

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. **12FE4M5**
CD4-RPM, REPUBLICAN PARTY OF MINNESOTA

ADDRESS (number and street) **403 Blair Ave**
 Check if different than previously reported. (ACC) **St Paul MN 55103**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00621185 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 / / 2023 through / / 2023

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Holmgren, Paul, , ,
Type or Print Name of Treasurer

Signature of Treasurer Holmgren, Paul, , , [Electronically Filed] Date / / 2023

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

CD4-RPM, REPUBLICAN PARTY OF MINNESOTA

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="2023"/>	<input type="text" value="2615.14"/>	<input type="text" value="2615.14"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="2615.14"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="4540.00"/>	<input type="text" value="4540.00"/>
(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="7155.14"/>	<input type="text" value="7155.14"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="3514.68"/>	<input type="text" value="3514.68"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="3640.46"/>	<input type="text" value="3640.46"/>
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

Write or Type Committee Name

CD4-RPM, REPUBLICAN PARTY OF MINNESOTA

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).....	1000.00	1000.00
(ii) Unitemized	3540.00	3540.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	4540.00	4540.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	4540.00	4540.00
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)).....▶	4540.00	4540.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	4540.00	4540.00

DETAILED SUMMARY PAGE
of Disbursements

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	950.00	950.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	2564.68	2564.68
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	3514.68	3514.68
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 (52 U.S.C. § 30116(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).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	3514.68	3514.68
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3514.68	3514.68

DETAILED SUMMARY PAGE
of Disbursements

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)	4540.00	4540.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4540.00	4540.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	3514.68	3514.68
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	3514.68	3514.68

**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 6 OF 9
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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)
CD4-RPM, REPUBLICAN PARTY OF MINNESOTA

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hill, Louis, F, ,

Mailing Address 1315 Red Fox Rd
Ste 200

City Arden Hills State MN Zip Code 55112

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

Name of Employer (for Individual) Rockwood Capital Management Occupation (for Individual) President

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
 05 / 03 / 2023

Transaction ID : SA11AI.4649

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

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

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

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

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	1000.00

**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"/> 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)
CD4-RPM, REPUBLICAN PARTY OF MINNESOTA

A. Advent Lutheran Church

Full Name (Last, First, Middle Initial)

Mailing Address 3000 Hamline Ave N

City Roseville State MN Zip Code 55113

Purpose of Disbursement Convention Hall Rental

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 04 / 24 / 2023

FEC Identification Number: C

Transaction ID : SB21B.4654

Amount of Each Disbursement this Period: 250.00

Memo Item

B. Kysylyczyn, John, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3083 Victoria St

City Roseville State MN Zip Code 55113

Purpose of Disbursement Convention Lunch Cost

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 04 / 24 / 2023

FEC Identification Number: C

Transaction ID : SB21B.4655

Amount of Each Disbursement this Period: 625.27

Memo Item

C. The Anika Foundation

Full Name (Last, First, Middle Initial)

Mailing Address 3900 Thomas Ave N

City Minneapolis State MN Zip Code 55412

Purpose of Disbursement Juneteenth at Allianz Field Event

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 05 / 30 / 2023

FEC Identification Number: C

Transaction ID : SB21B.4665

Amount of Each Disbursement this Period: 250.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1125.27

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

**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"/> 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)
CD4-RPM, REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial)

A. The UPS Store #2158

Mailing Address 2355 Fairview Ave

City Roseville State MN Zip Code 55113

Purpose of Disbursement
UPS Store Mailbox-Annual

001

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4667

Amount of Each Disbursement this Period

2	2	8	0	0
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Memo Item

Full Name (Last, First, Middle Initial)

B. United Hmong Family

Mailing Address 1001 Johnson Pkwy

City St Paul State MN Zip Code 55106

Purpose of Disbursement
41th Annual Hmong Freedom Festival Booth

003

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4662

Amount of Each Disbursement this Period

5	0	0	0	0
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Memo Item

Full Name (Last, First, Middle Initial)

C. United Hmong Family

Mailing Address 1001 Johnson Pkwy

City St Paul State MN Zip Code 55106

Purpose of Disbursement
41th Annual Hmong Freedom Festival Deposit

003

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4663

Amount of Each Disbursement this Period

2	0	0	0	0
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Memo Item

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

9	2	8	0	0
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TOTAL This Period (last page this line number only)..... ▶

2	0	5	3	2	7
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SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

CD4-RPM, REPUBLICAN PARTY OF MINNESOTA

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.4658** Memo Item

Buzz360 LLC

Mailing Address 17728 Kingsway Path

City Lakeville State MN Zip Code 55044

Purpose of Disbursement: Online Voter Outreach-Annual

Activity or Event Identifier: **Administrative**

Category/Type: 001

Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 950.00

Date: 05 / 31 / 2023

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
950.00		0.00		950.00

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

Mailing Address

City State Zip Code

Purpose of Disbursement:

Activity or Event Identifier:

Category/Type:

Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date:

Date:

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT

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

Mailing Address

City State Zip Code

Purpose of Disbursement:

Activity or Event Identifier:

Category/Type:

Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date:

Date:

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
950.00		0.00		950.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
950.00		0.00		950.00