occupation				
			Amount				
City State ZIP Code			Guaranteed Outstanding:	9 9			
IBTOTALS This Period This	Page (optional)			4000.00			
			<u> </u>	9 9 9			

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

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OF

										130
AME OF COMMITTEE (In Full)  Gerson for Congress					Trans	saction	ID : SC/10.5	5209		
LOAN SOURCE Full Name (Last, First Gerson, David, Adam, ,  Mailing Address PO Box 1465	Mailing Address					Ele X	ction: 201 Primary General Other (spe			
City		ate	ZIP Cod	de		×	Personal	Funds o	f the Ca	ndidate
Burnsville	I N	MN	55337							
Original Amount of Loan	C	Cumulative Pay	ment To	Date	B	Balance	Outstanding	at Close	e of This	Period
4000.00		7		0.00	<u>.                                    </u>			7	4000.0	0
TERMS Date Incurred		Da	ate Due		Interest R			Se	ecured:	
M12M / D09D / Y Ž01Š Y	М	M / D D	/ Y	1)1/20 Y		0.00	% (apr	) [	Yes	x No
List All Endorsers or Guarantors (if a	any) to L	oan Source								
1. Full Name (Last, First, Middle Initia	l)			Name of Em	ployer					
Mailing Address				Occupation						
				Amount	-					1
City	ate 2	ZIP Code		Guaranteed Outstanding:					w	
2. Full Name (Last, First, Middle Initial)	)			Name of Employer						
Mailing Address				Occupation						
				Amount Guaranteed Outstanding:				1		
City	ate 2	ZIP Code						<u> </u>		
3. Full Name (Last, First, Middle Initial)	)			Name of Employer						
Mailing Address				Occupation						
				Amount						1
City	ate 2	ZIP Code		Guaranteed Outstanding:		7	7			
4. Full Name (Last, First, Middle Initial)	)			Name of Employer						
Mailing Address		Occupation								
		Amount						1		
City	ate 2	ZIP Code		Guaranteed Outstanding:		7	7		<b>x</b>	
CURTOTALS This Period This Page (entire	anal)									$\overline{}$
SUBTOTALS This Period This Page (option	Ji iai)······				····•		7	7	4000.0	υ
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Carry outstanding balance only to LINE	3, Schedu	ule D, for this	line. If I	no Schedule	D, carry f	orward	to appropr	iate line	of Sum	mary.

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

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OF

							130	
AME OF COMMITTEE (In Full) Gerson for Congress					Transa	ction ID : SC/10.5210		
LOAN SOURCE Full Name (Last,	First, Mi	ddle Initial)			Memo Item	Election: 2014		
Gerson, David, Adam, ,					I WEITE RET	<b>x</b> Primary		
						General		
Mailing Address PO Box 1465						Other (specify)		
City		State	ZIP Cod	de				
Burnsville		MN	55337			Personal Funds of the Ca	ndidate	
Original Amount of Loan	Original Amount of Loan Cumulative Payment To					lance Outstanding at Close of This	s Period	
3000	.00	2		0.00	)	3000.0	0	
TERMS Date Incurred		D	Date Due		Interest Rat			
<sup>M</sup> 12 <sup>M</sup> / <sup>D</sup> 16 <sup>D</sup> / Y Ž013	Υ	M M / D D	/ Y	1)1/20 Y	,	0.00	<b>x</b> No	
List All Endorsers or Guarantors	(if anv) t	o Loan Source						
1. Full Name (Last, First, Middle In	,			Name of Em	nployer			
Mailing Address				Occupation				
				Amount			1	
City	State	ZIP Code		Guaranteed Outstanding:				
2. Full Name (Last, First, Middle Ini	tial)	1		Name of Em	ployer			
Mailing Address				Occupation				
				Amount Guaranteed Outstanding:				
City	State	ZIP Code						
3. Full Name (Last, First, Middle Ini	tial)			Name of Employer				
Mailing Address				Occupation				
				Amount			1	
City	State	ZIP Code		Guaranteed Outstanding:		7		
4. Full Name (Last, First, Middle Ini	tial)			Name of Employer				
Mailing Address				Occupation				
			ŀ	Amount			1	
City State ZIP Code				Guaranteed Outstanding:		7 7		
SUBTOTALS This Period This Page (c	ntional\						$\overline{}$	
This remod this rage (C	γριισι ιαι) ·					3000.0	U	
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Carry outstanding balance only to LIN	NE 3, Scl	nedule D, for this	s line. If r	no Schedule	D, carry for	ward to appropriate line of Sum	mary.	

