

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

McCollum for Congress

ADDRESS (number and street)

P.O. Box 14131

Check if different  
than previously  
reported. (ACC)

St. Paul

MN

55114

2. FEC IDENTIFICATION NUMBER ▼

C

C00354688

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

MN

04

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the  
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the  
State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

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

Type or Print Name of Treasurer Mary Pat Lee

Signature of Treasurer

Mary Pat Lee

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

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

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 63

Write or Type Committee Name

McCollum for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	1	3

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	3

	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))....	93142.00	354652.62
(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)) .....	93142.00	354652.62
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	58143.26	295754.03
(b) Total Offsets to Operating Expenditures (from Line 14).....	13.00	593.35
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	58130.26	295160.68
8. Cash on Hand at Close of Reporting Period (from Line 27).....	124088.88	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	962.48	

## 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

PAGE 3 / 63

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**McCollum for Congress**

Report Covering the Period:

From:

M M / D D / Y Y Y Y  
10 / 01 / 2013

To:

M M / D D / Y Y Y Y  
12 / 31 / 2013

**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).....

47125.00

120614.62

(ii) Unitemized.....

10267.00

34538.00

(iii) TOTAL of contributions from individuals ▶

57392.00

155152.62

(b) Political Party Committees.....

0.00

0.00

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

35750.00

199500.00

(d) The Candidate.....

0.00

0.00

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

93142.00

354652.62

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0.00

0.00

**13. LOANS:**

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

0.00

0.00

(b) All Other Loans.....

0.00

0.00

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

0.00

0.00

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

13.00

593.35

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

0.43

5.09

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

93155.43

355251.06

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	58143.26	295754.03
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	16255.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	58143.26	312009.03

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	89076.71
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	93155.43
25. SUBTOTAL (add Line 23 and Line 24).....	182232.14
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	58143.26
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	124088.88

**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 63

(check only one)

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**Full Name (Last, First, Middle Initial)  
**A. Rosalind S. Abernathy**Mailing Address 2701 Pickett Road  
Apt. 2044

City	State	Zip Code
Durham	NC	27705

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University of ArkansasOccupation  
Medical Doctor

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2013

Transaction ID : C8945331

Amount of Each Receipt this Period

250.00

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

Mailing Address 119 Chestnut St W

City	State	Zip Code
Stillwater	MN	55082-4958

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employedOccupation  
Attorney

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2013

Transaction ID : C8948337

Amount of Each Receipt this Period

500.00

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

Mailing Address 1463 Portland Ave

City	State	Zip Code
Saint Paul	MN	55104-6815

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employedOccupation  
Environmental Consultant

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2013

Transaction ID : C8939334

Amount of Each Receipt this Period

250.00

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

1000.00

# **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)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Barona Band of Mission Indians</b>			Date of Receipt M M / D D / Y Y Y Y 12 / 19 / 2013	
Mailing Address 1095 Barona Road			<b>Transaction ID : C9099835</b>	
City	State	Zip Code		
Lakeside	CA	92040		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 1500.00	
Name of Employer		Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1500.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Kjell Bergh</b>			Date of Receipt M M / D D / Y Y Y Y 10 / 30 / 2013	
Mailing Address 4950 Neal Ave N			<b>Transaction ID : C8949016</b>	
City	State	Zip Code		
Stillwater	MN	55082-1071		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 1000.00	
Name of Employer		Occupation		
Borton Volvo		President		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2500.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Timothy J. Bromelkamp</b>			Date of Receipt M M / D D / Y Y Y Y 10 / 29 / 2013	
Mailing Address 5037 Bloomington Ave			<b>Transaction ID : C8948325</b>	
City	State	Zip Code		
Minneapolis	MN	55417-1157		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 250.00	
Name of Employer		Occupation		
Bromelkamp Government Relations, LLC		President		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....			2750.00	
<b>TOTAL</b> This Period (last page this line number only).....				

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**A. Full Name (Last, First, Middle Initial)  
**Chickasaw Nation**

Mailing Address P.O. Box 1548

City	State	Zip Code
Ada	OK	74820

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		21		2013

Transaction ID : C8966069

Amount of Each Receipt this Period

1500.00

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

Mailing Address 1179 Ivy Hill Drive

City	State	Zip Code
Mendota Heights	MN	55118

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

University of Minnesota

Lawyer, Teacher

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2013

Transaction ID : C8934065

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)  
**Arnold L. Cohen**Mailing Address 500 Bayview Dr  
Apt 1120

City	State	Zip Code
Sunny Isles Beach	FL	33160-4749

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2013

Transaction ID : C8945404

Amount of Each Receipt this Period

250.00

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

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

2000.00

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

Use separate schedule(s)  
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FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Mykelene R. Cook</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 29 / 2013	
Mailing Address 225 Chestnut Street W		<b>Transaction ID : C8948348</b>	
City Stillwater	State MN	Zip Code 55082	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer City of Stillwater	Occupation City Council Member		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Page Knudsen Cowles</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 29 / 2013	
Mailing Address 475 Grand HI		<b>Transaction ID : C8948296</b>	
City Saint Paul	State MN	Zip Code 55102-2612	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Unity Avenue Associates	Occupation Executive		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>John S. Dahler</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 19 / 2013	
Mailing Address 1602 Mississippi River Blvd S		<b>Transaction ID : C8963463</b>	
City Saint Paul	State MN	Zip Code 55116-1825	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		600.00	
<b>TOTAL</b> This Period (last page this line number only).....			



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

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

FOR LINE NUMBER: PAGE 9 OF 63  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

Full Name (Last, First, Middle Initial) <b>Thomas DeGree</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 29 / 2013
Mailing Address 3337 Lake Elmo Ave N		Transaction ID : C8949897
City Lake Elmo	State MN	
Zip Code 55042-4437		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		
Name of Employer Wilde Roast Cafe	Occupation Owner	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>Kelly Doran</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 29 / 2013
Mailing Address 7803 Glenroy Road, Suite 200		Transaction ID : C8948298
City Bloomington	State MN	
Zip Code 55439		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		
Name of Employer Doran Companies	Occupation Chief Manager	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>Karen Drog</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 3701 54th Drive West M201		Transaction ID : C9128490
City Bradenton	State FL	
Zip Code 34210		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		
Name of Employer Self-employed	Occupation Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	

# **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)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Eastern Band of Cherokee Indians**

Mailing Address P.O. Box 455

City State Zip Code  
 Cherokee NC 28719

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 11 19 2013

Transaction ID : C8963416

Amount of Each Receipt this Period

2000.00

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

Mailing Address 1314 Marquette Ave  
 #3303

City State Zip Code  
 Minneapolis MN 55403

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Tysvar

Partner

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 10 29 2013

Transaction ID : C8948286

Amount of Each Receipt this Period

500.00

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

Mailing Address 2457 Dianna Lane

City State Zip Code  
 Little Canada MN 55117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

University of Minnesota

Physician

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 10 07 2013

Transaction ID : C8933066

Amount of Each Receipt this Period

500.00

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

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

3000.00

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

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

FOR LINE NUMBER:

PAGE 11 OF 63

(check only one)

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**Martha Gabbert**

Mailing Address 312 Ferndale Rd W

City

Wayzata

State

MN

Zip Code

55391-1511

FEC ID number of contributing  
federal political committee.

