

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized CommitteeRECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS14 FEB -4 AM 10:58
Office Use Only1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

ABELER4SENATE

ADDRESS (number and street)

600 EAST MAIN STREET

Check if different
than previously
reported. (ACC)

ANOKA

MN

55303

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C C00546630

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

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

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the
State of

MM / DD / YYYY

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



General (30G)



Runoff (30R)



Special (30S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the
State of

MM / DD / YYYY

5. Covering Period

MM / DD / YYYY
10 / 01 / 2013MM / DD / YYYY
01 / 31 / 2013MM / DD / YYYY
2013

through

MM / DD / YYYY
12 / 31 / 2013MM / DD / YYYY
31 / 12 / 2013MM / DD / YYYY
2013

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 BART WARD

Signature of Treasurer

BART WARD

Date

MM / DD / YYYY
01 / 30 / 2014MM / DD / YYYY
30 / 01 / 2014MM / DD / YYYY
20 / 14

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

Write or Type Committee Name

ABELER4SENATE

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			

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))....

26726.00

81580.00

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

0.00

100.00

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

26726.00

81480.00

7. Net Operating Expenditures

(a) Total Operating Expenditures
(from Line 17)

36488.25

62043.18

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

0.00

4966.09

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

36488.25

57077.09

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

24806.45

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

0.00

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

0.00

For further information contact:

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

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

14020111328

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name

ABELER4SENATE

Report Covering the Period: From:

MM / DD / YYYY
10 / 01 / 2013

To:

MM / DD / YYYY
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).....

19009.00

57910.00

- (ii) Unitemized

7717.00

23540.00

- (iii) TOTAL of contributions
from individuals ▶

26726.00

81450.00

- (b) Political Party Committees.....

0.00

0.00

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

0.00

0.00

- (d) The Candidate

0.00

130.00

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

26726.00

81580.00

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.)

0.00

4966.09

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

0.00

403.54

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

26726.00

86949.63

14020111329

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 34

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....

36488.25

62043.18

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

100.00

(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

100.00

21. OTHER DISBURSEMENTS

0.00

0.00

22. **TOTAL DISBURSEMENTS**

(add Lines 17, 18, 19(c), 20(d), and 21) ►

36488.25

62143.18

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....

34568.70

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....

26726.00

25. SUBTOTAL (add Line 23 and Line 24)

61294.70

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

36488.25

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD
(subtract Line 26 from Line 25).....

24806.45

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 34	
(check only one)			
☒ 11a	☐ 11b	☐ 11c	☐ 11d
☐ 12	☐ 13a	☐ 13b	☐ 14
☐ 15			

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

A. Full Name (Last, First, Middle Initial) MICHAEL S BALFANZ			Date of Receipt MM / DD / YYYY 11 / 16 / 2013	
Mailing Address 8715 NE RIVER ROAD			Transaction ID : SA11AI.4979	
City RICE	State MN	Zip Code 56367	Amount of Each Receipt this Period 520.00	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 520.00	
Name of Employer SELF EMPLOYED		Occupation CHIROPRACOR	Amount of Each Receipt this Period 520.00	
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)		Election Cycle-to-Date 520.00	Amount of Each Receipt this Period 520.00	
B. Full Name (Last, First, Middle Initial) JAMES BARR			Date of Receipt MM / DD / YYYY 10 / 01 / 2013	
Mailing Address 4719 BANNING AVE			Transaction ID : SA11AI.4975	
City WHITEBEAR LAKE	State MN	Zip Code 55110	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 500.00	
Name of Employer BARR FAMILY CHIROPRACTIC & SPO		Occupation SELF EMPLOYED	Amount of Each Receipt this Period 500.00	
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)		Election Cycle-to-Date 500.00	Amount of Each Receipt this Period 500.00	
C. Full Name (Last, First, Middle Initial) ARLONA V BERGMAN			Date of Receipt MM / DD / YYYY 10 / 20 / 2013	
Mailing Address 15220 NOWTHEN BLVD			Transaction ID : SA11AI.5031	
City ANOKA	State MN	Zip Code 55303	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 500.00	
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period 500.00	
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)		Election Cycle-to-Date 500.00	Amount of Each Receipt this Period 500.00	
SUBTOTAL of Receipts This Page (optional).....			1520.00	
TOTAL This Period (last page this line number only).....			1520.00	

14020111331

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 6 OF 34	
(check only one)			
☒ 11a	☐ 11b	☐ 11c	☐ 11d
☐ 12	☐ 13a	☐ 13b	☐ 14
☐ 15			

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

A. Full Name (Last, First, Middle Initial) BRUCE BOMIER		Date of Receipt MM / DD / YYYY 10 / 23 / 2013	
Mailing Address 3430 RUM RIVER DRIVE		Transaction ID : SA11AI.4956	
City ANOKA	State MN	Zip Code 55303	
FEC ID number of contributing federal political committee. ☒ C		Amount of Each Receipt this Period 1000.00	
Name of Employer INSTITUTE OS ENVIRONMENTAL AS.		Occupation 	
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)		Election Cycle-to-Date 1000.00	
B. Full Name (Last, First, Middle Initial) BARBRO BROST		Date of Receipt MM / DD / YYYY 10 / 02 / 2013	
Mailing Address 2840 COUNTY ROAD 24		Transaction ID : SA11AI.5036	
City LONG LAKE	State MN	Zip Code 55356	
FEC ID number of contributing federal political committee. ☒ C		Amount of Each Receipt this Period 500.00	
Name of Employer BARBRO BROST CHIROPRACTIC		Occupation CHIROPRACTOR	
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)		Election Cycle-to-Date 1000.00	
C. Full Name (Last, First, Middle Initial) STEPHEN J COLLINS		Date of Receipt MM / DD / YYYY 11 / 11 / 2013	
Mailing Address 527 COON RAPIDS BLVD		Transaction ID : SA11AI.4992	
City COON RAPIDS	State MN	Zip Code 55433	
FEC ID number of contributing federal political committee. ☒ C		Amount of Each Receipt this Period 260.00	
Name of Employer ABUNDANT LIFE FAMILY CHIROPRACTIC		Occupation CHIROPRACTOR	
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)		Election Cycle-to-Date 260.00	
SUBTOTAL of Receipts This Page (optional).....		1760.00	
TOTAL This Period (last page this line number only).....			

