

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT

Example: If typing, type over the lines.

12FE4M5

Gerson for Congress

ADDRESS (number and street)

1035 Summit Ave

Check if different than previously reported. (ACC)

South Saint Paul

MN

55075

2. FEC IDENTIFICATION NUMBER

C00523738

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

MN

02

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

in the State of

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

- General (30G) Runoff (30R) Special (30S)

Election on

MM / DD / YYYY

in the State of

5. Covering Period

MM / DD / YYYY 10 / 01 / 2014

through

MM / DD / YYYY 12 / 31 / 2014

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 David Adam Gerson

Signature of Treasurer David Adam Gerson

[Electronically Filed]

Date

MM / DD / YYYY 01 / 13 / 2015

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  
**Gerson for Congress**

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

|   | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|---|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans)   |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e))....   | 0.00                    | 15922.34                           |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....   | 0.00                    | 0.00                               |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)).....                            | 0.00                    | 15922.34                           |
| 7. Net Operating Expenditures   |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....  | 234.15                  | 114421.32                          |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14).....  | 0.00                    | 0.00                               |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)).....                                      | 234.15                  | 114421.32                          |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27).....   | 1796.59                 |                                    |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D).....  | 0.00                    |                                    |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D)..... | 147567.41               |                                    |

**For further information contact:**

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

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

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

Gerson for Congress

Report Covering the Period: From: 10 / 01 / 2014 To: 12 / 31 / 2014

I. RECEIPTS

| COLUMN A<br>Total this Period                                  | COLUMN B<br>Election Cycle Total as of<br>11 / 04 / 2014<br>(date of general election) | COLUMN C<br>Total for<br>11 / 05 / 2014<br>(date after general election) |
|--|--|--|
| <b>11. CONTRIBUTIONS</b><br>(other than loans) FROM:           |  |  |
| <b>(a) Individuals/Persons Other than Political Committees</b> |  |  |
| <b>(i) Itemized (use Schedule A)</b>                           |  |  |
| 0.00   | 9475.09  | 0.00   |
| <b>(ii) Unitemized</b>   |  |  |
| 0.00   | 1566.45  | 0.00   |
| <b>(iii) Total of contributions from individuals</b>           |  |  |
| 0.00   | 11041.54   | 0.00   |
| <b>(b) Political Party Committees</b>                          |  |  |
| 0.00   | 0.00   | 0.00   |
| <b>(c) Other Political Committees</b>                          |  |  |
| 0.00   | 0.00   | 0.00   |

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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| COLUMN A<br>Total this Period   | COLUMN B<br>Election Cycle Total as of *<br>(date of general election)<br>(* See page 5 for date) | COLUMN C<br>Total for * (date after general election)<br>through * (last day of reporting period)<br>(* See page 5 for dates) |
|---|---|---|
| (d) The Candidate   |   |   |
| 0.00  | 4880.80   | 0.00  |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d)) |   |   |
| 0.00  | 15922.34  | 0.00  |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES                                      |   |   |
| 0.00  | 0.00  | 0.00  |
| 13. LOANS:  |   |   |
| (a) Made or Guaranteed by the Candidate   |   |   |
| 391.00  | 99001.45  | 0.00  |
| (b) All Other Loans   |   |   |
| 0.00  | 0.00  | 0.00  |
| (c) TOTAL LOANS (add Lines 13(a) and (b))   |   |   |
| 391.00  | 99001.45  | 0.00  |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)                      |   |   |
| 0.00  | 0.00  | 0.00  |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.)                                      |   |   |
| 0.00  | 0.00  | 0.00  |
| 16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)                                |   |   |
| 391.00  | 114923.79   | 0.00  |

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

Write or Type Committee Name

Gerson for Congress

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

**II. DISBURSEMENTS**

| COLUMN A<br>Total this Period                           | COLUMN B<br>Election Cycle Total as of *<br>(date of general election)<br>(* See page 5 for date) | COLUMN C<br>Total for * (date after general election)<br>through * (last day of reporting period)<br>(* See page 5 for dates) |
|---|---|---|
| 17. OPERATING EXPENDITURES                              |   |   |
| <input type="text" value="234.15"/>                     | <input type="text" value="114421.32"/>  | <input type="text" value="234.15"/>   |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES            |   |   |
| <input type="text" value="0.00"/>                       | <input type="text" value="0.00"/>   | <input type="text" value="0.00"/>   |
| 19. LOAN REPAYMENTS:                                    |   |   |
| (a) Of Loans Made or Guaranteed by the Candidate        |   |   |
| <input type="text" value="0.00"/>                       | <input type="text" value="0.00"/>   | <input type="text" value="0.00"/>   |
| (b) Of All Other Loans                                  |   |   |
| <input type="text" value="0.00"/>                       | <input type="text" value="0.00"/>   | <input type="text" value="0.00"/>   |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))   |   |   |
| <input type="text" value="0.00"/>                       | <input type="text" value="0.00"/>   | <input type="text" value="0.00"/>   |
| 20. REFUNDS OF CONTRIBUTIONS TO:                        |   |   |
| (a) Individuals/Persons Other Than Political Committees |   |   |
| <input type="text" value="0.00"/>                       | <input type="text" value="0.00"/>   | <input type="text" value="0.00"/>   |
| (b) Political Party Committees                          |   |   |
| <input type="text" value="0.00"/>                       | <input type="text" value="0.00"/>   | <input type="text" value="0.00"/>   |

