

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.
MNCD6 GOP Federal Committee

ADDRESS (number and street)
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

3. IS THIS REPORT NEW (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)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / through / /

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 Andrew Allen Aplikowski

Signature of Treasurer Andrew Allen Aplikowski [Electronically Filed] Date / /

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

MNCD6 GOP Federal Committee

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="5478.17"/>	<input type="text" value="5478.17"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="10423.31"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="24496.78"/>	<input type="text" value="30191.78"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="34920.09"/>	<input type="text" value="35669.95"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="14813.13"/>	<input type="text" value="15562.99"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="20106.96"/>	<input type="text" value="20106.96"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

MNCD6 GOP Federal Committee

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	2000.00	2000.00
(ii) Unitemized	20071.78	25766.78
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	22071.78	27766.78
(b) Political Party Committees	1025.00	1025.00
(c) Other Political Committees (such as PACs).....	1400.00	1400.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	24496.78	30191.78
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	24496.78	30191.78
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	24496.78	30191.78

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	13913.13	14662.99
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	13913.13	14662.99
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. 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).....	500.00	500.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	500.00	500.00
29. Other Disbursements	400.00	400.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	14813.13	15562.99
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	14813.13	15562.99

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	24496.78	30191.78
34. Total Contribution Refunds (from Line 28(d))	500.00	500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	23996.78	29691.78
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	13913.13	14662.99
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	13913.13	14662.99

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

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

FOR LINE NUMBER: PAGE 6 OF 18
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
MNCD6 GOP Federal Committee

A. Tani Austin
Full Name (Last, First, Middle Initial)
Mailing Address 5563 Rustic Manor Dr.
City Brownsville State TX Zip Code 78526
FEC ID number of contributing federal political committee. **C**
Name of Employer Starkey Hearing Occupation Executive
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 07 / 2014
Transaction ID : SA11AI.5695
Amount of Each Receipt this Period
2000.00
Donation

B.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
Amount of Each Receipt this Period

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	2000.00

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

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

FOR LINE NUMBER: PAGE 7 OF 18
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MNCD6 GOP Federal Committee

Full Name (Last, First, Middle Initial)
A. REPUBLICAN PARTY OF MINNESOTA - FEDERAL

Mailing Address 2200 E FRANKLIN AVENUE
 SUITE 201

City State Zip Code
 MINNEAPOLIS MN 55404

FEC ID number of contributing federal political committee. **C** C00001313

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 10 / 2014

Transaction ID : SA11B.6011

Amount of Each Receipt this Period
 1000.00

Rent received for office

Full Name (Last, First, Middle Initial)
B. Republican Seniors of Minnesota

Mailing Address 2200 E. Franklin Ave.

City State Zip Code
 Minneapolis MN 55404

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 25.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 14 / 2014

Transaction ID : SA11B.6013

Amount of Each Receipt this Period
 25.00

Vendor table at convention

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) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	1025.00
TOTAL This Period (last page this line number only).....▶	1025.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 18
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MNCD6 GOP Federal Committee

Full Name (Last, First, Middle Initial) A. ABELER4SENATE		Date of Receipt MM / DD / YYYY 04 / 14 / 2014 Transaction ID : SA11C.6002
Mailing Address 600 EAST MAIN STREET		Amount of Each Receipt this Period 25.00
City ANOKA	State MN	Zip Code 55303
FEC ID number of contributing federal political committee.	C C00546630	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25.00	

Full Name (Last, First, Middle Initial) B. BACHMANN FOR CONGRESS		Date of Receipt MM / DD / YYYY 06 / 10 / 2014 Transaction ID : SA11C.6008
Mailing Address 610 S. BOULEVARD		Amount of Each Receipt this Period 1000.00
City TAMPA	State FL	Zip Code 33606
FEC ID number of contributing federal political committee.	C C00410118	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. CHRIS DAHLBERG FOR US SENATE		Date of Receipt MM / DD / YYYY 05 / 27 / 2014 Transaction ID : SA11C.5998
Mailing Address PMB #119 4602 GRAND AVE SUITE 500		Amount of Each Receipt this Period 25.00
City DULUTH	State MN	Zip Code 55807
FEC ID number of contributing federal political committee.	C C00550459	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25.00	