14020111332

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 7 OF 34	
(check only one)			
☒ 11a	☐ 11b	☐ 11c	☐ 11d
☐ 12	☐ 13a	☐ 13b	☐ 14
☐ 15			

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

A. Full Name (Last, First, Middle Initial) PATRICIA CULLEN		Date of Receipt MM / DD / YYYY 12 / 11 / 2013	
Mailing Address 2104 PALACE AVE		Transaction ID : SA11AI.5024	
City SAINT PAUL	State MN	Zip Code 55105	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00	
Name of Employer	Occupation CARE PROVIDER		
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)	Election Cycle-to-Date 400.00		
B. Full Name (Last, First, Middle Initial) GREGG DENVER		Date of Receipt MM / DD / YYYY 12 / 10 / 2013	
Mailing Address 107 SE 10TH ST SUITE 1		Transaction ID : SA11AI.5091	
City GRAND RAPIDS	State MN	Zip Code 55744	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 260.00	
Name of Employer DENVER CHIRO	Occupation		
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)	Election Cycle-to-Date 260.00		
C. Full Name (Last, First, Middle Initial) CATHRINE L DOCK		Date of Receipt MM / DD / YYYY 11 / 24 / 2013	
Mailing Address P O BOX 98		Transaction ID : SA11AI.4981	
City ANOKA	State MN	Zip Code 55303	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1250.00	
Name of Employer	Occupation HOMEMAKER		
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)	Election Cycle-to-Date 2500.00		
SUBTOTAL of Receipts This Page (optional)		1710.00	
TOTAL This Period (last page this line number only)			

14020111333

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
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NAME OF COMMITTEE (In Full)
ABELER4SENATE

Full Name (Last, First, Middle Initial)
GERALD P DOCK

Mailing Address **P O BOX 98**

City State Zip Code
ANOKA MN 55303

FEC ID number of contributing
federal political committee.

C

Name of Employer
GREENHAVEN MARKETING

Occupation
SELF EMPLOYED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

11 / 24 / 2013

Transaction ID : **SA11AI.4980**

Amount of Each Receipt this Period

1250.00

Full Name (Last, First, Middle Initial)
MICHAEL E ERICKSON

Mailing Address **400 PLEASANT AVE S**

City State Zip Code
PARK RAPIDS MN 56470

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

11 / 13 / 2013

Transaction ID : **SA11AI.4991**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)
JOEL FENSKE

Mailing Address **19957 MCKENDRY PATH**

City State Zip Code
FARMINGTON MN 55024

FEC ID number of contributing
federal political committee.

C

Name of Employer
KINGSWAY CHIROPRACTIC

Occupation
CHIROPRACTOR

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

260.00

Date of Receipt

12 / 07 / 2013

Transaction ID : **SA11AI.5004**

Amount of Each Receipt this Period

260.00

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

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

1760.00

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 34	
(check only one)			
☒ 11a	☐ 11b	☐ 11c	☐ 11d
☐ 12	☐ 13a	☐ 13b	☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

A. Full Name (Last, First, Middle Initial) GLENN FRISCH Mailing Address 4137 WOODLAND RD City CIRCLE PINES State MN Zip Code 55014 FEC ID number of contributing federal political committee. C Name of Employer LEXINGTON SQUARE CHIROPRACTIC Occupation CHIROPRACTIC Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify) Election Cycle-to-Date 260.00		Date of Receipt <table border="1"> <tr> <td>MM</td> <td>DD</td> <td>YYYY</td> </tr> <tr> <td>12</td> <td>20</td> <td>2013</td> </tr> </table> Transaction ID : SA11AI.5005 Amount of Each Receipt this Period <table border="1"> <tr> <td>260.00</td> </tr> </table>	MM	DD	YYYY	12	20	2013	260.00
MM	DD	YYYY							
12	20	2013							
260.00									
B. Full Name (Last, First, Middle Initial) SONSTEBY M GLENN Mailing Address 14485 WACO ST. NW City RAMSEY State MN Zip Code 55303 FEC ID number of contributing federal political committee. C Name of Employer SLIMS AUTO REPAIR Occupation OWNER Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify) Election Cycle-to-Date 1000.00		Date of Receipt <table border="1"> <tr> <td>MM</td> <td>DD</td> <td>YYYY</td> </tr> <tr> <td>11</td> <td>22</td> <td>2013</td> </tr> </table> Transaction ID : SA11AI.4982 Amount of Each Receipt this Period <table border="1"> <tr> <td>1000.00</td> </tr> </table>	MM	DD	YYYY	11	22	2013	1000.00
MM	DD	YYYY							
11	22	2013							
1000.00									
C. Full Name (Last, First, Middle Initial) JAY M GREENBERG Mailing Address 1227 S PARK ST City REDWING State MN Zip Code 55066 FEC ID number of contributing federal political committee. C Name of Employer REDWING CHIROPRACTIC Occupation CHIROPRACTOR Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify) Election Cycle-to-Date 650.00		Date of Receipt <table border="1"> <tr> <td>MM</td> <td>DD</td> <td>YYYY</td> </tr> <tr> <td>10</td> <td>07</td> <td>2013</td> </tr> </table> Transaction ID : SA11AI.5039 Amount of Each Receipt this Period <table border="1"> <tr> <td>150.00</td> </tr> </table>	MM	DD	YYYY	10	07	2013	150.00
MM	DD	YYYY							
10	07	2013							
150.00									
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number only)		<table border="1"> <tr> <td>1410.00</td> </tr> </table>	1410.00						
1410.00									