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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| COLUMN A<br>Total this Period | COLUMN B<br>Election Cycle Total as of *<br>(date of general election)<br>(* See page 5 for date) | COLUMN C<br>Total for * (date after general election)<br>through * (last day of reporting period)<br>(* See page 5 for dates) |
|-------------------------------|---|---|
|-------------------------------|---|---|

(c) Other Political Committees (such as PACs)

|      |      |      |
|------|------|------|
| 0.00 | 0.00 | 0.00 |
|------|------|------|

(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

|      |      |      |
|------|------|------|
| 0.00 | 0.00 | 0.00 |
|------|------|------|

**21. OTHER DISBURSEMENTS**

|      |      |      |
|------|------|------|
| 0.00 | 0.00 | 0.00 |
|------|------|------|

**22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)**

|        |           |        |
|--------|-----------|--------|
| 234.15 | 114421.32 | 234.15 |
|--------|-----------|--------|

**III. NET CONTRIBUTIONS (OTHER THAN LOANS)**

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

|      |          |      |
|------|----------|------|
| 0.00 | 15922.34 | 0.00 |
|------|----------|------|

**IV. NET OPERATING EXPENDITURES**

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

|        |           |        |
|--------|-----------|--------|
| 234.15 | 114421.32 | 234.15 |
|--------|-----------|--------|

**V. CASH SUMMARY**

|   |         |
|---|---------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                        | 1639.74 |
| 24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....                            | 391.00  |
| 25. SUBTOTAL (add Line 23 and Line 24).....                                   | 2030.74 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                       | 234.15  |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25) | 1796.59 |

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

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

(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>David Adam Gerson</b>   |   | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br><b>10 / 28 / 2014</b> |
| Mailing Address 1035 Summit Ave   |   | <b>Transaction ID : SA13A.5587</b>                                  |
| City<br>South Saint Paul  | State Zip Code<br>MN 55075                          |   |
| FEC ID number of contributing federal political committee.<br><b>C H2MN02130</b>  | Amount of Each Receipt this Period<br><b>391.00</b> |   |
| Name of Employer<br>Meggitt   | Occupation<br>Engineer                              | Loan  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br><b>103882.25</b>          |   |

|   |                                    |                         |
|---|------------------------------------|-------------------------|
| Full Name (Last, First, Middle Initial)   |                                    | Date of Receipt         |
| Mailing Address   |                                    | M M / D D / Y Y Y Y Y Y |
| City  | State Zip Code                     |                         |
| FEC ID number of contributing federal political committee.<br><b>C</b>  | Amount of Each Receipt this Period |                         |
| Name of Employer  | Occupation                         |                         |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date             |                         |

|   |                                    |                         |
|---|------------------------------------|-------------------------|
| Full Name (Last, First, Middle Initial)   |                                    | Date of Receipt         |
| Mailing Address   |                                    | M M / D D / Y Y Y Y Y Y |
| City  | State Zip Code                     |                         |
| FEC ID number of contributing federal political committee.<br><b>C</b>  | Amount of Each Receipt this Period |                         |
| Name of Employer  | Occupation                         |                         |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date             |                         |

|   |               |
|---|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | <b>391.00</b> |
| <b>TOTAL</b> This Period (last page this line number only)..... | <b>391.00</b> |

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

|   |  |   |  |   |  |
|---|--|---|--|---|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)                                   | PAGE 8 OF 44  |  |   |  |
|   | <input checked="" type="checkbox"/> 17<br><input type="checkbox"/> 20a | <input type="checkbox"/> 18<br><input type="checkbox"/> 20b | <input type="checkbox"/> 19a<br><input type="checkbox"/> 20c | <input type="checkbox"/> 19b<br><input type="checkbox"/> 21 |  |