C

Name of Employer

R &amp; B Properties

Occupation

Executive

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2013

Transaction ID : C8955088

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**William Gray**

Mailing Address 488 Holly Ave

City

Saint Paul

State

MN

Zip Code

55102-2206

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Self-employed

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2013

Transaction ID : C8934070

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**William Haug**

Mailing Address 2021 W. 49th St.

City

Minneapolis

State

MN

Zip Code

55419-5227

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Moss and Barnett

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		23		2013

Transaction ID : C9110337

Amount of Each Receipt this Period

2500.00

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

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

3100.00

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**Mary M. Hauser**

Mailing Address 616 Hall Ave

City

White Bear Lake

State

MN

Zip Code

55110-1812

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
10 / 23 / 2013

Transaction ID : C8945378

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Blanche Hawkins**

Mailing Address 126 Dellwood Ave

City

Dellwood

State

MN

Zip Code

55110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M / D D / Y Y Y Y  
10 / 23 / 2013

Transaction ID : C8945377

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Janice Sarah Hope**

Mailing Address 510 Groveland Ave, #504

City

Minneapolis

State

MN

Zip Code

55403

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

225.00

Date of Receipt

M M / D D / Y Y Y Y  
10 / 07 / 2013

Transaction ID : C8933067

Amount of Each Receipt this Period

100.00

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

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

600.00

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

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

FOR LINE NUMBER:

PAGE 13 OF 63

(check only one)

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**Arthur W. Kaemmer**

Mailing Address 4 Crocus HI

City

Saint Paul

State

MN

Zip Code

55102-2809

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2013

Transaction ID : C8934171

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Jane Kaufman**

Mailing Address 3405 Deeptaven Ave

City

Wayzata

State

MN

Zip Code

55391-3012

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2013

Transaction ID : C9137249

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Ted Kozlowski**

Mailing Address 1207 3rd Street North

City

Stillwater

State

MN

Zip Code

55082-4022

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DemandQuest, Inc.

Occupation

President, Instructor

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2013

Transaction ID : C8942992

Amount of Each Receipt this Period

350.00

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

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

1100.00

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

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

FOR LINE NUMBER:

PAGE 14 OF 63

(check only one)

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

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

Mailing Address 2015 Summit Ave

City Saint Paul	State MN	Zip Code 55105-1461
--------------------	-------------	------------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
 250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		08		2013

Transaction ID : C8933899

Amount of Each Receipt this Period

250.00
--------

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

Mailing Address 51752 Oak Leaf Road

City Kerrick	State MN	Zip Code 55756
-----------------	-------------	-------------------

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

Name of Employer Nemadji Research Corporation	Occupation Owner
--	---------------------

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
 250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		30		2013

Transaction ID : C9128234

Amount of Each Receipt this Period

250.00
--------

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

Mailing Address 2149 Goodrich Ave.

City Saint Paul	State MN	Zip Code 55105-1021
--------------------	-------------	------------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
 330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		03		2013

Transaction ID : C8914323

Amount of Each Receipt this Period

10.00
-------

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

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

510.00
--------

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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PAGE 15 OF 63

(check only one)

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

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

Mailing Address 2149 Goodrich Ave.

City State Zip Code  
Saint Paul MN 55105-1021

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		06		2013

Transaction ID : C8954871

Amount of Each Receipt this Period

25.00

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

Mailing Address 2149 Goodrich Ave.

City State Zip Code  
Saint Paul MN 55105-1021

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2013

Transaction ID : C8955102

Amount of Each Receipt this Period

50.00

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

Mailing Address 2925 Lincoln Dr, Apt. 713

City State Zip Code  
Roseville MN 55113-1351

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

315.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2013

Transaction ID : C8934101

Amount of Each Receipt this Period

125.00

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

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

200.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Harry D. Melander**

Mailing Address 716 Park Ave

City Mahtomedi	State MN	Zip Code 55115-1650
-------------------	-------------	------------------------

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

Name of Employer Minnesota Building and Construction Tr	Occupation President
--	-------------------------

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
 700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		29		2013

Transaction ID : C8948313

Amount of Each Receipt this Period

250.00
--------

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

Mailing Address 1700 Alice Ct

City South St Paul	State MN	Zip Code 55075-2189
-----------------------	-------------	------------------------

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

Name of Employer Upper River Services LLC	Occupation Administration
--	------------------------------

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
 500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		12		2013

Transaction ID : C8957775

Amount of Each Receipt this Period

500.00
--------

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

Mailing Address 766 Maryland Ave W

City Saint Paul	State MN	Zip Code 55117-4026
--------------------	-------------	------------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
 700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		21		2013

Transaction ID : C8942878

Amount of Each Receipt this Period

50.00
-------

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

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

800.00
--------



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**Full Name (Last, First, Middle Initial)  
**Thomas Osthoff**

A. Mailing Address 766 Maryland Ave W

City	State	Zip Code
Saint Paul	MN	55117-4026

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		21		2013

Transaction ID : C8964746

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)  
**Thomas Osthoff**

B. Mailing Address 766 Maryland Ave W

City	State	Zip Code
Saint Paul	MN	55117-4026

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		21		2013

Transaction ID : C9104206

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)  
**James R. Pagliarini**

C. Mailing Address 168 6th Street East 3103

City	State	Zip Code
Saint Paul	MN	55101

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Twin Cities Public TVOccupation  
Executive

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		31		2013

Transaction ID : C9128497

Amount of Each Receipt this Period

250.00

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

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

350.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Pechanga Band of Luiseno Indians**

Mailing Address P.O. Box 1477

City	State	Zip Code
Temecula	CA	92593-1477

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2013

Transaction ID : C9141174

Amount of Each Receipt this Period

2600.00

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

Mailing Address 18897 Explorer Trl

City	State	Zip Code
Eden Prairie	MN	55347-3239

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Heartland Realty Investors

Controller

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		23		2013

Transaction ID : C9110336

Amount of Each Receipt this Period

2500.00

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

Mailing Address 854 Linwood Ave  
Apt. 2

City	State	Zip Code
Saint Paul	MN	55105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2013

Transaction ID : C8933841

Amount of Each Receipt this Period

125.00

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

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

5225.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Leila Poullada</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>29</td> <td></td> <td>2013</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	10		29		2013
M M M	/	D D D	/	Y Y Y Y Y Y									
10		29		2013									
Mailing Address 854 Linwood Ave Apt. 2		<b>Transaction ID : C8948297</b>											
City Saint Paul	State MN	Zip Code 55105											
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 90.00											
Name of Employer Retired	Occupation Retired												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 215.00												
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Ken J. Powell</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>19</td> <td></td> <td>2013</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	12		19		2013
M M M	/	D D D	/	Y Y Y Y Y Y									
12		19		2013									
Mailing Address 1625 Bridgewater Rd		<b>Transaction ID : C9099830</b>											
City Golden Valley	State MN	Zip Code 55422-4243											
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00											
Name of Employer General Mills	Occupation Chairman and CEO												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00												
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Redding Rancheria Tribe</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>31</td> <td></td> <td>2013</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	12		31		2013
M M M	/	D D D	/	Y Y Y Y Y Y									
12		31		2013									
Mailing Address 2000 Redding Rancheria Road		<b>Transaction ID : C9141171</b>											
City Redding	State CA	Zip Code 96001											
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00											
Name of Employer	Occupation												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00												
<b>SUBTOTAL</b> of Receipts This Page (optional).....		2090.00											
<b>TOTAL</b> This Period (last page this line number only).....													