14020111335

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 OF 34
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

Full Name (Last, First, Middle Initial) SIRAK HAILU		Date of Receipt MM / DD / YYYY 12 / 23 / 2013	
Mailing Address 78 10TH ST E UNIT 2708		Transaction ID : SA11AI.4995	
City SAINT PAUL	State MN	Zip Code 55101	
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00		
Name of Employer NB CHIROPRACTIC CLINIC	Occupation		
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) KYLE HAMS		Date of Receipt MM / DD / YYYY 12 / 11 / 2013	
Mailing Address 19661 SALMONSON RIVER RD		Transaction ID : SA11AI.5092	
City MORA	State MN	Zip Code 55051	
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 400.00		
Name of Employer SELF	Occupation D.C.		
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)	Election Cycle-to-Date 400.00		

Full Name (Last, First, Middle Initial) DENNIS HANSON		Date of Receipt MM / DD / YYYY 12 / 19 / 2013	
Mailing Address 306 NORTH MILL ST PO BOX 555		Transaction ID : SA11AI.5093	
City FERTILE	State MN	Zip Code 56540	
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 260.00		
Name of Employer HANSON CHIRO	Occupation		
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)	Election Cycle-to-Date 260.00		

SUBTOTAL of Receipts This Page (optional).....		910.00	
TOTAL This Period (last page this line number only).....			

14020111336

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 34
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

Full Name (Last, First, Middle Initial)
DOUGLAS G HARDEN

Mailing Address **1355 Geneva Ave N**
Ste 100

City **Oakdale** State **MN** Zip Code **55128**

FEC ID number of contributing
federal political committee.

C

Name of Employer
CHIROPRACTOR NEWPORT

Occupation
CHIROPRACTOR

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

12 / 30 / 2013

Transaction ID : **SA11AI.5008**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)
ORMELLE HEDBLAD

Mailing Address **3841 STONEHAVEN CT**

City **ANOKA** State **MN** Zip Code **55303**

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

10 / 01 / 2013

Transaction ID : **SA11AI.5032**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)
BRIAN HEDMAN

Mailing Address **2027 4TH AVE**

City **WINDOM** State **MN** Zip Code **56101**

FEC ID number of contributing
federal political committee.

C

Name of Employer
HEDMAN CHIRO CENTER

Occupation
DR.

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

260.00

Date of Receipt

12 / 31 / 2013

Transaction ID : **SA11AI.5111**

Amount of Each Receipt this Period

260.00

VANCO

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

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

1010.00

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)
ABELER4SENATE

Full Name (Last, First, Middle Initial)
KATHLEEN M HIGGINS

A. Mailing Address **7801 GLORIA CIRCLE**

City State Zip Code
MOUNDS VIEW MN 55112

FEC ID number of contributing
federal political committee.

C

Name of Employer
ALL WAYS HEALTH

Occupation
CHIROPRACTOR

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

MM / DD / YYYY
12 / 04 / 2013

Transaction ID : **SA11AI.5003**

Amount of Each Receipt this Period

250.00

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

Mailing Address **5219 OJIBWA RD**

City State Zip Code
BRAINERD MN 56401

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

325.00

Date of Receipt

MM / DD / YYYY
12 / 07 / 2013

Transaction ID : **SA11AI.5006**

Amount of Each Receipt this Period

300.00

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

Mailing Address **1325 PIKE LAKE RD**

City State Zip Code
NEW BRIGHTON MN 55113

FEC ID number of contributing
federal political committee.

C

Name of Employer
ADVANCED INJURY REHABILITATION

Occupation
CHIROPRACTOR

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

MM / DD / YYYY
12 / 14 / 2013

Transaction ID : **SA11AI.5021**

Amount of Each Receipt this Period

150.00

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

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

700.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 OF 34
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

A. Full Name (Last, First, Middle Initial)
CHRIS JOHNSON

Mailing Address **1575 WEST 7TH ST**

City **SAINT PAUL** State **MN** Zip Code **55102**

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

Name of Employer **SELF** Occupation **OWNER**

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

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
12 / 27 / 2013

Transaction ID : **SA11AI.5096**

Amount of Each Receipt this Period
250.00
VANCO

B. Full Name (Last, First, Middle Initial)
ANDREW KOLLAR III

Mailing Address **1443 RICE CREEK RD NE**

City **FRIDLEY** State **MN** Zip Code **55432**

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

Name of Employer **UNIVERSAL CHIROPRACTIC HEALTH** Occupation

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

Election Cycle-to-Date **500.00**

Date of Receipt
MM / DD / YYYY
12 / 15 / 2013

Transaction ID : **SA11AI.4996**

Amount of Each Receipt this Period
500.00

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

Mailing Address **1089 A ROBERT ST**

City **W ST PAUL** State **MN** Zip Code **55118**

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

Name of Employer **W ST PAUL CHIRO** Occupation **OWNER**

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

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
12 / 27 / 2013

Transaction ID : **SA11AI.5097**

Amount of Each Receipt this Period
250.00
VANCO

SUBTOTAL of Receipts This Page (optional).....
1000.00

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

14020111339

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)
ABELER4SENATE

Full Name (Last, First, Middle Initial)
JEFFREY M LAVELL

Mailing Address **2900 COSTA LN**

City State Zip Code
LITTLE CANADA MN 55117

FEC ID number of contributing
federal political committee.