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

|   |  |                          |   |  |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. DiscountRubberStamps.com</b>   |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>12 / 26 / 2014 |  |
| Mailing Address PO Box 445  |  |                          | Amount of Each Disbursement this Period<br>7.11               |  |
| City<br>Butler  | State<br>WI  | Zip Code<br>55007        | Transaction ID : SB17.5589                                    |  |
| Purpose of Disbursement<br>Return Address Stamp   |  | Category/<br>Type<br>003 |   |  |
| Candidate Name  |  |                          |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |
| State:  | District:  |                          |   |  |

|   |  |                          |   |  |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Go Daddy</b>   |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>12 / 26 / 2014 |  |
| Mailing Address 14455 N. Hayden Rd.<br>#219   |  |                          | Amount of Each Disbursement this Period<br>30.34              |  |
| City<br>Scottsdale  | State<br>AZ  | Zip Code<br>85260        | Transaction ID : SB17.5590                                    |  |
| Purpose of Disbursement<br>Website renewal  |  | Category/<br>Type<br>003 |   |  |
| Candidate Name  |  |                          |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |
| State:  | District:  |                          |   |  |

|   |  |                          |   |  |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Got Print</b>  |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>12 / 19 / 2014 |  |
| Mailing Address 7651 N. San Fernando Rd.  |  |                          | Amount of Each Disbursement this Period<br>22.96              |  |
| City<br>Burbank   | State<br>CA  | Zip Code<br>91505        | Transaction ID : SB17.5593                                    |  |
| Purpose of Disbursement<br>Business Card  |  | Category/<br>Type<br>003 |   |  |
| Candidate Name  |  |                          |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |
| State:  | District:  |                          |   |  |

|   |       |
|---|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 70.41 |
| <b>TOTAL</b> This Period (last page this line number only)..... |       |



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

|   |   |              |
|---|---|--------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 9 OF 44 |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |              |

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

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Jaynes Hallmark</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>12 / 19 / 2014 |
| Mailing Address 1283 Promenade Place   |  | Amount of Each Disbursement this Period<br>163.74             |
| City Eagan State MN Zip Code 55122   | Purpose of Disbursement Thank You Cards<br>Candidate Name<br>Category/Type 003   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Transaction ID : SB17.5592                                    |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B.</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y |
| Mailing Address  |  | Amount of Each Disbursement this Period     |
| City State Zip Code  | Purpose of Disbursement<br>Candidate Name<br>Category/Type   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C.</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y |
| Mailing Address  |  | Amount of Each Disbursement this Period     |
| City State Zip Code  | Purpose of Disbursement<br>Candidate Name<br>Category/Type   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:   |  |   |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 163.74 |
| <b>TOTAL</b> This Period (last page this line number only)..... | 234.15 |

# SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
Gerson for Congress

Transaction ID : SC/10.4392

LOAN SOURCE Full Name (Last, First, Middle Initial)  
David Adam Gerson

[PERSONAL FUNDS]

Election: 2012

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave

City State ZIP Code  
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
16554.96 0.00 16554.96

### TERMS

Date Incurred Date Due Interest Rate Secured:  
05 / 29 / 2012 M M / D D / 1/1/2020 Y 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                |
|--|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |

SUBTOTALS This Period This Page (optional)..... 16554.96

TOTALS This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Gerson for Congress** Transaction ID : **SC/10.4365**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **David Adam Gerson** *[PERSONAL FUNDS]* Election: 2012  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave

City State ZIP Code  
South Saint Paul MN 55075

|                                     |                                    |   |
|-------------------------------------|------------------------------------|---|
| Original Amount of Loan<br>10000.00 | Cumulative Payment To Date<br>0.00 | Balance Outstanding at Close of This Period<br>10000.00 |
|-------------------------------------|------------------------------------|---|

**TERMS**

|                                       |                              |                               |   |
|---------------------------------------|------------------------------|-------------------------------|---|
| Date Incurred<br>M 07 / D 19 / Y 2012 | Date Due<br>M M / D D / Y NA | Interest Rate<br>0.00 % (apr) | Secured:<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|---------------------------------------|------------------------------|-------------------------------|---|

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                    |
|--|------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |

|  |   |          |
|--|---|----------|
| <b>SUBTOTALS</b> This Period This Page (optional).....       | ▶ | 10000.00 |
| <b>TOTALS</b> This Period (last page in this line only)..... | ▶ | [ ]      |

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Gerson for Congress** Transaction ID : **SC/10.4381**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **David Adam Gerson** *[PERSONAL FUNDS]* Election: 2012  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave

City State ZIP Code  
South Saint Paul MN 55075

|                                    |                                    |  |
|------------------------------------|------------------------------------|--|
| Original Amount of Loan<br>5000.00 | Cumulative Payment To Date<br>0.00 | Balance Outstanding at Close of This Period<br>5000.00 |
|------------------------------------|------------------------------------|--|