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

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

Mailing Address 755 Tonkawa Rd

City Long Lake	State MN	Zip Code 55356-9234
-------------------	-------------	------------------------

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

Name of Employer Rogers Benefit Group	Occupation Insurance Broker
--	--------------------------------

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
 2500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 16 / 2013

Transaction ID : C9061532

Amount of Each Receipt this Period

2500.00
---------

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

Mailing Address 755 Tonkawa Rd

City Long Lake	State MN	Zip Code 55356-9234
-------------------	-------------	------------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
 2500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 16 / 2013

Transaction ID : C9061531

Amount of Each Receipt this Period

2500.00
---------

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

Mailing Address 2058 Parkway Drive

City North St. Paul	State MN	Zip Code 55109-4112
------------------------	-------------	------------------------

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

Name of Employer University of St. Thomas	Occupation Gift Officer
--	----------------------------

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
 250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 07 / 2013

Transaction ID : C8933159

Amount of Each Receipt this Period

250.00
--------

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

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

5250.00
---------

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**Full Name (Last, First, Middle Initial)  
**A. Sarah Schmitz-Burns**

Mailing Address 1411 Summit Ave

City	State	Zip Code
Saint Paul	MN	55105

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
John Hagen OBGYNOccupation  
Physician

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2013

Transaction ID : C8944426

Amount of Each Receipt this Period

500.00

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

Mailing Address 2474 Oakgreen Ave N

City	State	Zip Code
Stillwater	MN	55082-1525

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2013

Transaction ID : C8948423

Amount of Each Receipt this Period

250.00

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

Mailing Address 180 Lakeview Ln

City	State	Zip Code
Wayzata	MN	55391-1521

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employedOccupation  
Homemaker

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2013

Transaction ID : C8945388

Amount of Each Receipt this Period

1000.00

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

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

1750.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**Byron E. Starns**

Mailing Address 2279 Riverwood Pl

City

Saint Paul

State

MN

Zip Code

55104-5648

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Stinson, Leonard &amp; Street

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		31		2013

Transaction ID : C9141110

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Mark Strobel**

Mailing Address 2380 Oakridge Dr E

City

Saint Paul

State

MN

Zip Code

55119-5521

FEC ID number of contributing  
federal political committee.

C

Name of Employer

3M

Occupation

Chemical Engineer

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1125.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		19		2013

Transaction ID : C9099829

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Joseph Tashjian**

Mailing Address 807 Summit Avenue

City

Saint Paul

State

MN

Zip Code

55105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Saint Paul Radiology

Occupation

Physician

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		29		2013

Transaction ID : C8948323

Amount of Each Receipt this Period

1000.00

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

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

3000.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Mary W. Vaughan</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 08 / 2013	
Mailing Address 510 Groveland Ave, Apt 404		<b>Transaction ID : C8934089</b>	
City Minneapolis	State MN	Zip Code 55403-3220	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Susan Lynch Vento</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 07 / 2013	
Mailing Address 553 Deer Ridge Lane		<b>Transaction ID : C8955091</b>	
City Maplewood	State MN	Zip Code 55119	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Church of the Assumption	Occupation Director of Outreach		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Maxine Wallin</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 19 / 2013	
Mailing Address 7022 Tupa Circle		<b>Transaction ID : C8963411</b>	
City Edina	State MN	Zip Code 55439-1640	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self-employed	Occupation Volunteer		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		750.00	
<b>TOTAL</b> This Period (last page this line number only).....			

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

A. Full Name (Last, First, Middle Initial)  
**Judy D. Walter**

Mailing Address 5229 Morgan Ave S

City State Zip Code  
Minneapolis MN 55419-1026

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		23		2013

Transaction ID : C9110332

Amount of Each Receipt this Period

2600.00

B. Full Name (Last, First, Middle Initial)  
**Judy D. Walter**

Mailing Address 5229 Morgan Ave S

City State Zip Code  
Minneapolis MN 55419-1026

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		23		2013

Transaction ID : C9110331

Amount of Each Receipt this Period

100.00

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

Mailing Address 4514 Bruce Ave

City State Zip Code  
Edina MN 55424-1121

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		23		2013

Transaction ID : C9110333

Amount of Each Receipt this Period

2500.00

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

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

5200.00



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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

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

Mailing Address **4514 Bruce Ave S**

City	State	Zip Code
Edina	MN	55424

FEC ID number of contributing federal political committee.

C

Name of Employer  
**Heartland Realty Investors**

Occupation  
**Realtor**

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		23		2013

Transaction ID : C9110334

Amount of Each Receipt this Period

2500.00

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

Mailing Address **819 Everett Dr**

City	State	Zip Code
Stillwater	MN	55082-6159

FEC ID number of contributing federal political committee.

C

Name of Employer  
**Self-Employed**

Occupation  
**Government Relations**

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2013

Transaction ID : C8948350

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)  
**Yocha Dehe Wintun Nation**

Mailing Address **18960 County Road 75A**  
**P.O. Box 18**

City	State	Zip Code
Brooks	CA	95606

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2013

Transaction ID : C9141185

Amount of Each Receipt this Period

2600.00

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

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

5350.00

47125.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Air Line Pilots Association PAC</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>16</td> <td></td> <td>2013</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	12		16		2013
M M M	/	D D D	/	Y Y Y Y Y Y									
12		16		2013									
Mailing Address 1625 Massachusetts Avenue, N.W.		<b>Transaction ID : C9061519</b>											
City Washington	State DC	Zip Code 20036											
FEC ID number of contributing federal political committee. <b>C</b> C00035451		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>2500.00</td> </tr> </table>							2500.00				
					2500.00								
Name of Employer  		Occupation  											
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>5000.00</td> </tr> </table>							5000.00				
					5000.00								
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Alliant Techsystems Citizenship Fund</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>30</td> <td></td> <td>2013</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	12		30		2013
M M M	/	D D D	/	Y Y Y Y Y Y									
12		30		2013									
Mailing Address 600 Second Street, NE		<b>Transaction ID : C9124054</b>											
City Hopkins	State MN	Zip Code 55343											
FEC ID number of contributing federal political committee. <b>C</b> C00250209		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>1500.00</td> </tr> </table>							1500.00				
					1500.00								
Name of Employer  		Occupation  											
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>2500.00</td> </tr> </table>							2500.00				
					2500.00								
<b>C.</b> Full Name (Last, First, Middle Initial) <b>American Bankers Assoc. PAC</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>11</td> <td></td> <td>2013</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	12		11		2013
M M M	/	D D D	/	Y Y Y Y Y Y									
12		11		2013									
Mailing Address 1120 Connecticut Ave., NW Suite 851		<b>Transaction ID : C8983948</b>											
City Washington	State DC	Zip Code 20036											
FEC ID number of contributing federal political committee. <b>C</b> C00004275		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>1000.00</td> </tr> </table>							1000.00				
					1000.00								
Name of Employer  		Occupation  											
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>1000.00</td> </tr> </table>							1000.00				
					1000.00								
<b>SUBTOTAL</b> of Receipts This Page (optional).....		<table border="1"> <tr> <td colspan="5"></td> <td>5000.00</td> </tr> </table>							5000.00				
					5000.00								
<b>TOTAL</b> This Period (last page this line number only).....		<table border="1"> <tr> <td colspan="5"></td> <td></td> </tr> </table>											