C

Name of Employer
SPECIFIC FAMILY CHIRO & WELLNE

Occupation
CHIROPRACTOR

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

10 / 03 / 2013

Transaction ID : **SA11AI.5037**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)
JEFF LINDOO

Mailing Address **2107 RIDGEWOOD DR NW**

City State Zip Code
ALEXANDRIA MN 56308

FEC ID number of contributing
federal political committee.

C

Name of Employer
THRIFTY WHITE PHARMACY

Occupation
PHARMACIST

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

10 / 20 / 2013

Transaction ID : **SA11AI.5051**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)
LINDA MARQUARDT

Mailing Address **1602 ASH STREET**

City State Zip Code
ALEXANDRIA MN 56308

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
SELF EMPLOYED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

799.00

Date of Receipt

11 / 01 / 2013

Transaction ID : **SA11AI.5188**

Amount of Each Receipt this Period

529.00

In-kind -

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

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

1029.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 OF 34
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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

A. Full Name (Last, First, Middle Initial) LINDA MARQUARDT		Date of Receipt MM DD YYYY 12 / 01 / 2013	
Mailing Address 1602 ASH STREET		Transaction ID : SA11AI.5190	
City ALEXANDRIA	State MN	Zip Code 56308	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 605.00	
Name of Employer 		Occupation SELF EMPLOYED	
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)		Election Cycle-to-Date 1404.00	
B. Full Name (Last, First, Middle Initial) MICHAEL MARQUARDT		Date of Receipt MM DD YYYY 10 / 01 / 2013	
Mailing Address 1602 ASH STREET		Transaction ID : SA11AI.5186	
City ALEXANDRIA	State MN	Zip Code 56308	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 529.00	
Name of Employer 		Occupation SELF EMPLOYED	
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)		Election Cycle-to-Date 1125.09	
C. Full Name (Last, First, Middle Initial) JAY MCLAREN		Date of Receipt MM DD YYYY 11 / 25 / 2013	
Mailing Address 515 HARBOR COURT		Transaction ID : SA11AI.4950	
City SHOREVIEW	State MN	Zip Code 55126	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00	
Name of Employer MEDICA		Occupation LOBBYIST	
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)		Election Cycle-to-Date 225.00	
SUBTOTAL of Receipts This Page (optional).....		1259.00	
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
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☒ 11a ☐ 11b ☐ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)
ABELER4SENATE

Full Name (Last, First, Middle Initial)
LUCIA MCLAREN

Mailing Address **515 HARBOR COURT**

City State Zip Code
SHOREVIEW MN 55126

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
HOMEMAKER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

225.00

Date of Receipt

11 / 25 / 2013

Transaction ID : **SA11AI.4951**

Amount of Each Receipt this Period

125.00

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

QUIRK J MICHAEL

Mailing Address **1406 E. 40TH ST.
SUITE 1**

City State Zip Code
HIBBING MN 55746

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

QUIRK CHIROPRACTIC

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

11 / 09 / 2013

Transaction ID : **SA11AI.4960**

Amount of Each Receipt this Period

250.00

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

ALAN NEUMANN

Mailing Address **2380 59TH ST**

City State Zip Code
BUFFALO MN 55313

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

CORNER MEDICAL

OWNER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

12 / 28 / 2013

Transaction ID : **SA11AI.5098**

Amount of Each Receipt this Period

2500.00

VANCO

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

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

2875.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)
ABELER4SENATE

Full Name (Last, First, Middle Initial)
BARNES M PATRICK

Mailing Address **4470 HARBOR PLACE DRIVE**

City State Zip Code
SHOREVIEW MN 55126

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
CHIROPRACTOR

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

11 / 04 / 2013

Transaction ID : **SA11AI.4974**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)
DAVID P PHILIPS

Mailing Address **8050 PENN AVE S #525**

City State Zip Code
BLOOMINGTON MN

FEC ID number of contributing
federal political committee.

C

Name of Employer
VIPER CERVICAL CHIROPRACTIC

Occupation
VC CHIROPRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

286.00

Date of Receipt

10 / 01 / 2013

Transaction ID : **SA11AI.5055**

Amount of Each Receipt this Period

286.00

Full Name (Last, First, Middle Initial)
NATHAN SAJ

Mailing Address **1610 HWY 52**

City State Zip Code
ROCHESTER MN 55901

FEC ID number of contributing
federal political committee.

C

Name of Employer
ABSOLUTE CHIROPRACTIC

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

260.00

Date of Receipt

11 / 04 / 2013

Transaction ID : **SA11AI.4961**

Amount of Each Receipt this Period

260.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

796.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)
ABELER4SENATE

Full Name (Last, First, Middle Initial)
STEVE SCHAMS

Mailing Address **306 MAIN ST**
STE 1

City State Zip Code
LA CRESCENT MN 55947

FEC ID number of contributing
federal political committee.