SUBTOTAL of Receipts This Page (optional).....▶	1050.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 9 OF 18
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MNCD6 GOP Federal Committee

Full Name (Last, First, Middle Initial)
A. JULIANNE MN INC

Mailing Address **PO BOX 173**

City **CHASKA** State **MN** Zip Code **55318**

FEC ID number of contributing federal political committee. **C C00548446**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **25.00**

Date of Receipt
04 / 14 / 2014
Transaction ID : SA11C.6005

Amount of Each Receipt this Period
25.00

Candidate table at convention

Full Name (Last, First, Middle Initial)
B. Kiffmeyer for Senate

Mailing Address **16120 - 201st Ave. NW**

City **Big Lake** State **MN** Zip Code **55309**

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **100.00**

Date of Receipt
04 / 02 / 2014
Transaction ID : SA11C.6031

Amount of Each Receipt this Period
100.00

2014 Convention Fees

Full Name (Last, First, Middle Initial)
C. MCFADDEN FOR SENATE

Mailing Address **PO BOX 4039**

City **SAINT PAUL** State **MN** Zip Code **55104**

FEC ID number of contributing federal political committee. **C C00545921**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **25.00**

Date of Receipt
04 / 14 / 2014
Transaction ID : SA11C.6006

Amount of Each Receipt this Period
25.00

Candidate table at convention

SUBTOTAL of Receipts This Page (optional)..... ▶ **150.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 18
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MNCD6 GOP Federal Committee

A. MCFADDEN FOR SENATE
Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 4039

City SAINT PAUL	State MN	Zip Code 55104
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FEC ID number of contributing federal political committee. **C** C00545921

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
75.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 06 / 2014
Transaction ID : SA11C.5999

Amount of Each Receipt this Period
50.00

Table at Convention

B. Minnesota Voters Alliance
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 4602

City Lakeville	State MN	Zip Code 55104
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 14 / 2014
Transaction ID : SA11C.6015

Amount of Each Receipt this Period
25.00

Vendor table at convention

C. Thompson for Governor
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 370

City Lakeville	State MN	Zip Code 55044
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 14 / 2014
Transaction ID : SA11C.6000

Amount of Each Receipt this Period
25.00

Candidate table at convention

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 11 OF 18
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MNCD6 GOP Federal Committee

A. Full Name (Last, First, Middle Initial)
Thompson for Governor

Mailing Address **PO Box 370**

City **Lakeville** State **MN** Zip Code **55044**

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **125.00**

Date of Receipt
04 / 14 / 2014

Transaction ID : SA11C.6007

Amount of Each Receipt this Period
100.00

Table at convention

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	1400.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MNCD6 GOP Federal Committee

Full Name (Last, First, Middle Initial)

A. Andrew Allen Aplikowski

Mailing Address 13445 Uplander St. NW

City Andover State MN Zip Code 55304

Purpose of Disbursement
Supplies for office

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 27 / 2014

Transaction ID : SB21B.4593

Amount of Each Disbursement this Period

76.44

Full Name (Last, First, Middle Initial)

B. Coburns Catering

Mailing Address 110 First Street S

City Sauk Rapids State MN Zip Code 56379

Purpose of Disbursement
Food & Supplies for convention

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 16 / 2014

Transaction ID : SB21B.4570

Amount of Each Disbursement this Period

2121.17

Full Name (Last, First, Middle Initial)

C. Comcast

Mailing Address 1701 John F. Kennedy Blvd.

City Philadelphia State MN Zip Code 19103

Purpose of Disbursement
Internet for office

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 23 / 2014

Transaction ID : SB21B.4606

Amount of Each Disbursement this Period

129.65

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

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

2327.26

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MNCD6 GOP Federal Committee

Full Name (Last, First, Middle Initial)

A. Kerstine Herda

Mailing Address 836 - 1st Street N

City Sartell State MN Zip Code 56377

Purpose of Disbursement
Convention Supplies & Decorations

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		22		2014

Transaction ID : SB21B.4583

Amount of Each Disbursement this Period

693.94

Full Name (Last, First, Middle Initial)

B. Lakeside Homes, Inc.

Mailing Address 1200 Foss Rd.