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress****A.** Full Name (Last, First, Middle Initial)  
**American College of Radiology Assn RADPAC**

Mailing Address 1891 Preston White Drive

City	State	Zip Code
Reston	VA	20191

FEC ID number of contributing  
federal political committee.**C** C00343459

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		05		2013

**Transaction ID : C8976521**

Amount of Each Receipt this Period

1500.00

**B.** Full Name (Last, First, Middle Initial)  
**American Dental Association PAC**

Mailing Address 1111 - 14th Street NW., Suite 1100

City	State	Zip Code
Washington	DC	20005

FEC ID number of contributing  
federal political committee.**C** C00000729

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		23		2013

**Transaction ID : C9110338**

Amount of Each Receipt this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
**AT&T Corporation PAC**

Mailing Address 32 Ave. of the Americas

City	State	Zip Code
New York	NY	10013

FEC ID number of contributing  
federal political committee.**C** C00185124

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2013

**Transaction ID : C9124076**

Amount of Each Receipt this Period

2000.00

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

4500.00

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

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

Use separate schedule(s)  
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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

Full Name (Last, First, Middle Initial)  
 DEALERS ELECTION ACTION COMMITTEE OF THE NATIONAL AUTOMOTIVE DEALERS ASSOCIATION

**A.** Mailing Address 8400 WESTPARK DRIVE

City State Zip Code  
 MCLEAN VA 22102

FEC ID number of contributing  
federal political committee.

**C** C00040998

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 10 30 2013

Transaction ID : C8949015

Amount of Each Receipt this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
**DRS TECHNOLOGIES INC. GOOD GOVERNMENT FUND**

Mailing Address 2345 CRYSTAL DRIVE  
 SUITE 915

City State Zip Code  
 ARLINGTON VA 22202

FEC ID number of contributing  
federal political committee.

**C** C00275123

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
 12 19 2013

Transaction ID : C9099846

Amount of Each Receipt this Period

1500.00

**C.** Full Name (Last, First, Middle Initial)  
**DYNCORP INTERNATIONAL LLC POLITICAL ACTION COMMITTEE**

Mailing Address 3190 FAIRVIEW PKARK DRIVE

City State Zip Code  
 FALLS CHURCH VA 22042

FEC ID number of contributing  
federal political committee.

**C** C00409979

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 12 11 2013

Transaction ID : C8983942

Amount of Each Receipt this Period

1000.00

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

3500.00

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

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

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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Honeywell International PAC (HIPAC)</b>		<b>Date of Receipt</b> M M / D D / Y Y Y Y 12 16 2013	
<b>Mailing Address</b> 101 Constitution Ave NW Suite 500 West		<b>Transaction ID : C9061529</b>	
<b>City</b> Washington	<b>State</b> DC	<b>Zip Code</b> 20001	<b>Amount of Each Receipt this Period</b> 1500.00
<b>FEC ID number of contributing federal political committee.</b> C C00096156			
<b>Name of Employer</b>	<b>Occupation</b>		
<b>Receipt For: 2014</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Election Cycle-to-Date</b> 2500.00		
<b>B. Full Name (Last, First, Middle Initial)</b> <b>JSTREETPAC</b>		<b>Date of Receipt</b> M M / D D / Y Y Y Y 12 30 2013	
<b>Mailing Address</b> PO Box 33106		<b>Transaction ID : C9124083</b>	
<b>City</b> Washington	<b>State</b> DC	<b>Zip Code</b> 20033	<b>Amount of Each Receipt this Period</b> 1000.00
<b>FEC ID number of contributing federal political committee.</b> C C00441949			
<b>Name of Employer</b>	<b>Occupation</b>		
<b>Receipt For: 2014</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Election Cycle-to-Date</b> 1000.00		
<b>C. Full Name (Last, First, Middle Initial)</b> <b>Minnesota Mining &amp; Manufacturing PAC</b>		<b>Date of Receipt</b> M M / D D / Y Y Y Y 11 19 2013	
<b>Mailing Address</b> 3M Center Building 224 - 5N - 40		<b>Transaction ID : C8963469</b>	
<b>City</b> Saint Paul	<b>State</b> MN	<b>Zip Code</b> 55144	<b>Amount of Each Receipt this Period</b> 1000.00
<b>FEC ID number of contributing federal political committee.</b> C C00084475			
<b>Name of Employer</b>	<b>Occupation</b>		
<b>Receipt For: 2014</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Election Cycle-to-Date</b> 2000.00		
<b>SUBTOTAL of Receipts This Page (optional)</b> .....		3500.00	
<b>TOTAL This Period (last page this line number only)</b> .....			

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

Use separate schedule(s)  
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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**Minnesota Mining & Manufacturing PAC**

Mailing Address 3M Center Building 224 - 5N - 40

City State Zip Code  
 Saint Paul MN 55144

FEC ID number of contributing  
federal political committee.

**C** C00084475

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 12 11 2013

**Transaction ID : C8985128**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Minnesota Women's Campaign Fund**

Mailing Address P.O. Box 582944

City State Zip Code  
 Minneapolis MN 55458

FEC ID number of contributing  
federal political committee.

**C** C00282327

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 11 22 2013

**Transaction ID : C8966143**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**NEA Fund for Children and Public Education**

Mailing Address 1201 16th Street, NW; Suite 421

City State Zip Code  
 Washington DC 20036

FEC ID number of contributing  
federal political committee.

**C** C00003251

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M / D D / Y Y Y Y  
 12 30 2013

**Transaction ID : C9124992**

Amount of Each Receipt this Period

4000.00

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

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

10000.00

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

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for each category of the  
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

A. Full Name (Last, First, Middle Initial)  
**OSHKOSH CORPORATION EMPLOYEES PAC (OCEPAC)**

Mailing Address P.O. BOX 2566

2307 OREGON STREET

City	State	Zip Code
OSHKOSH	WI	54903

FEC ID number of contributing federal political committee.