C

Name of Employer
SCHAMS CHIROPRACTIC

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

260.00

Date of Receipt

11 / 04 / 2013

Transaction ID : **SA11AI.4969**

Amount of Each Receipt this Period

260.00

Full Name (Last, First, Middle Initial)

B. KEITH R SCHLEPER

Mailing Address **39 8TH AVE N**

City State Zip Code
WAITE PARK MN 56387

FEC ID number of contributing
federal political committee.

C

Name of Employer
CHIROPRACTIC CONNECTION

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

11 / 05 / 2013

Transaction ID : **SA11AI.4962**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. BRIAN SCHMITZ

Mailing Address **2837 209TH LANE**

City State Zip Code
OAK GROVE MN 55011

FEC ID number of contributing
federal political committee.

C

Name of Employer
RUM RIVER CHIRO

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

260.00

Date of Receipt

12 / 03 / 2013

Transaction ID : **SA11AI.5090**

Amount of Each Receipt this Period

260.00

VANCO

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

770.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

Full Name (Last, First, Middle Initial) CHARLES STRAUMAN Mailing Address 17238 MILLWOOD RD City State Zip Code MINNETONKA MN 55345 FEC ID number of contributing federal political committee. C Name of Employer Occupation STRAUMAN HOLISTIC CHIROPRACTIC CHIROPRACTOR Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify) Election Cycle-to-Date 250.00		Date of Receipt MM / DD / YYYY 11 / 09 / 2013 Transaction ID : SA11AI.4990 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) THOMAS WILSON Mailing Address 1353 BURROUGHS RD City State Zip Code DETROIT LAKES MN 56591 FEC ID number of contributing federal political committee. C Name of Employer Occupation SELF D.C. Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify) Election Cycle-to-Date 250.00		Date of Receipt MM / DD / YYYY 12 / 30 / 2013 Transaction ID : SA11AI.5107 Amount of Each Receipt this Period 250.00 VANCO
Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: ☐ Primary ☐ General ☐ Other (specify) Election Cycle-to-Date		Date of Receipt MM / DD / YYYY Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....		500.00 19009.00

14020111345

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

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

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

Full Name (Last, First, Middle Initial)

A. BARB ABELER

Mailing Address 600 EAST MAIN STREET

City ANOKA State MN Zip Code 55303

Purpose of Disbursement
REIMBURSE FOR GAS, COSTCO, KWIK TRIP, NORTH COUNTRY AND
CASEY'S

Candidate Name
ABELER4SENATE

Office Sought: ☐ House ☐ Senate ☐ President

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

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 16 / 2013

Amount of Each Disbursement this Period

1766.28

Transaction ID : SB17.5161

B. BARB ABELER

Mailing Address 600 EAST MAIN STREET

City ANOKA State MN Zip Code 55303

Purpose of Disbursement
REIMBURSE GAS

Candidate Name
ABELER4SENATE

Office Sought: ☐ House ☐ Senate ☐ President

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

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 30 / 2013

Amount of Each Disbursement this Period

405.38

Transaction ID : SB17.5172

c. Rep. JAMES J ABELER

Mailing Address 600 EAST MAIN STREET

City ANOKA State MN Zip Code 55303

Purpose of Disbursement
REIMBURSE FOR APPLE HEADPHONES FROM RADIOSHACK,
PEGBORD-MENARDS, BELKEN 30P MDS-SEARS PHOTOS-COSTCO

Candidate Name
ABELER4SENATE

Office Sought: ☐ House ☐ Senate ☐ President

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

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 17 / 2013

Amount of Each Disbursement this Period

81.32

Transaction ID : SB17.5162

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

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

2252.98

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

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

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
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NAME OF COMMITTEE (In Full)

ABELER4SENATE

Full Name (Last, First, Middle Initial)

A. Rep. JAMES J ABELER

Mailing Address 600 EAST MAIN STREET

City ANOKA State MN Zip Code 55303

Purpose of Disbursement
REIMBURSE CAMPAIGN BOOK AMAZON

006

Category/
Type

Candidate Name
Rep. JAMES J ABELER

Office Sought: ☐ House ☒ Senate ☐ President

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

State: MN District:

Date of Disbursement

MM / DD / YYYY
12 / 17 / 2013

Amount of Each Disbursement this Period

18.83

Transaction ID : SB17.5163

B. Rep. JAMES J ABELER

Mailing Address 600 EAST MAIN STREET

City ANOKA State MN Zip Code 55303

Purpose of Disbursement
REIMBURSE FOOD FOR VOLUNTEERS

007

Category/
Type

Candidate Name
ABELER4SENATE

Office Sought: ☐ House ☐ Senate ☐ President

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

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 17 / 2013

Amount of Each Disbursement this Period

88.65

Transaction ID : SB17.5164

C. ABELER CHIROPRACTIC

Mailing Address 300 E MAIN ST

City ANOKA State MN Zip Code 55303

Purpose of Disbursement
REIMBURSE OFFICE SERVICES

001

Category/
Type

Candidate Name
ABELER4SENATE

Office Sought: ☐ House ☐ Senate ☐ President

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

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 26 / 2013

Amount of Each Disbursement this Period

210.00

Transaction ID : SB17.5176

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

317.48

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

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

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)
ABELER4SENATE

Full Name (Last, First, Middle Initial)