**TERMS**

|                                       |                              |                               |   |
|---------------------------------------|------------------------------|-------------------------------|---|
| Date Incurred<br>M 07 / D 24 / Y 2012 | Date Due<br>M M / D D / Y NA | Interest Rate<br>0.00 % (apr) | Secured:<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|---------------------------------------|------------------------------|-------------------------------|---|

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                    |
|--|------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |

|  |   |         |
|--|---|---------|
| <b>SUBTOTALS</b> This Period This Page (optional).....       | ▶ | 5000.00 |
| <b>TOTALS</b> This Period (last page in this line only)..... | ▶ | [ ]     |

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

# SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Gerson for Congress** Transaction ID : **SC/10.4468**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **David Adam Gerson** *[PERSONAL FUNDS]* Election: 2012  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave

City State ZIP Code  
South Saint Paul MN 55075

|                                 |                                    |   |
|---------------------------------|------------------------------------|---|
| Original Amount of Loan<br>5.00 | Cumulative Payment To Date<br>0.00 | Balance Outstanding at Close of This Period<br>5.00 |
|---------------------------------|------------------------------------|---|

**TERMS**

|                                       |                              |                               |   |
|---------------------------------------|------------------------------|-------------------------------|---|
| Date Incurred<br>M 07 / D 24 / Y 2012 | Date Due<br>M M / D D / Y NA | Interest Rate<br>0.00 % (apr) | Secured:<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|---------------------------------------|------------------------------|-------------------------------|---|

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                    |
|--|------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |

|  |          |
|--|----------|
| <b>SUBTOTALS</b> This Period This Page (optional).....       | [ ] 5.00 |
| <b>TOTALS</b> This Period (last page in this line only)..... | [ ]      |

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

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

Transaction ID : **SC/10.4128**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**David Adam Gerson**

**[PERSONAL FUNDS]**

Election: 2012

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave

City State ZIP Code  
South Saint Paul MN 55075

|                         |                            |   |
|-------------------------|----------------------------|---|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| 5000.00                 | 0.00                       | 5000.00                                     |

**TERMS**

Date Incurred: M 07 / D 26 / Y 2012  
 Date Due: M / D / Y NA  
 Interest Rate: 0.00 % (apr)  
 Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                    |
|--|------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |

|  |         |
|--|---------|
| <b>SUBTOTALS</b> This Period This Page (optional).....       | 5000.00 |
| <b>TOTALS</b> This Period (last page in this line only)..... | [ ]     |

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
Gerson for Congress

Transaction ID : SC/10.4389

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
David Adam Gerson

**[PERSONAL FUNDS]**

Election: 2012

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave

City State ZIP Code  
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
5000.00 0.00 5000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M M / D D / Y Y Y Y M M / D D / Y Y Y Y 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                |
|--|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |

**SUBTOTALS** This Period This Page (optional)..... ▶ 5000.00

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

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
Gerson for Congress

Transaction ID : SC/10.4129

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
David Adam Gerson

**[PERSONAL FUNDS]**

Election: 2012

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave

City State ZIP Code  
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
5000.00 0.00 5000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M M / D D / Y Y Y Y M M / D D / Y Y Y Y 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                |
|--|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |

**SUBTOTALS** This Period This Page (optional)..... 5000.00

**TOTALS** This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
Gerson for Congress

Transaction ID : SC/10.4470

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
David Adam Gerson

**[PERSONAL FUNDS]**

Election: 2012

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave

City State ZIP Code  
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
6.00 0.00 6.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
08 / 10 / 2012 M M / D D / Y Y NA % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                |
|--|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |

**SUBTOTALS** This Period This Page (optional)..... 6.00

**TOTALS** This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

# SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
Gerson for Congress

Transaction ID : SC/10.4130

LOAN SOURCE Full Name (Last, First, Middle Initial)  
David Adam Gerson

[PERSONAL FUNDS]

Election: 2012

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave

City State ZIP Code  
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
1000.00 0.00 1000.00

### TERMS

Date Incurred Date Due Interest Rate Secured:  
08 / 17 / 2012 M M / D D / Y Y NA 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                |
|--|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |

SUBTOTALS This Period This Page (optional)..... 1000.00

TOTALS This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

# SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
Gerson for Congress

Transaction ID : SC/10.4131

LOAN SOURCE Full Name (Last, First, Middle Initial)

David Adam Gerson

[PERSONAL FUNDS]

Election: 2012

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave

City State ZIP Code  
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
1000.00 0.00 1000.00