C C00304477

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		16		2013

Transaction ID : C9061525

Amount of Each Receipt this Period

1500.00

B. Full Name (Last, First, Middle Initial)  
**Realtors Political Action Committee**

Mailing Address 430 North Michigan Avenue

City	State	Zip Code
Chicago	IL	60611

FEC ID number of contributing federal political committee.

C C00030718

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		03		2013

Transaction ID : C8972865

Amount of Each Receipt this Period

1000.00

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

Mailing Address 40 WESTMINSTER STREET

City	State	Zip Code
PROVIDENCE	RI	02903

FEC ID number of contributing federal political committee.

C C00123612

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2013

Transaction ID : C9124029

Amount of Each Receipt this Period

2500.00

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

5000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 32 OF 63

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

A. Full Name (Last, First, Middle Initial)  
**THE BOEING COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 1200 WILSON BLVD

City	State	Zip Code
ARLINGTON	VA	22209

FEC ID number of contributing  
federal political committee.

**C** C00142711

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		11		2013

Transaction ID : C8983943

Amount of Each Receipt this Period

2000.00

B. Full Name (Last, First, Middle Initial)  
**United Steelworkers of America PAC**

Mailing Address 5 Gateway Center

City	State	Zip Code
Pittsburgh	PA	15222

FEC ID number of contributing  
federal political committee.

**C** C00003590

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2013

Transaction ID : C8945344

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)  
**UNITED TECHNOLOGIES CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 1101 PENNSYLVANIA AVE, NW  
 10TH FLOOR

City	State	Zip Code
WASHINGTON	DC	20004

FEC ID number of contributing  
federal political committee.

**C** C00035683

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2013

Transaction ID : C9124037

Amount of Each Receipt this Period

2000.00

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

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

4250.00

35750.00



**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 33 OF 63

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

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NAME OF COMMITTEE (In Full)

**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address P.O. Box 360001

City	State	Zip Code
Fort Lauderdale	FL	33336

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		16		2013

Amount of Each Disbursement this Period

7.95
------

Transaction ID : D422552

**B. American Express**

Mailing Address P.O. Box 360001

City	State	Zip Code
Fort Lauderdale	FL	33336

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		21		2013

Amount of Each Disbursement this Period

19.42
-------

Transaction ID : D422554

**c. American Express**

Mailing Address P.O. Box 360001

City	State	Zip Code
Fort Lauderdale	FL	33336

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		18		2013

Amount of Each Disbursement this Period

7.95
------

Transaction ID : D424966

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

35.32

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 34 OF 63

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

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NAME OF COMMITTEE (In Full)

McCollum for Congress

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address P.O. Box 360001

City	State	Zip Code
Fort Lauderdale	FL	33336

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		20		2013

Amount of Each Disbursement this Period

21.12
-------

Transaction ID : D424967

**B. American Express**

Mailing Address P.O. Box 360001

City	State	Zip Code
Fort Lauderdale	FL	33336

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		17		2013

Amount of Each Disbursement this Period

7.95
------

Transaction ID : D424968

**C. American Express**

Mailing Address P.O. Box 360001

City	State	Zip Code
Fort Lauderdale	FL	33336

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		20		2013

Amount of Each Disbursement this Period

4.08
------

Transaction ID : D424969

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

33.15

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**A. Blue Cross Blue Shield of Minnesota**

Mailing Address PO Box 64369

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		20		2013

City	State	Zip Code
Saint Paul	MN	55164-0369

Amount of Each Disbursement this Period

207.16
--------

Purpose of Disbursement  
Health insurance

Candidate Name

Category/  
Type**Transaction ID : D425486**

Office Sought:	House	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
	Senate		
	President		

State: District:

Full Name (Last, First, Middle Initial)

**B. Blue Cross Blue Shield of Minnesota**

Mailing Address PO Box 64369

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		11		2013

City	State	Zip Code
Saint Paul	MN	55164-0369

Amount of Each Disbursement this Period

612.90
--------

Purpose of Disbursement  
Health insurance

Candidate Name

Category/  
Type**Transaction ID : D423276**

Office Sought:	House	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
	Senate		
	President		

State: District:

Full Name (Last, First, Middle Initial)

**C. Blue Cross Blue Shield of Minnesota**

Mailing Address PO Box 64369

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		19		2013

City	State	Zip Code
Saint Paul	MN	55164-0369

Amount of Each Disbursement this Period

621.47
--------

Purpose of Disbursement  
Health insurance

Candidate Name

Category/  
Type**Transaction ID : D423992**

Office Sought:	House	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
	Senate		
	President		

State: District:

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

1441.53

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**A. Blue Cross Blue Shield of Minnesota**

Mailing Address PO Box 64369

City	State	Zip Code
Saint Paul	MN	55164-0369

Purpose of Disbursement  
Health insurance

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		25		2013

Amount of Each Disbursement this Period

453.00
--------

Transaction ID : D418522

**B. Century Link**

Mailing Address P.O. Box 91154

City	State	Zip Code
Seattle	WA	98111

Purpose of Disbursement  
Telephone Service

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		23		2013

Amount of Each Disbursement this Period

0.69
------

Transaction ID : D418531

**c. Comcast**

Mailing Address 10 River Park Plz

City	State	Zip Code
Saint Paul	MN	55107-1220

Purpose of Disbursement  
Internet and phone

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		13		2013

Amount of Each Disbursement this Period

210.16
--------

Transaction ID : D422239

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

663.85

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 37 OF 63

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

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NAME OF COMMITTEE (In Full)

**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**A. Comcast**

Mailing Address 10 River Park Plz

City	State	Zip Code
Saint Paul	MN	55107-1220

Purpose of Disbursement  
Internet, cable, phone

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		23		2013

Amount of Each Disbursement this Period

181.17
--------

Transaction ID : D418529

**B. Comcast**

Mailing Address 10 River Park Plz

City	State	Zip Code
Saint Paul	MN	55107-1220

Purpose of Disbursement  
Internet, phone, cable TV

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		31		2013

Amount of Each Disbursement this Period

210.16
--------

Transaction ID : D427095

**c. Elan Merchant Services**

Mailing Address 7300 Chapman Hwy

City	State	Zip Code
Knoxville	TN	37920-6612

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2013

Amount of Each Disbursement this Period

57.94
-------

Transaction ID : D422545

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

449.27

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 38 OF 63

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

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NAME OF COMMITTEE (In Full)

**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**A. Elan Merchant Services**

Mailing Address 7300 Chapman Hwy

City	State	Zip Code
Knoxville	TN	37920-6612

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		04		2013

Amount of Each Disbursement this Period

112.94
--------

Transaction ID : D424953

**B. Elan Merchant Services**

Mailing Address 7300 Chapman Hwy

City	State	Zip Code
Knoxville	TN	37920-6612

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		02		2013

Amount of Each Disbursement this Period

91.94
-------

Transaction ID : D424954

**C. First Data Corporation**

Mailing Address 5565 Glenridge Connector NE

City	State	Zip Code
Atlanta	GA	30342

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		04		2013

Amount of Each Disbursement this Period

125.92
--------

Transaction ID : D424956

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

330.80

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 39 OF 63

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

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NAME OF COMMITTEE (In Full)