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

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OF

							130	
AME OF COMMITTEE (In Full)  Gerson for Congress					Transac	ction ID : SC/10.5542		
LOAN SOURCE Full Name (Last,	First, Mi	ddle Initial)			Momo Itom	Election: 2014		
Gerson, David, Adam,	- ,	,			Memo Item	rimary		
Gerson, Bavid, Adam, ,						General		
Mailing Address PO Box 1465						Other (specify)		
City		State	ZIP Cod	le		Personal Funds of the Ca	andidate	
Burnsville		MN	55337			Total and an and an and a		
Original Amount of Loan	Original Amount of Loan Cumulative Payment To					ance Outstanding at Close of Thi	s Period	
3000	0.00	9		0.00		3000.0	)0	
TERMS Date Incurred		С	Date Due		Interest Rate			
M01 <sup>M</sup> / D08 <sup>D</sup> / Y Ž014	Y	M M / D D	) / Y	1)1/20 Y		00	<b>x</b> No	
List All Endorsers or Guarantors	(if any) t	to Loan Source				- (4)		
Full Name (Last, First, Middle I	,	to Loan Source		Name of Em	ployer			
Mailing Address				Occupation				
			-	Amount				
City	State	ZIP Code		Guaranteed				
J,	J. Land			Outstanding:		, , , , , , , , , , , , , , , , , , , ,		
2. Full Name (Last, First, Middle In	itial)			Name of Employer				
Mailing Address				Occupation				
				Amount Guaranteed Outstanding:				
City	State	ZIP Code						
3. Full Name (Last, First, Middle In	itial)			Name of Employer				
Mailing Address				Occupation				
				Amount			1	
City	State	ZIP Code		Guaranteed Outstanding:		y y x	1	
4. Full Name (Last, First, Middle In	itial)	•		Name of Employer				
Mailing Address				Occupation				
			-	Amount			1	
City State ZIP Code				Guaranteed Outstanding:		7	J	
SUBTOTALS This Period This Page (	optional).				▶	3000.0	0	
FOTALS This Period (last page in this	s line onl	y)			▶			
Carry outstanding balance only to LI	NF 3 Sc	hedule D for this	s line If r	no Schedule	D. carry for	vard to appropriate line of Sum		
July outstanding Dalance Unity to Li	0, 00	neadle D, for this	5 mig. ii l	.o ooneddie	⇒, carry rorv	tara to appropriate inte of Juli	ıaı y.	

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		13b				
AME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5543				
LOAN SOURCE Full Name (Last, First Gerson, David, Adam, ,  Mailing Address PO Box 1465	t, Middle Initial)	☐ Memo Item    Election: 2014				
City Burnsville	State MN	ZIP Code 55337  Personal Funds of the Candidate				
Original Amount of Loan 5000.00	Cumulative Pa	Payment To Date Balance Outstanding at Close of This Period 0.00 5000.00				
TERMS Date Incurred	. — —	Date Due Interest Rate (If none, enter 0)  D / Y 1/1/20 Y 0.00 % (apr) Yes X No				
List All Endorsers or Guarantors (if a						
1. Full Name (Last, First, Middle Initia	1)	Name of Employer				
Mailing Address		Occupation				
City	ate ZIP Code	Amount Guaranteed Outstanding:				
2. Full Name (Last, First, Middle Initial)	•	Name of Employer				
Mailing Address		Occupation				
City	zite ZIP Code	Amount Guaranteed Outstanding:				
3. Full Name (Last, First, Middle Initial)		Name of Employer				
Mailing Address		Occupation				
City	ate ZIP Code	Amount Guaranteed Outstanding:				
4. Full Name (Last, First, Middle Initial)	•	Name of Employer				
Mailing Address		Occupation				
City	ate ZIP Code	Amount Guaranteed Outstanding:				
	DIBTOTALS This Period This Page (optional)					
Carry outstanding balance only to LINE :	3, Schedule D, for th	nis line. If no Schedule D, carry forward to appropriate line of Summary.				