### TERMS

Date Incurred Date Due Interest Rate Secured:  
M 08 / D 20 / Y 2012 M M / D D / Y NA Y Y 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                    |
|--|------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |

SUBTOTALS This Period This Page (optional)..... ▶ 1000.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
Gerson for Congress

Transaction ID : SC/10.4442

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
David Adam Gerson

**[PERSONAL FUNDS]**

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave

City State ZIP Code  
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
479.33 0.00 479.33

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M 02 / D 22 / Y 2013 M M / D D / Y 1/1/2020 Y 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                    |
|--|------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |

**SUBTOTALS** This Period This Page (optional)..... ▶ 479.33

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

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
Gerson for Congress

Transaction ID : SC/10.4444

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
David Adam Gerson

**[PERSONAL FUNDS]**

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave

City State ZIP Code  
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
3000.00 0.00 3000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M 02 / D 25 / Y 2013 M M / D D / Y 1/1/2020 Y 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                    |
|--|------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |

**SUBTOTALS** This Period This Page (optional)..... ▶ 3000.00

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

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
Gerson for Congress

Transaction ID : SC/10.4464

LOAN SOURCE Full Name (Last, First, Middle Initial)

David Adam Gerson

[PERSONAL FUNDS]

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave

City State ZIP Code  
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
3000.00 0.00 3000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M 03 / D 26 / Y 2013 M M / D D / Y 1/1/2020 Y 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

| 1. Full Name (Last, First, Middle Initial) | Name of Employer               |
|--|--------------------------------|
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |

**SUBTOTALS** This Period This Page (optional)..... 3000.00

**TOTALS** This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
Gerson for Congress

Transaction ID : SC/10.4502

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
David Adam Gerson

**[PERSONAL FUNDS]**

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave

City State ZIP Code  
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
4000.00 0.00 4000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M 04 / D 18 / Y 2013 M M / D D / Y 1/1/20 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                    |
|--|------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |

**SUBTOTALS** This Period This Page (optional)..... ▶ 4000.00

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

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Gerson for Congress** Transaction ID : **SC/10.4545**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **David Adam Gerson** *[PERSONAL FUNDS]* Election: 2014  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave

City State ZIP Code  
South Saint Paul MN 55075

|                                    |                                    |  |
|------------------------------------|------------------------------------|--|
| Original Amount of Loan<br>4000.00 | Cumulative Payment To Date<br>0.00 | Balance Outstanding at Close of This Period<br>4000.00 |
|------------------------------------|------------------------------------|--|

**TERMS**

|                                       |                              |                               |   |
|---------------------------------------|------------------------------|-------------------------------|---|
| Date Incurred<br>M 05 / D 13 / Y 2013 | Date Due<br>M / D / Y 1/1/20 | Interest Rate<br>0.00 % (apr) | Secured:<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|---------------------------------------|------------------------------|-------------------------------|---|

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                    |
|--|------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |

|  |   |             |
|--|---|-------------|
| <b>SUBTOTALS</b> This Period This Page (optional).....       | ▶ | [ ] 4000.00 |
| <b>TOTALS</b> This Period (last page in this line only)..... | ▶ | [ ]         |

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**



**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
Gerson for Congress

Transaction ID : SC/10.4591

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
David Adam Gerson

**[PERSONAL FUNDS]**

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave

City State ZIP Code  
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
5000.00 0.00 5000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M 06 / D 10 / Y 2013 M M / D D / Y 1/1/20 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                |
|--|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |

**SUBTOTALS** This Period This Page (optional)..... ▶ 5000.00

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

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
Gerson for Congress

Transaction ID : SC/10.4622

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
David Adam Gerson

**[PERSONAL FUNDS]**

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave

City State ZIP Code  
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
131.12 0.00 131.12

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
06 / 30 / 2013 M M / D D / Y 1/1/20 Y 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                |
|--|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |

**SUBTOTALS** This Period This Page (optional)..... 131.12

**TOTALS** This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

# SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
Gerson for Congress

Transaction ID : SC/10.5169

LOAN SOURCE Full Name (Last, First, Middle Initial)

David Adam Gerson

[PERSONAL FUNDS]

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave

City State ZIP Code  
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
5000.00 0.00 5000.00

### TERMS

Date Incurred Date Due Interest Rate Secured:  
M 07 / D 05 / Y 2013 M M / D D / Y 1/1/20 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                    |
|--|------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |

SUBTOTALS This Period This Page (optional)..... ▶ 5000.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) Transaction ID : SC/10.5170  
**Gerson for Congress**

|  |                         |   |
|--|-------------------------|---|
| <b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)<br><b>David Adam Gerson</b> | <b>[PERSONAL FUNDS]</b> | Election: 2014<br><input checked="" type="checkbox"/> Primary<br><input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| Mailing Address<br>1035 Summit Ave   |                         |   |

|                  |       |          |
|------------------|-------|----------|
| City             | State | ZIP Code |
| South Saint Paul | MN    | 55075    |

|                         |                            |   |
|-------------------------|----------------------------|---|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| 5000.00                 | 0.00                       | 5000.00                                     |

**TERMS**

|                      |                      |               |   |
|----------------------|----------------------|---------------|---|
| Date Incurred        | Date Due             | Interest Rate | Secured:  |
| M 07 / D 29 / Y 2013 | M M / D D / Y 1/1/20 | 0.00 % (apr)  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

List All Endorsers or Guarantors (if any) to Loan Source

| 1. Full Name (Last, First, Middle Initial) | Name of Employer   |
|--|--|
| Mailing Address                            | Occupation   |
| City State ZIP Code                        | Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/> |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer   |
| Mailing Address                            | Occupation   |
| City State ZIP Code                        | Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/> |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer   |
| Mailing Address                            | Occupation   |
| City State ZIP Code                        | Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/> |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer   |
| Mailing Address                            | Occupation   |
| City State ZIP Code                        | Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/> |

|  |   |
|--|---|
| <b>SUBTOTALS</b> This Period This Page (optional).....       | <input style="width: 100%;" type="text" value="5000.00"/> |
| <b>TOTALS</b> This Period (last page in this line only)..... | <input style="width: 100%;" type="text"/>                 |

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
Gerson for Congress

Transaction ID : SC/10.5172

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
David Adam Gerson

**[PERSONAL FUNDS]**

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave

City State ZIP Code  
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
5000.00 0.00 5000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M M / D D / Y Y Y Y M M / D D / Y Y Y Y 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                |
|--|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |

**SUBTOTALS** This Period This Page (optional)..... 5000.00

**TOTALS** This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) Transaction ID : SC/10.5173  
**Gerson for Congress**

|  |                         |   |
|--|-------------------------|---|
| <b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)<br><b>David Adam Gerson</b> | <b>[PERSONAL FUNDS]</b> | Election: 2014<br><input checked="" type="checkbox"/> Primary<br><input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| Mailing Address<br>1035 Summit Ave   |                         |   |

|                  |       |          |
|------------------|-------|----------|
| City             | State | ZIP Code |
| South Saint Paul | MN    | 55075    |

|                         |                            |   |
|-------------------------|----------------------------|---|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| 5000.00                 | 0.00                       | 5000.00                                     |

**TERMS**

|                      |                      |               |   |
|----------------------|----------------------|---------------|---|
| Date Incurred        | Date Due             | Interest Rate | Secured:  |
| M 09 / D 12 / Y 2013 | M M / D D / Y 1/1/20 | 0.00 % (apr)  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

List All Endorsers or Guarantors (if any) to Loan Source

| 1. Full Name (Last, First, Middle Initial) | Name of Employer   |
|--|--|
| Mailing Address                            | Occupation   |
| City State ZIP Code                        | Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/> |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer   |
| Mailing Address                            | Occupation   |
| City State ZIP Code                        | Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/> |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer   |
| Mailing Address                            | Occupation   |
| City State ZIP Code                        | Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/> |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer   |
| Mailing Address                            | Occupation   |
| City State ZIP Code                        | Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/> |

|  |   |
|--|---|
| <b>SUBTOTALS</b> This Period This Page (optional).....       | <input style="width: 100%;" type="text" value="5000.00"/> |
| <b>TOTALS</b> This Period (last page in this line only)..... | <input style="width: 100%;" type="text"/>                 |

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Gerson for Congress** Transaction ID : **SC/10.5174**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **David Adam Gerson** *[PERSONAL FUNDS]* Election: 2014  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
 1035 Summit Ave

City State ZIP Code  
 South Saint Paul MN 55075

|                                    |                                    |  |
|------------------------------------|------------------------------------|--|
| Original Amount of Loan<br>3000.00 | Cumulative Payment To Date<br>0.00 | Balance Outstanding at Close of This Period<br>3000.00 |
|------------------------------------|------------------------------------|--|

**TERMS**

|                                       |                                  |                               |   |
|---------------------------------------|----------------------------------|-------------------------------|---|
| Date Incurred<br>M 09 / D 30 / Y 2013 | Date Due<br>M M / D D / Y 1/1/20 | Interest Rate<br>0.00 % (apr) | Secured:<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|---------------------------------------|----------------------------------|-------------------------------|---|