**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**A. First Data Corporation**

Mailing Address 5565 Glenridge Connector NE

City	State	Zip Code
Atlanta	GA	30342

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		05		2013

Amount of Each Disbursement this Period

16.40
-------

Transaction ID : D424957

**B. First Data Corporation**

Mailing Address 5565 Glenridge Connector NE

City	State	Zip Code
Atlanta	GA	30342

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		05		2013

Amount of Each Disbursement this Period

69.25
-------

Transaction ID : D424958

**C. First Data Corporation**

Mailing Address 5565 Glenridge Connector NE

City	State	Zip Code
Atlanta	GA	30342

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		04		2013

Amount of Each Disbursement this Period

41.73
-------

Transaction ID : D424960

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

127.38

# **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)

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☒ 17    ☐ 18    ☐ 19a    ☐ 19b  
☐ 20a    ☐ 20b    ☐ 20c    ☐ 21

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

Full Name (Last, First, Middle Initial)

## **A. First Data Corporation**

Mailing Address 5565 Glenridge Connector NE

City State Zip Code  
 Atlanta GA 30342

Purpose of Disbursement  
 Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
 12 / 05 / 2013

Amount of Each Disbursement this Period

46.74

Transaction ID : D424961

Category/  
Type

Full Name (Last, First, Middle Initial)

## **B. First Data Corporation**

Mailing Address 5565 Glenridge Connector NE

City State Zip Code  
 Atlanta GA 30342

Purpose of Disbursement  
 Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
 12 / 05 / 2013

Amount of Each Disbursement this Period

26.65

Transaction ID : D424963

Category/  
Type

Full Name (Last, First, Middle Initial)

## **C. First Data Corporation**

Mailing Address 5565 Glenridge Connector NE

City State Zip Code  
 Atlanta GA 30342

Purpose of Disbursement  
 Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
 10 / 02 / 2013

Amount of Each Disbursement this Period

61.96

Transaction ID : D422546

Category/  
Type

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

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

135.35



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**A. First Data Corporation**

Mailing Address 5565 Glenridge Connector NE

City	State	Zip Code
Atlanta	GA	30342

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		03		2013

Amount of Each Disbursement this Period

6.18
------

Transaction ID : D422547

**B. First Data Corporation**

Mailing Address 5565 Glenridge Connector NE

City	State	Zip Code
Atlanta	GA	30342

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		03		2013

Amount of Each Disbursement this Period

23.60
-------

Transaction ID : D422548

**c. Fleur De Lis**

Mailing Address 516 Selby Ave

City	State	Zip Code
Saint Paul	MN	55102-1729

Purpose of Disbursement  
Flowers

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		06		2013

Amount of Each Disbursement this Period

53.56
-------

Transaction ID : D421011

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

83.34

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**A. Mr. Charles Rand Hammond**

Mailing Address 3620 17th Ave S

City	State	Zip Code
Minneapolis	MN	55407

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		04		2013

Amount of Each Disbursement this Period

2827.97
---------

Transaction ID : D421014

**B. Mr. Charles Rand Hammond**

Mailing Address 3620 17th Ave S

City	State	Zip Code
Minneapolis	MN	55407

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2013

Amount of Each Disbursement this Period

2827.97
---------

Transaction ID : D417499

**C. Mr. Charles Rand Hammond**

Mailing Address 3620 17th Ave S

City	State	Zip Code
Minneapolis	MN	55407

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		02		2013

Amount of Each Disbursement this Period

2827.97
---------

Transaction ID : D422914

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

8483.91

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**A. Hill Plaza, LLC**Mailing Address 1700 West Highway 36  
Suite 650City State Zip Code  
Roseville MN 55113Purpose of Disbursement  
Office and storage rent

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		25		2013

Amount of Each Disbursement this Period

892.67
--------

Transaction ID : D422620

**B. Hill Plaza, LLC**Mailing Address 1700 West Highway 36  
Suite 650City State Zip Code  
Roseville MN 55113Purpose of Disbursement  
Office and storage space rent

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		23		2013

Amount of Each Disbursement this Period

892.67
--------

Transaction ID : D418530

**c. Honsa-Binder Printing Company**

Mailing Address 320 Spruce St

City State Zip Code  
Saint Paul MN 55101-2445Purpose of Disbursement  
Printing

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		23		2013

Amount of Each Disbursement this Period

724.67
--------

Transaction ID : D418527

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

2510.01

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**A. Emily Lefholz**Mailing Address 669 Laurel Ave  
#1

City Saint Paul State MN Zip Code 55104

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2013

Amount of Each Disbursement this Period

3655.73
---------

Transaction ID : D417500

**B. Emily Lefholz**Mailing Address 669 Laurel Ave  
#1

City Saint Paul State MN Zip Code 55104

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		04		2013

Amount of Each Disbursement this Period

3655.73
---------

Transaction ID : D421012

**C. Emily Lefholz**Mailing Address 669 Laurel Ave  
#1

City Saint Paul State MN Zip Code 55104

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		02		2013

Amount of Each Disbursement this Period

3655.73
---------

Transaction ID : D422915

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

10967.19

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**A. Ms. Dotti Mavromatis**

Mailing Address 411 South Columbus Street

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		25		2013

Amount of Each Disbursement this Period

3000.00
---------

Transaction ID : D422621

**B. Ms. Dotti Mavromatis**

Mailing Address 411 South Columbus Street

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		23		2013

Amount of Each Disbursement this Period

3000.00
---------

Transaction ID : D418523

**C. Ms. Dotti Mavromatis**

Mailing Address 411 South Columbus Street

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		19		2013

Amount of Each Disbursement this Period

3000.00
---------

Transaction ID : D423991

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

9000.00

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

McCollum for Congress

Full Name (Last, First, Middle Initial)

**A. National Democratic Club**

Mailing Address 30 Ivy St SE

City	State	Zip Code
Washington	DC	20003-4006

Purpose of Disbursement  
Membership fee

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
11 / 25 / 2013

Amount of Each Disbursement this Period

2492.69
---------

Transaction ID : D422612

**B. National Democratic Club**

Mailing Address 30 Ivy St SE

City	State	Zip Code
Washington	DC	20003-4006

Purpose of Disbursement  
Food and beverage, membership dues

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
12 / 19 / 2013

Amount of Each Disbursement this Period

300.72
--------

Transaction ID : D423994

**C. NGP VAN, Inc.**

Mailing Address 1101 15th Street, NW, Suite 500

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement  
Database software

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
10 / 28 / 2013

Amount of Each Disbursement this Period

2040.00
---------

Transaction ID : D418526

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

2492.69

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 47 OF 63

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

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NAME OF COMMITTEE (In Full)