A. ABELER PROPERTIES

Mailing Address 600 E MAIN ST

City ANOKA State MN Zip Code 55303

Purpose of Disbursement
OFFICE SPACE RENTAL OLD POST OFFICE

Candidate Name
ABELER4SENATE

Office Sought: ☐ House ☐ Senate ☐ President

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

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 01 / 2013

Amount of Each Disbursement this Period

3400.00

Transaction ID : SB17.5143

B. Dave Abeler

Mailing Address 3800 Mississippi Dr NW

City Coon Rapids State MN Zip Code

Purpose of Disbursement
Campaign Design Work

Candidate Name
ABELER4SENATE

Office Sought: ☐ House ☐ Senate ☐ President

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

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 04 / 2013

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.5178

C. Dave Abeler

Mailing Address 3800 Mississippi Dr NW

City Coon Rapids State MN Zip Code

Purpose of Disbursement
Campaign Design Work

Candidate Name
ABELER4SENATE

Office Sought: ☐ House ☐ Senate ☐ President

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

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 19 / 2013

Amount of Each Disbursement this Period

1059.00

Transaction ID : SB17.5179

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

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

5459.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
ABELER4SENATE

Full Name (Last, First, Middle Initial)

A. ENDLESS SKY PRODUCTIONS

Mailing Address 2751 HENNEPIN AVE S #32

City State Zip Code
MINNEAPOLIS MN 55408

Purpose of Disbursement
MEDIA SERVICES, VIDEO

Candidate Name
ABELER4SENATE

Office Sought: ☐ House ☐ Senate ☐ President

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

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 18 / 2013

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.5148

B. ENDLESS SKY PRODUCTIONS

Mailing Address 2751 HENNEPIN AVE S #32

City State Zip Code
MINNEAPOLIS MN 55408

Purpose of Disbursement
MEDIA SERVICES, VIDEO, WRITING, CONSULTING

Candidate Name
ABELER4SENATE

Office Sought: ☐ House ☐ Senate ☐ President

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

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 25 / 2013

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.5149

C. ENDLESS SKY PRODUCTIONS

Mailing Address 2751 HENNEPIN AVE S #32

City State Zip Code
MINNEAPOLIS MN 55408

Purpose of Disbursement
MEDIA SERVICES

Candidate Name
ABELER4SENATE

Office Sought: ☐ House ☐ Senate ☐ President

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

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 05 / 2013

Amount of Each Disbursement this Period

869.00

Transaction ID : SB17.5150

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

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

1869.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)
ABELER4SENATE

Full Name (Last, First, Middle Initial)

A. ENDLESS SKY PRODUCTIONS

Mailing Address 2751 HENNEPIN AVE S #32

City MINNEAPOLIS State MN Zip Code 55408

Purpose of Disbursement
MEDIA SERVICES

Candidate Name
ABELER4SENATE

Office Sought: ☐ House ☐ Senate ☐ President

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

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 10 / 2013

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.5151

B. ENDLESS SKY PRODUCTIONS

Mailing Address 2751 HENNEPIN AVE S #32

City MINNEAPOLIS State MN Zip Code 55408

Purpose of Disbursement
MEDIA SERVICES

Candidate Name
ABELER4SENATE

Office Sought: ☐ House ☐ Senate ☐ President

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

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 17 / 2013

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.5152

C. ENDLESS SKY PRODUCTIONS

Mailing Address 2751 HENNEPIN AVE S #32

City MINNEAPOLIS State MN Zip Code 55408

Purpose of Disbursement
MEDIA SERVICES

Candidate Name
ABELER4SENATE

Office Sought: ☐ House ☐ Senate ☐ President

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

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 23 / 2013

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.5153

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

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

2000.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

ABELER4SENATE

Full Name (Last, First, Middle Initial)

A. ERIC MARQUARDT

Mailing Address 8944 DYRUD LN

City State Zip Code
OSAKIS MN 56360

Purpose of Disbursement
REIMBURSE FOR PRINTING FROM DO ALL

006

Category/
Type

Candidate Name
ABELER4SENATE

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 04 / 2013

Amount of Each Disbursement this Period

271.77

Transaction ID : SB17.5144

B. ERIC MARQUARDT

Mailing Address 8944 DYRUD LN

City State Zip Code
OSAKIS MN 56360

Purpose of Disbursement
REIMBURSE USR STEREO/HEADSET

001

Category/
Type

Candidate Name
ABELER4SENATE

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 03 / 2013

Amount of Each Disbursement this Period

174.75

Transaction ID : SB17.5146

C. ERIC MARQUARDT

Mailing Address 8944 DYRUD LN

City State Zip Code
OSAKIS MN 56360

Purpose of Disbursement
REIMBURSE FOR COFFEE MAKER & TEA-WALGREENS

001

Category/
Type

Candidate Name
ABELER4SENATE

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 23 / 2013

Amount of Each Disbursement this Period

59.56

Transaction ID : SB17.5168

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

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

506.08

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

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

Full Name (Last, First, Middle Initial)
A. LINDA MARQUARDT

Mailing Address 1602 ASH STREET

City ALEXANDRIA State MN Zip Code 56308

Purpose of Disbursement
In-kind -

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President

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

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 01 / 2013

Amount of Each Disbursement this Period

529.00

Transaction ID : SB17.5189

B. LINDA MARQUARDT

Mailing Address 1602 ASH STREET

City ALEXANDRIA State MN Zip Code 56308

Purpose of Disbursement
In-kind -

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President

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

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2013

Amount of Each Disbursement this Period

605.00

Transaction ID : SB17.5191

C. MICHAEL MARQUARDT

Mailing Address 1602 ASH STREET

City ALEXANDRIA State MN Zip Code 56308

Purpose of Disbursement
In-kind -

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President

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

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 01 / 2013

Amount of Each Disbursement this Period

529.00

Transaction ID : SB17.5187

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

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

1663.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

ABELER4SENATE

Full Name (Last, First, Middle Initial)