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

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OF

		100		
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5544		
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2014		
Gerson, David, Adam, ,	Memo Item    Clection: 2014			
Mailing Address PO Box 1465	Other (specify)			
City	State	ZIP Code  F5007  Personal Funds of the Candidate		
Burnsville	MN	55337		
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period		
10000.00	l,	0.00 10000.00		
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)		
<sup>M</sup> 02 <sup>M</sup> / <sup>D</sup> 26 <sup>D</sup> / Y Ž014 Y	M M / D D	/ Y 1/√1/20 Y 0.00		
List All Endorsers or Guarantors (if any)	to Loan Source			
1. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount		
City	ZIP Code	Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)	1	Name of Employer		
Mailing Address		Occupation		
0.44	710.0-4-	Amount Guaranteed		
City State	ZIP Code	Outstanding:		
3. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
Tau .		Amount Guaranteed		
City	ZIP Code	Outstanding:		
4. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
	1	Amount		
City	ZIP Code	Guaranteed Outstanding:		
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Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.		

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NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5587		
LOAN SOURCE Full Name (Last, First, Mid	idle Initial)	☐ Memo Item   Election: 2014		
Gerson, David, Adam, ,		x   Primary   General		
Mailing Address PO Box 1465		Other (specify) ▼		
City	State	ZIP Code  ** Personal Funds of the Candidate		
Burnsville	MN	55337 Personal Funds of the Candidate		
Original Amount of Loan	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period		
391.00	9	0.00 391.00		
TERMS Date Incurred	D	ate Due Interest Rate Secured: (If none, enter 0)		
M10 <sup>M</sup> / D28 <sup>D</sup> / Y Ž014 Y	M M / D D	/ Y YNAY Y 0.00 % (apr) Yes X No		
List All Endorsers or Guarantors (if any) to	o Loan Source			
Full Name (Last, First, Middle Initial)	224.7 204.70	Name of Employer		
Mailing Address		Occupation		
		Amount		
City	ZIP Code	Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount		
City	ZIP Code	Guaranteed Outstanding:		
3. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount		
City	ZIP Code	Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount		
City	ZIP Code	Guaranteed Outstanding:		
SUBTOTALS This Period This Page (optional)		391.00		
TOTALS This Period (last page in this line only)▶				
Carry outstanding balance only to LINE 3, Sch	edule D, for this	line. If no Schedule D, carry forward to appropriate line of Summary.		

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Transaction ID: SC/10.5608 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2016 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify)  $\blacktriangledown$ City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 3500.00 0.00 3500.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D04D M 03M Ž015 YNA Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 3500.00 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.

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		100			
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5867			
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2016			
Gerson, David, Adam, ,					
Mailing Address PO Box 1465	General Other (specify) ▼				
City	State	ZIP Code  Second Personal Funds of the Candidate			
Burnsville	MN	55337			
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period			
5000.00		0.00 5000.00			
TERMS Date Incurred	]	Date Due Interest Rate Secured: (If none, enter 0)			
M08M / D12D / Y Ž01Š Y	M M / D D	/ Y YNA Y O.00 % (apr) Yes X No			
List All Endorsers or Guarantors (if any)	to Loan Source				
1. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
		Amount			
City	ZIP Code	Guaranteed Outstanding:			
2. Full Name (Last, First, Middle Initial)	1	Name of Employer			
Mailing Address		Occupation			
		Amount			
City	ZIP Code	Guaranteed Outstanding:			
3. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
		Amount			
City	ZIP Code	Guaranteed Outstanding:			
4. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
		Amount			
City	ZIP Code	Guaranteed Outstanding:			
CURTOTAL C This Deviced This Dane (subtiness	n				
SUBTOTALS This Period This Page (optional)					
TOTALS This Period (last page in this line o	nly)	······································			
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.			