City New Brighton State MN Zip Code 55112

Purpose of Disbursement
Printing for convention

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		21		2014

Transaction ID : SB21B.4579

Amount of Each Disbursement this Period

760.14

Full Name (Last, First, Middle Initial)

C. Mayo Civic Center

Mailing Address 30 Civic Center Drive SE

City Rochester State MN Zip Code 55904

Purpose of Disbursement
Hospitality Suite Food & Beverage State Convention

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		23		2014

Transaction ID : SB21B.4589

Amount of Each Disbursement this Period

963.47

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

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

2417.55

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MNCD6 GOP Federal Committee

Full Name (Last, First, Middle Initial)

A. MOnicello Community Education

Mailing Address 302 Washington St.

City Monticello State MN Zip Code 55362

Purpose of Disbursement
Convention Facility Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 16 / 2014

Transaction ID : **SB21B.4572**

Amount of Each Disbursement this Period

1060.10

Full Name (Last, First, Middle Initial)

B. Inc. Piryx

Mailing Address 144 - 2nd St. 1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
Online donation Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : **SB21B.4613**

Amount of Each Disbursement this Period

359.63

Full Name (Last, First, Middle Initial)

C. Matt Stevens

Mailing Address 10588 172 Lane NW

City Elk River State MN Zip Code 55330

Purpose of Disbursement
Equipment Rental

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 11 / 2014

Transaction ID : **SB21B.4564**

Amount of Each Disbursement this Period

422.16

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

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

1841.89

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MNCD6 GOP Federal Committee

Full Name (Last, First, Middle Initial)

A. US Postmaster

Mailing Address PO Box 645015

City State Zip Code
St. Paul MN 55164

Purpose of Disbursement
Postage Stamps

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 17 / 2014

Transaction ID : SB21B.4574

Amount of Each Disbursement this Period

49.00

Full Name (Last, First, Middle Initial)

B. Waterfall Development, LLC.

Mailing Address 3521 - 88th Ave. NE

City State Zip Code
Blaine MN 55014

Purpose of Disbursement
Rent

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 18 / 2014

Transaction ID : SB21B.4575

Amount of Each Disbursement this Period

1925.00

Full Name (Last, First, Middle Initial)

C. Waterfall Development, LLC.

Mailing Address 3521 - 88th Ave. NE

City State Zip Code
Blaine MN 55014

Purpose of Disbursement
Rent

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 21 / 2014

Transaction ID : SB21B.4577

Amount of Each Disbursement this Period

641.70

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

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

2615.70

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MNCD6 GOP Federal Committee

Full Name (Last, First, Middle Initial)

A. Waterfall Development, LLC.

Mailing Address 3521 - 88th Ave. NE

City Blaine State MN Zip Code 55014

Purpose of Disbursement
Rent

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	01	/	2014

Transaction ID : SB21B.4585

Amount of Each Disbursement this Period

1925.00

Full Name (Last, First, Middle Initial)

B. Waterfall Development, LLC.

Mailing Address 3521 - 88th Ave. NE

City Blaine State MN Zip Code 55014

Purpose of Disbursement
Rent

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	01	/	2014

Transaction ID : SB21B.4605

Amount of Each Disbursement this Period

1925.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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

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

3850.00

13052.40

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input checked="" type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MNCD6 GOP Federal Committee

Full Name (Last, First, Middle Initial)

A. 35th Senate District RPM

Mailing Address 14131 Junkite St. NW

City Ramsey State MN Zip Code 55303

Purpose of Disbursement
Returned Contribution Intended for State Account

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y
06 / 23 / 2014

Transaction ID : SB28C.4612

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

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

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

500.00

500.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MNCD6 GOP Federal Committee

Full Name (Last, First, Middle Initial)

A. US Bank

Mailing Address 3928 Silver Lake Rd.

City St. Anthony State MN Zip Code 55421

Purpose of Disbursement
Change for convention fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 10 / 2014

Transaction ID : SB29.6019

Amount of Each Disbursement this Period

400.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

400.00

400.00