A. PAYPAL

Mailing Address 2211 North First Street

City State Zip Code
San Jose CA 95131

Purpose of Disbursement
CREDIT CARD PROC FEES

Candidate Name
ABELER4SENATE

Office Sought: ☐ House ☐ Senate ☐ President

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

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 30 / 2013

Amount of Each Disbursement this Period

30.82

Transaction ID : SB17.5198

B. PRESTO GRAPHICS

Mailing Address 848 E River Rd

City State Zip Code
ANOKA MN 55303

Purpose of Disbursement
PRINT LETTERS, BROCHURE CARDS, BUSINESS CARDS

Candidate Name
ABELER4SENATE

Office Sought: ☐ House ☐ Senate ☐ President

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

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 24 / 2013

Amount of Each Disbursement this Period

852.57

Transaction ID : SB17.5133

C. PRESTO GRAPHICS

Mailing Address 848 E River Rd

City State Zip Code
ANOKA MN 55303

Purpose of Disbursement
PAPERSTOCK TRIMMED

Candidate Name
ABELER4SENATE

Office Sought: ☐ House ☐ Senate ☐ President

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

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 27 / 2013

Amount of Each Disbursement this Period

5.36

Transaction ID : SB17.5173

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

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

888.75

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

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NAME OF COMMITTEE (In Full)

ABELER4SENATE

Full Name (Last, First, Middle Initial)

A. PRESTO GRAPHICS

Mailing Address 848 E River Rd

City ANOKA State MN Zip Code 55303

Purpose of Disbursement
PRINTING PIN CARD

Candidate Name
ABELER4SENATE

Office Sought: ☐ House ☐ Senate ☐ President

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

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 30 / 2013

Amount of Each Disbursement this Period

236.71

Transaction ID : SB17.5171

B. REBYL SPORTS

Mailing Address 295 NORTHDAL BLVD NW

City COON RAPIDS State MN Zip Code 55448

Purpose of Disbursement
REIMBURSE FOOD COSTCO

Candidate Name
ABELER4SENATE

Office Sought: ☐ House ☐ Senate ☐ President

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

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 21 / 2013

Amount of Each Disbursement this Period

351.50

Transaction ID : SB17.5138

C. REBYL SPORTS

Mailing Address 295 NORTHDAL BLVD NW

City COON RAPIDS State MN Zip Code 55448

Purpose of Disbursement
110 TEE PRINTED SHIRTS

Candidate Name
ABELER4SENATE

Office Sought: ☐ House ☐ Senate ☐ President

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

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 30 / 2013

Amount of Each Disbursement this Period

674.98

Transaction ID : SB17.5170

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

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

1263.19

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

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NAME OF COMMITTEE (In Full)

ABELER4SENATE

Full Name (Last, First, Middle Initial)

A. SPEEDPRO IMAGING

Mailing Address 8090 UNIVERSITY AVE NE

City State Zip Code
FRIDLEY MN 55432

Purpose of Disbursement
BANNER PRODUCTION

Candidate Name

006
Category/
Type

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

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 08 / 2013

Amount of Each Disbursement this Period

171.40

Transaction ID : SB17.5113

B. WARD & CO.

Mailing Address 1918 1ST AVE, ANOKA

City State Zip Code
ANOKA MN 55303

Purpose of Disbursement
REIMBURSE FOR OFFICE SERVICES

Candidate Name

ABELER4SENATE

001
Category/
Type

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

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 26 / 2013

Amount of Each Disbursement this Period

282.00

Transaction ID : SB17.5169

C. WORLD DATA CORPORATION

Mailing Address 8944 DYRUD LANE

City State Zip Code
OSAKIS MN 56360

Purpose of Disbursement
INVOICE 152

Candidate Name

ABELER4SENATE

001
Category/
Type

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

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2013

Amount of Each Disbursement this Period

1170.00

Transaction ID : SB17.5112

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

1623.40

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

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

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NAME OF COMMITTEE (In Full)

ABELER4SENATE

Full Name (Last, First, Middle Initial)

A. WORLD DATA CORPORATION

Mailing Address 8944 DYRUD LANE

City OSAKIS State MN Zip Code 56360

Purpose of Disbursement
INVOICE 153

Candidate Name
ABELER4SENATE

Office Sought: ☐ House ☐ Senate ☐ President

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

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 11 / 2013

Amount of Each Disbursement this Period

1205.00

Transaction ID : SB17.5114

Full Name (Last, First, Middle Initial)

B. WORLD DATA CORPORATION

Mailing Address 8944 DYRUD LANE

City OSAKIS State MN Zip Code 56360

Purpose of Disbursement
INVOICES 154, 155, 156

Candidate Name
ABELER4SENATE

Office Sought: ☐ House ☐ Senate ☐ President

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

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 18 / 2013

Amount of Each Disbursement this Period

1177.91

Transaction ID : SB17.5115

Full Name (Last, First, Middle Initial)

C. WORLD DATA CORPORATION

Mailing Address 8944 DYRUD LANE

City OSAKIS State MN Zip Code 56360

Purpose of Disbursement
INVOICES 157, 158

Candidate Name
ABELER4SENATE

Office Sought: ☐ House ☐ Senate ☐ President

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

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 28 / 2013

Amount of Each Disbursement this Period

1370.88

Transaction ID : SB17.5116

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

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

3753.79

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

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NAME OF COMMITTEE (In Full)