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

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OF

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	ME OF COMMITTEE (In Full) erson for Congress				Trans	saction ID : SC/10.5980	
Ľ							
	LOAN SOURCE Full Name (Last, First, Middle Initial) Gerson, David, Adam, ,				☐ Memo Ite	Election: 2016  Primary	
						General	
	Mailing Address PO Box 1465					Other (specify)	
	City State ZIP Co			de	✗ Personal Funds of the Candidate		
	Burnsville MN 55337					Personal Funds of the Candidate	
	Original Amount of Loan		Cumulative Pay	yment To	Date B	dalance Outstanding at Close of This Period	
	10000	0.00			0.00	10000.00	
	TERMS Date Incurred		D	Date Due	Interest R (If none, er		
	M09M / D08D / Y Z015	Y	M M / D D	/ Y	YNA Y	0.00 % (apr) Yes X No	
	List All Endorsers or Guarantors	(if any) to	o Loan Source				
	1. Full Name (Last, First, Middle I				Name of Employer		
	Mailing Address				Occupation		
					Amount		
	City	State	ZIP Code		Guaranteed Outstanding:	, , , , , , , , ,	
	2. Full Name (Last, First, Middle Initial)				Name of Employer		
Mailing Address				Occupation			
					Amount		
	City	State	ZIP Code		Guaranteed Outstanding:	7	
	3. Full Name (Last, First, Middle Initial)				Name of Employer		
	Mailing Address				Occupation		
					Amount		
	City	State	ZIP Code		Guaranteed Outstanding:	. , ,	
	4. Full Name (Last, First, Middle Initial)			Name of Employer			
Mailing Address			Occupation				
			Amount				
	City	State	ZIP Code		Guaranteed Outstanding:	7	
SI	SUBTOTALS This Period This Page (optional)						
TO	TOTALS This Period (last page in this line only)						
	arry outstanding halance only to LII	NF 3 Sch	edule D for this	s line If	no Schedule D. carry fe	orward to appropriate line of Summary.	
ıv	any satisfaming palatice only to El	0, 001	2, 101 1118	5 mis. ii	Joneans D, carry in	or traine to appropriate line or ouriniary.	

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

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13b Transaction ID: SC/10.6013 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2016 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 33932.59 0.00 33932.59 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D30 D M09M Ž015 YNA Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 33932.59 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.

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

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OF

		100		
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.6284		
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2016		
Gerson, David, Adam, ,	Memo Item    Clection: 2016			
Mailing Address PO Box 1465	Other (specify)			
City	State	ZIP Code  F5007  Personal Funds of the Candidate		
Burnsville	MN	55337		
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period		
50000.00	J,	0.00 50000.00		
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)		
M12M / D23D / Y Ž01Š Y	M M / D D	/ Y YNAY Y 0.00 % (apr) Yes X No		
List All Endorsers or Guarantors (if any	) to Loan Source			
1. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount		
City	ZIP Code	Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount Guaranteed		
City	ZIP Code	Outstanding:		
3. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
	I	Amount		
City	ZIP Code	Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Initial)	'	Name of Employer		
Mailing Address		Occupation		
		Amount		
City State	ZIP Code	Guaranteed Outstanding:		
SURTOTALS This Povind This Page (antions	.h			
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Use separate schedule(s) for each category of the Detailed Summary Page

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OF

IAME OF COMMITTEE (In Gerson for Congres			Trans	action ID : SC/10.6765	
Gerson, David, A	Election: 2016  X Primary  General				
Mailing Address PO Box 1465	Other (specify)				
City		State	ZIP Code	Personal Funds of the Candidate	
Burnsville		MN	55337		
Original Amount of Lo	an 25000.00	Cumulative Pa	yment To Date Ba	alance Outstanding at Close of This Period 25000.00	
TERMS Date Inc	a uma d	9	Octo Duo Interest De	7 7	
TERMS Date Inc		M M / D D	Oate Due Interest Ra (If none, en		
M03M / D30D /	<sup>Y</sup> 2016 <sup>Y</sup>	M M / D D	/ Y YNAY Y	% (apr) Yes No	
List All Endorsers or	Guarantors (if any) to	o Loan Source			
1. Full Name (Last, Fi	rst, Middle Initial)		Name of Employer		
Mailing Address			Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:		
2. Full Name (Last, Fire	2. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation		
			Amount		
City	State	ZIP Code	Guaranteed Outstanding:	7	
3. Full Name (Last, Fire	st, Middle Initial)	'	Name of Employer		
Mailing Address			Occupation	Occupation	
			Amount Guaranteed		
City	State	ZIP Code	Outstanding:	9 9	
4. Full Name (Last, Fire	4. Full Name (Last, First, Middle Initial)			Name of Employer  Occupation	
Mailing Address			Occupation		
			Amount		
City	State	ZIP Code	Guaranteed Outstanding:	9 9	
		•			
SUBTOTALS This Period	This Page (optional)		·····	25000.00	
OTALS This Period (last	page in this line only	')	·····	275000.00	
Carry outstanding balanc	e only to LINE 3. Sch	edule D. for this	s line. If no Schedule D. carry fo	rward to appropriate line of Summary.	