**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**A. NGP VAN, Inc.**

Mailing Address 1101 15th Street, NW, Suite 500

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement  
Email Service

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2013

Amount of Each Disbursement this Period

75.00
-------

Transaction ID : D416897

**B. NGP VAN, Inc.**

Mailing Address 1101 15th Street, NW, Suite 500

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement  
Email Service

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		01		2013

Amount of Each Disbursement this Period

75.00
-------

Transaction ID : D420812

**c. NGP VAN, Inc.**

Mailing Address 1101 15th Street, NW, Suite 500

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement  
Email Service

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		03		2013

Amount of Each Disbursement this Period

75.00
-------

Transaction ID : D427194

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

225.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**A. Paychex**Mailing Address 1210 Northland Dr  
Ste 100

City Mendota Heights State MN Zip Code 55120-1181

Purpose of Disbursement  
Payroll taxes

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		04		2013

Amount of Each Disbursement this Period

3147.79
---------

Transaction ID : D421015

**B. Paychex**Mailing Address 1210 Northland Dr  
Ste 100

City Mendota Heights State MN Zip Code 55120-1181

Purpose of Disbursement  
Payroll processing fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		11		2013

Amount of Each Disbursement this Period

230.30
--------

Transaction ID : D421016

**C. Paychex**Mailing Address 1210 Northland Dr  
Ste 100

City Mendota Heights State MN Zip Code 55120-1181

Purpose of Disbursement  
Payroll taxes

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2013

Amount of Each Disbursement this Period

3044.46
---------

Transaction ID : D417509

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

6422.55



# **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)

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☒ 17    ☐ 18    ☐ 19a    ☐ 19b  
☐ 20a    ☐ 20b    ☐ 20c    ☐ 21

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

Full Name (Last, First, Middle Initial)

## **A. Paychex**

Mailing Address 1210 Northland Dr  
Ste 100

City State Zip Code  
Mendota Heights MN 55120-1181

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
10 / 18 / 2013

Amount of Each Disbursement this Period

22.49

Transaction ID : D422553

## **B. Paychex**

Mailing Address 1210 Northland Dr  
Ste 100

City State Zip Code  
Mendota Heights MN 55120-1181

Purpose of Disbursement  
Payroll processing fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
12 / 10 / 2013

Amount of Each Disbursement this Period

106.80

Transaction ID : D422917

## **c. Paychex**

Mailing Address 1210 Northland Dr  
Ste 100

City State Zip Code  
Mendota Heights MN 55120-1181

Purpose of Disbursement  
Payroll taxes

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
12 / 02 / 2013

Amount of Each Disbursement this Period

3065.53

Transaction ID : D422918

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

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

3194.82

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**A. Postmaster USPS**Mailing Address Minnesota Transfer Station  
2334 University Ave W

City Saint Paul State MN Zip Code 55114-1858

Purpose of Disbursement  
P.O. box rental

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		26		2013

Amount of Each Disbursement this Period

100.00
--------

Transaction ID : D422611

**B. Postmaster USPS**Mailing Address Minnesota Transfer Station  
2334 University Ave W

City Saint Paul State MN Zip Code 55114-1858

Purpose of Disbursement  
Postage

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		20		2013

Amount of Each Disbursement this Period

1380.00
---------

Transaction ID : D425482

**C. Postmaster USPS**Mailing Address Minnesota Transfer Station  
2334 University Ave W

City Saint Paul State MN Zip Code 55114-1858

Purpose of Disbursement  
Postage

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		16		2013

Amount of Each Disbursement this Period

19.95
-------

Transaction ID : D424974

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

1499.95

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

McCollum for Congress

Full Name (Last, First, Middle Initial)

**A. Postmaster USPS**Mailing Address Minnesota Transfer Station  
2334 University Ave W

City Saint Paul State MN Zip Code 55114-1858

Purpose of Disbursement  
Postage

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
12	17	2013

Amount of Each Disbursement this Period

23.50
-------

Transaction ID : D424975

**B. Postmaster USPS**Mailing Address Minnesota Transfer Station  
2334 University Ave W

City Saint Paul State MN Zip Code 55114-1858

Purpose of Disbursement  
Postage

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
12	12	2013

Amount of Each Disbursement this Period

22.65
-------

Transaction ID : D424972

**c. Pride at Work**

Mailing Address 815 16th St NW

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Advertisement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
11	18	2013

Amount of Each Disbursement this Period

250.00
--------

Transaction ID : D422314

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

296.15

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**A. Roddie Turner**

Mailing Address 452 Laurel Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		23		2013

City	State	Zip Code
Saint Paul	MN	55102-2018

Amount of Each Disbursement this Period

700.00
--------

Purpose of Disbursement  
Catering**Transaction ID : D418532**

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

**B. Patrick Savage**

Mailing Address 7401 Courtly Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		04		2013

City	State	Zip Code
Woodbury	MN	55125-4002

Amount of Each Disbursement this Period

782.41
--------

Purpose of Disbursement  
Payroll**Transaction ID : D421013**

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

**c. Patrick Savage**

Mailing Address 7401 Courtly Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2013

City	State	Zip Code
Woodbury	MN	55125-4002

Amount of Each Disbursement this Period

277.05
--------

Purpose of Disbursement  
Payroll**Transaction ID : D417501**

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

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

1759.46

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**A. Patrick Savage**

Mailing Address 7401 Courtly Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		02		2013

City	State	Zip Code
Woodbury	MN	55125-4002

Purpose of Disbursement  
Payroll

Amount of Each Disbursement this Period

383.26
--------

Transaction ID : D422916

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**B. Streamworks**

Mailing Address 3770 Dunlap St N

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		10		2013

City	State	Zip Code
Arden Hills	MN	55112-6907

Purpose of Disbursement  
Mailing

Amount of Each Disbursement this Period

1037.57
---------

Transaction ID : D417878

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**C. T-Mobile USA, Inc.**

Mailing Address P.O. Box 742596

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		23		2013

City	State	Zip Code
Cincinnati	OH	45274-2596

Purpose of Disbursement  
Mobile phone

Amount of Each Disbursement this Period

78.37
-------

Transaction ID : D418528

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State: District:

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

1499.20

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**A. T-Mobile USA, Inc.**

Mailing Address P.O. Box 742596

City	State	Zip Code
Cincinnati	OH	45274-2596

Purpose of Disbursement  
Mobile phone

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		19		2013

Amount of Each Disbursement this Period

78.38
-------

Transaction ID : D423993

**B. T-Mobile USA, Inc.**

Mailing Address P.O. Box 742596

City	State	Zip Code
Cincinnati	OH	45274-2596

Purpose of Disbursement  
Mobile Phone

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		05		2013

Amount of Each Disbursement this Period

10.77
-------

Transaction ID : D424965

**c. U.S. House of Representatives Gift Shop**Mailing Address B217 Longworth  
Bldg

City	State	Zip Code
Washington	DC	20515-0001

Purpose of Disbursement  
Supplies for Constitutents

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		12		2013

Amount of Each Disbursement this Period

450.00
--------

Transaction ID : D424973

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

539.15

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**A. U.S. House of Representatives Gift Shop**Mailing Address B217 Longworth  
Bldg