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                    |
|--|------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |

|  |   |             |
|--|---|-------------|
| <b>SUBTOTALS</b> This Period This Page (optional).....       | ▶ | [ ] 3000.00 |
| <b>TOTALS</b> This Period (last page in this line only)..... | ▶ | [ ]         |

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
Gerson for Congress

Transaction ID : SC/10.5202

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
David Adam Gerson

**[PERSONAL FUNDS]**

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave

City State ZIP Code  
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
5000.00 0.00 5000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M M / D D / Y Y Y Y M M / D D / Y Y Y Y 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                |
|--|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |

**SUBTOTALS** This Period This Page (optional)..... 5000.00

**TOTALS** This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



# SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
Gerson for Congress

Transaction ID : SC/10.5203

LOAN SOURCE Full Name (Last, First, Middle Initial)  
David Adam Gerson

[PERSONAL FUNDS]

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave

City State ZIP Code  
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
5000.00 0.00 5000.00

### TERMS

Date Incurred Date Due Interest Rate Secured:  
M M / D D / Y Y Y Y M M / D D / Y Y Y Y 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                |
|--|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |

SUBTOTALS This Period This Page (optional)..... 5000.00

TOTALS This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
Gerson for Congress

Transaction ID : SC/10.5204

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
David Adam Gerson

**[PERSONAL FUNDS]**

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave

City State ZIP Code  
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
5000.00 0.00 5000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M M / D D / Y Y Y Y M M / D D / Y Y Y Y 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                |
|--|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |

**SUBTOTALS** This Period This Page (optional)..... 5000.00

**TOTALS** This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Gerson for Congress** Transaction ID : **SC/10.5205**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **David Adam Gerson** *[PERSONAL FUNDS]* Election: 2014  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave

City State ZIP Code  
South Saint Paul MN 55075

|                                    |                                    |  |
|------------------------------------|------------------------------------|--|
| Original Amount of Loan<br>5000.00 | Cumulative Payment To Date<br>0.00 | Balance Outstanding at Close of This Period<br>5000.00 |
|------------------------------------|------------------------------------|--|

**TERMS**

|                                       |                              |                               |   |
|---------------------------------------|------------------------------|-------------------------------|---|
| Date Incurred<br>M 11 / D 04 / Y 2013 | Date Due<br>M / D / Y 1/1/20 | Interest Rate<br>0.00 % (apr) | Secured:<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|---------------------------------------|------------------------------|-------------------------------|---|

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                    |
|--|------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |

|  |   |             |
|--|---|-------------|
| <b>SUBTOTALS</b> This Period This Page (optional).....       | ▶ | [ ] 5000.00 |
| <b>TOTALS</b> This Period (last page in this line only)..... | ▶ | [ ]         |

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Gerson for Congress** Transaction ID : **SC/10.5206**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **David Adam Gerson** *[PERSONAL FUNDS]* Election: 2014  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave

City State ZIP Code  
South Saint Paul MN 55075

|                                    |                                    |  |
|------------------------------------|------------------------------------|--|
| Original Amount of Loan<br>4000.00 | Cumulative Payment To Date<br>0.00 | Balance Outstanding at Close of This Period<br>4000.00 |
|------------------------------------|------------------------------------|--|

**TERMS**

|                                       |                              |                               |   |
|---------------------------------------|------------------------------|-------------------------------|---|
| Date Incurred<br>M 11 / D 13 / Y 2013 | Date Due<br>M / D / Y 1/1/20 | Interest Rate<br>0.00 % (apr) | Secured:<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|---------------------------------------|------------------------------|-------------------------------|---|

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                    |
|--|------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |

|  |   |             |
|--|---|-------------|
| <b>SUBTOTALS</b> This Period This Page (optional).....       | ▶ | [ ] 4000.00 |
| <b>TOTALS</b> This Period (last page in this line only)..... | ▶ | [ ]         |

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
Gerson for Congress

Transaction ID : SC/10.5207

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
David Adam Gerson

**[PERSONAL FUNDS]**

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave

City State ZIP Code  
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
3000.00 0.00 3000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M 11 / D 19 / Y 2013 M M / D D / Y 1/1/20 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                    |
|--|------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |

**SUBTOTALS** This Period This Page (optional)..... ▶ 3000.00

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

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)  
LOANS**

NAME OF COMMITTEE (In Full) **Gerson for Congress** Transaction ID : **SC/10.5208**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **David Adam Gerson** *[PERSONAL FUNDS]* Election: 2014  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave

City State ZIP Code  
South Saint Paul MN 55075

|                                    |                                    |  |
|------------------------------------|------------------------------------|--|
| Original Amount of Loan<br>4000.00 | Cumulative Payment To Date<br>0.00 | Balance Outstanding at Close of This Period<br>4000.00 |
|------------------------------------|------------------------------------|--|