ABELER4SENATE

Full Name (Last, First, Middle Initial)

A. WORLD DATA CORPORATION

Mailing Address 8944 DYRUD LANE

City OSAKIS State MN Zip Code 56360

Purpose of Disbursement
INVOICE 159

001
Category/
Type

Candidate Name
ABELER4SENATE

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 04 / 2013

Amount of Each Disbursement this Period

1401.50

Transaction ID : SB17.5118

Full Name (Last, First, Middle Initial)

B. WORLD DATA CORPORATION

Mailing Address 8944 DYRUD LANE

City OSAKIS State MN Zip Code 56360

Purpose of Disbursement
INVOICE 160

001
Category/
Type

Candidate Name
ABELER4SENATE

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 04 / 2013

Amount of Each Disbursement this Period

520.00

Transaction ID : SB17.5119

Full Name (Last, First, Middle Initial)

C. WORLD DATA CORPORATION

Mailing Address 8944 DYRUD LANE

City OSAKIS State MN Zip Code 56360

Purpose of Disbursement
INVOICE 161

001
Category/
Type

Candidate Name
ABELER4SENATE

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 12 / 2013

Amount of Each Disbursement this Period

1104.50

Transaction ID : SB17.5120

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

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

3026.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

ABELER4SENATE

Full Name (Last, First, Middle Initial)

A. WORLD DATA CORPORATION

Mailing Address 8944 DYRUD LANE

City OSAKIS State MN Zip Code 56360

Purpose of Disbursement
INVOICE 162

Candidate Name
ABELER4SENATE

Office Sought: ☐ House ☐ Senate ☐ President

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

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 18 / 2013

Amount of Each Disbursement this Period

1176.00

Transaction ID : SB17.5122

B. WORLD DATA CORPORATION

Mailing Address 8944 DYRUD LANE

City OSAKIS State MN Zip Code 56360

Purpose of Disbursement
REIMBURSEMENT FOR OFFICEMAX PRINTER

Candidate Name
ABELER4SENATE

Office Sought: ☐ House ☐ Senate ☐ President

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

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 18 / 2013

Amount of Each Disbursement this Period

207.80

Transaction ID : SB17.5125

C. WORLD DATA CORPORATION

Mailing Address 8944 DYRUD LANE

City OSAKIS State MN Zip Code 56360

Purpose of Disbursement
REIMBURSE ST JAMES FUNDRAISER

Candidate Name
ABELER4SENATE

Office Sought: ☐ House ☐ Senate ☐ President

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

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 22 / 2013

Amount of Each Disbursement this Period

30.00

Transaction ID : SB17.5126

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

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

1413.80

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

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

Full Name (Last, First, Middle Initial)

A. WORLD DATA CORPORATION

Mailing Address 8944 DYRUD LANE

City OSAKIS State MN Zip Code 56360

Purpose of Disbursement
INVOICE 163

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 22 / 2013

Amount of Each Disbursement this Period

2626.80

Transaction ID : SB17.5127

001

Category/
Type

Full Name (Last, First, Middle Initial)

B. WORLD DATA CORPORATION

Mailing Address 8944 DYRUD LANE

City OSAKIS State MN Zip Code 56360

Purpose of Disbursement
INVOICE 165

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 03 / 2013

Amount of Each Disbursement this Period

1484.90

Transaction ID : SB17.5128

001

Category/
Type

Full Name (Last, First, Middle Initial)

C. WORLD DATA CORPORATION

Mailing Address 8944 DYRUD LANE

City OSAKIS State MN Zip Code 56360

Purpose of Disbursement
INVOICE 166 (COMM)

Candidate Name

ABELER4SENATE

Office Sought: ☐ House ☐ Senate ☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 03 / 2013

Amount of Each Disbursement this Period

685.00

Transaction ID : SB17.5129

001

Category/
Type

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

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

4796.70

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

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NAME OF COMMITTEE (In Full)

ABELER4SENATE

Full Name (Last, First, Middle Initial)

A. WORLD DATA CORPORATION

Mailing Address 8944 DYRUD LANE

City OSAKIS State MN Zip Code 56360

Purpose of Disbursement
INVOICE 167

Candidate Name
ABELER4SENATE

Office Sought: ☐ House ☐ Senate ☐ President

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

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 10 / 2013

Amount of Each Disbursement this Period

1600.00

Transaction ID : SB17.5130

B. WORLD DATA CORPORATION

Mailing Address 8944 DYRUD LANE

City OSAKIS State MN Zip Code 56360

Purpose of Disbursement
INVOICE 168

Candidate Name
ABELER4SENATE

Office Sought: ☐ House ☐ Senate ☐ President

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

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 17 / 2013

Amount of Each Disbursement this Period

1948.30

Transaction ID : SB17.5131

C. WORLD DATA CORPORATION

Mailing Address 8944 DYRUD LANE

City OSAKIS State MN Zip Code 56360

Purpose of Disbursement
INVOICE 169

Candidate Name
ABELER4SENATE

Office Sought: ☐ House ☐ Senate ☐ President

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

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 23 / 2013

Amount of Each Disbursement this Period

1754.50

Transaction ID : SB17.5132

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

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

5302.80

36135.97

INSPECTION
Senate

United States Senate
Post Office

INSPECTION

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AOKA, MN 55303



TO SEC. of SENATE

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NANCY ERICKSON
SECRETARY

DANA K. MCCALLUM
SUPERINTENDENT
HART SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-7116
PHONE: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

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