City Washington State DC Zip Code 20515-0001

Purpose of Disbursement  
Supplies for Constitutents

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		18		2013

Amount of Each Disbursement this Period

75.00
-------

Transaction ID : D424976

**B. VISI**Mailing Address 12 South 6th Street  
Suite 630

City Minneapolis State MN Zip Code 55402-1506

Purpose of Disbursement  
Email host

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		25		2013

Amount of Each Disbursement this Period

72.00
-------

Transaction ID : D422617

**c. VISI**Mailing Address 12 South 6th Street  
Suite 630

City Minneapolis State MN Zip Code 55402-1506

Purpose of Disbursement  
Mobile phone

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		26		2013

Amount of Each Disbursement this Period

78.37
-------

Transaction ID : D422618

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

225.37

# **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)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

Full Name (Last, First, Middle Initial)

## **A. VISI**

Mailing Address 12 South 6th Street  
Suite 630

City State Zip Code  
Minneapolis MN 55402-1506

Purpose of Disbursement  
Email host

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
10 / 10 / 2013

Amount of Each Disbursement this Period

63.47

Transaction ID : D417874

Category/  
Type

Full Name (Last, First, Middle Initial)

## **B. Whitney Wyatt Burns**

Mailing Address P.O. Box 1174

City State Zip Code  
Springfield VA 22151-0174

Purpose of Disbursement  
FEC Compliance

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
10 / 23 / 2013

Amount of Each Disbursement this Period

1000.00

Transaction ID : D418525

Category/  
Type

Full Name (Last, First, Middle Initial)

## **c. Whitney Wyatt Burns**

Mailing Address P.O. Box 1174

City State Zip Code  
Springfield VA 22151-0174

Purpose of Disbursement  
FEC Compliance

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
12 / 11 / 2013

Amount of Each Disbursement this Period

1000.00

Transaction ID : D423279

Category/  
Type

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

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

2063.47



**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**A. Emily Lefholz**Mailing Address 669 Laurel Ave  
#1

City Saint Paul State MN Zip Code 55104

Purpose of Disbursement  
Office supplies, parking, and mileage reimbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		04		2013

Amount of Each Disbursement this Period

446.64
--------

Transaction ID : D417056

**B. Office Max**

Mailing Address 1490 University Ave W

City Saint Paul State MN Zip Code 55104-3901

Purpose of Disbursement  
Office supplies

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		04		2013

Amount of Each Disbursement this Period

401.34
--------

Transaction ID : D417057

[MEMO ITEM]

**c. Mr. Charles Rand Hammond**

Mailing Address 3620 17th Ave S

City Minneapolis State MN Zip Code 55407

Purpose of Disbursement  
Postage and office supplies

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		08		2013

Amount of Each Disbursement this Period

246.67
--------

Transaction ID : D417456

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

693.31



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 59 OF 63

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

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NAME OF COMMITTEE (In Full)

**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**A. Postmaster USPS**Mailing Address Minnesota Transfer Station  
2334 University Ave W

City Saint Paul State MN Zip Code 55114-1858

Purpose of Disbursement  
Postage

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		21		2013

Amount of Each Disbursement this Period

230.00
--------

Transaction ID : D420923

**[MEMO ITEM]****B. Mr. Charles Rand Hammond**

Mailing Address 3620 17th Ave S

City Minneapolis State MN Zip Code 55407

Purpose of Disbursement  
Flowers and postage

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		13		2013

Amount of Each Disbursement this Period

301.84
--------

Transaction ID : D422235

**c. Fleur De Lis**

Mailing Address 516 Selby Ave

City Saint Paul State MN Zip Code 55102-1729

Purpose of Disbursement  
Flowers

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		13		2013

Amount of Each Disbursement this Period

117.84
--------

Transaction ID : D422236

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

301.84

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 60 OF 63

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

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NAME OF COMMITTEE (In Full)

**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**A. Postmaster USPS**Mailing Address Minnesota Transfer Station  
2334 University Ave W

City Saint Paul State MN Zip Code 55114-1858

Purpose of Disbursement  
Postage

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		13		2013

Amount of Each Disbursement this Period

184.00
--------

Transaction ID : D422237

**[MEMO ITEM]****B. Emily Lefholz**Mailing Address 669 Laurel Ave  
#1

City Saint Paul State MN Zip Code 55104

Purpose of Disbursement  
Phone, parking, beverages

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		13		2013

Amount of Each Disbursement this Period

62.38
-------

Transaction ID : D422240

**c. Ms. Dotti Mavromatis**

Mailing Address 411 South Columbus Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Catering

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		11		2013

Amount of Each Disbursement this Period

1439.99
---------

Transaction ID : D423273

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

1502.37

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**A. Charlie Palmer**

Mailing Address 101 Constitution Ave NW

City	State	Zip Code
Washington	DC	20001

Purpose of Disbursement  
Food and beverage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		11		2013

Amount of Each Disbursement this Period

1439.99
---------

Transaction ID : D423274

**[MEMO ITEM]****B. Emily Lefholz**Mailing Address 669 Laurel Ave  
#1

City	State	Zip Code
Saint Paul	MN	55104

Purpose of Disbursement  
Office supplies, postage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		19		2013

Amount of Each Disbursement this Period

299.55
--------

Transaction ID : D424000

**c. Office Max**

Mailing Address 1490 University Ave W

City	State	Zip Code
Saint Paul	MN	55104-3901

Purpose of Disbursement  
Office supplies

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		19		2013

Amount of Each Disbursement this Period

9.13
------

Transaction ID : D424002

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

299.55

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**A. Office Max**

Mailing Address 1490 University Ave W

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		16		2013

City	State	Zip Code
Saint Paul	MN	55104-3901

Amount of Each Disbursement this Period

186.71
--------

Purpose of Disbursement  
Office suppliesCategory/  
Type

Transaction ID : D424003

**[MEMO ITEM]**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. Postmaster USPS**Mailing Address Minnesota Transfer Station  
2334 University Ave W

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		19		2013

City	State	Zip Code
Saint Paul	MN	55114-1858

Amount of Each Disbursement this Period

53.76
-------

Purpose of Disbursement  
PostageCategory/  
Type

Transaction ID : D424001

**[MEMO ITEM]**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

0.00
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57768.96
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**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 63 OF 63

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**McCollum for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Lockridge, Grindal, Nauen P.L.L.P.**

Nature of Debt (Purpose):

Catering &amp; event costs

Mailing Address 100 Washington Ave S, Ste 2200

City State

Zip Code

Minneapolis

MN

55401-2159

Outstanding Balance Beginning This Period

0.00

Transaction ID : D428445

Amount Incurred This Period

962.48

Payment This Period

0.00

Outstanding Balance at Close of This Period

962.48

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Streamworks**

Nature of Debt (Purpose):

Mailing

Mailing Address 3770 Dunlap St N

City State

Zip Code

Arden Hills

MN

55112-6907

Outstanding Balance Beginning This Period

1037.57

Transaction ID : D417521

Amount Incurred This Period

0.00

Payment This Period

1037.57

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

962.48

2) **TOTALS** This Period (last page this line number only) ..... ▶

962.48

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

962.48