**TERMS**

Date Incurred: M 11 / D 29 / Y 2013  
 Date Due: M / D / Y 1/1/20  
 Interest Rate: 0.00 % (apr)  
 Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                    |
|--|------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |

**SUBTOTALS** This Period This Page (optional)..... ▶ 4000.00

**TOTALS** This Period (last page in this line only)..... ▶ [ ]

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
Gerson for Congress

Transaction ID : SC/10.5209

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
David Adam Gerson

**[PERSONAL FUNDS]**

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave

City State ZIP Code  
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
4000.00 0.00 4000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M 12 / D 09 / Y 2013 M M / D D / Y 1/1/20 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                    |
|--|------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |

**SUBTOTALS** This Period This Page (optional)..... ▶ 4000.00

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

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
Gerson for Congress

Transaction ID : SC/10.5210

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
David Adam Gerson

**[PERSONAL FUNDS]**

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave

City State ZIP Code  
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
3000.00 0.00 3000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M 12 / D 16 / Y 2013 M M / D D / Y 1/1/20 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                    |
|--|------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |

**SUBTOTALS** This Period This Page (optional)..... ▶ 3000.00

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

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

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

Transaction ID : **SC/10.5542**

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
**David Adam Gerson**

**[PERSONAL FUNDS]**

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave

City State ZIP Code  
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
3000.00 0.00 3000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M 01 / D 08 / Y 2014 M M / D D / Y 1/1/20 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                |
|--|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |

**SUBTOTALS** This Period This Page (optional)..... ▶ 3000.00  
**TOTALS** This Period (last page in this line only)..... ▶

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Gerson for Congress** Transaction ID : **SC/10.5543**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **David Adam Gerson** *[PERSONAL FUNDS]* Election: 2014  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave

City State ZIP Code  
South Saint Paul MN 55075

|                                    |                                    |  |
|------------------------------------|------------------------------------|--|
| Original Amount of Loan<br>5000.00 | Cumulative Payment To Date<br>0.00 | Balance Outstanding at Close of This Period<br>5000.00 |
|------------------------------------|------------------------------------|--|

**TERMS**

Date Incurred: M 01 / D 16 / Y 2014  
Date Due: M / D / Y 1/1/20  
Interest Rate: 0.00 % (apr)  
Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                    |
|--|------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |

**SUBTOTALS** This Period This Page (optional)..... ▶ 5000.00

**TOTALS** This Period (last page in this line only)..... ▶ [ ]

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
Gerson for Congress

Transaction ID : SC/10.5544

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
David Adam Gerson

*[PERSONAL FUNDS]*

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave

City State ZIP Code  
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
10000.00 0.00 10000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M 02 / D 26 / Y 2014 M M / D D / Y 1/1/20 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                |
|--|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |

**SUBTOTALS** This Period This Page (optional)..... ▶ 10000.00

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

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) Transaction ID : SC/10.5587  
**Gerson for Congress**

|  |                         |   |
|--|-------------------------|---|
| <b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)<br><b>David Adam Gerson</b> | <b>[PERSONAL FUNDS]</b> | Election: 2014<br><input checked="" type="checkbox"/> Primary<br><input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| Mailing Address<br>1035 Summit Ave   |                         |   |

|                  |       |          |
|------------------|-------|----------|
| City             | State | ZIP Code |
| South Saint Paul | MN    | 55075    |

|                         |                            |   |
|-------------------------|----------------------------|---|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| 391.00                  | 0.00                       | 391.00                                      |

**TERMS**

|                        |                      |               |   |
|------------------------|----------------------|---------------|---|
| Date Incurred          | Date Due             | Interest Rate | Secured:  |
| M 10 / D 28 / Y 2014 Y | M M / D D / Y NA Y Y | 0.00 % (apr)  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

List All Endorsers or Guarantors (if any) to Loan Source

|  |  |
|--|--|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer   |
| Mailing Address                            | Occupation   |
| City State ZIP Code                        | Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/> |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer   |
| Mailing Address                            | Occupation   |
| City State ZIP Code                        | Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/> |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer   |
| Mailing Address                            | Occupation   |
| City State ZIP Code                        | Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/> |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer   |
| Mailing Address                            | Occupation   |
| City State ZIP Code                        | Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/> |

|  |   |
|--|---|
| <b>SUBTOTALS</b> This Period This Page (optional).....   | <input style="width: 100%;" type="text" value="391.00"/>    |
| <b>TOTALS</b> This Period (last page in this line only).....   | <input style="width: 100%;" type="text" value="147567.41"/> |
| Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary. |   |