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Image# 15970009345

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An Au	thorized Com	mittee			Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT		ample: If typiner the lines.	g, type	12FE4M5	
Gerson for Congress						1
ADDRESS (number and street)	1035 Summit Av	e 				
Check if different						
than previously reported. (ACC)	South Saint Pau	<u> </u>			MN	55075
2. FEC IDENTIFICATION NU	JMBER ▼	CITY A			STATE A	ZIP CODE A STATE ▼ DISTRICT
C C00523738		3. IS THIS REPORT	X NEW (N)	OR	AMEND (A)	
4. TYPE OF REPORT (Cho	pose One)	(b) 12-Day PRE -	-Election Repo	ort for the		
(a) Quarterly Reports:		(©) 12-Day FIL	·	-	1	П
April 15 Quarterly F	Report (Q1)	ᆜ	Primary (12P))	General (1	12G) Runoff (12R)
July 15 Quarterly R	apart (O2)		Convention (12C)	Special (1	2S)
October 15 Quarter		Election on	M M /	D D /	Y Y Y Y	in the State of
X January 31 Year-En	d Report (YE)	(c) 30-Day POS	T -Election Rep	oort for the:		
_			General (30G		Runoff (30	DR) Special (30S)
Towning tion Depart	(TED)					, , , , , , , , , , , , , , , , , , , ,
Termination Report	(IER)	Election on	M M /	D D /	Y Y Y	in the State of
5. Covering Period 10	M / D D /	Y Y Y Y Y 2014	through	M M M 12	/ D D /	Y Y Y Y Y 2014
I certify that I have examined thi	is Report and to t	he best of my kn	owledge and	belief it is tr	ue, correct and	d complete.
Type or Print Name of Treasurer	David Adam Ge	erson				
Signature of Treasurer David	d Adam Gerson		[Electronically l	Filed] [Date 01	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of false, errone	eous, or incomplete	e information may	subject the per	son signing t	this Report to the	he penalties of 2 U.S.C. §437g.
Office Use Only						FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE

FEC Form 3 (Revised 02/2003) of Receipts and Disbursements

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Write or Type Committee Name Gerson for Congress

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

Report of Receipts and Disbursements

FEC Form 3 (Revised 07/05)

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- 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 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	To: 12 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
I. RECEIPTS		
COLUMN A Total this Period	COLUMN B Election Cycle Total as of	COLUMN C Total for
	11 04 2014 (date of general election)	11 05 2014 (date after general election)
 11. CONTRIBUTIONS (other than loans) FROM:(a) Individuals/Persons Other thanPolitical Committees(i) Itemized (use Schedule A) 	(through 12 31 2014 (last day of reporting period)
0.00 (ii) Unitemized	9475.09	0.00
0.00	1566.45	0.00
(iii) Total of contributions from individu	als	
0.00	11041.54	0.00
(b) Political Party Committees		
0.00	0.00	0.00
(c) Other Political Committees		
0.00	0.00	0.00

Report of Receipts and Disbursements

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FEC Form 3 (Revised 1/01)

	COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
	(d) The Candidate		
	0.00	4880.80	0.00
	(e) TOTAL CONTRIBUTIONS (other than lo	pans) (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	S (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

Report of Receipts and Disbursements

	FEC Form 3 (Revised 1/01)	report of receipts and Disbursements	PAGE 5 / 44
Wr	ite or Type Committee Name		
G	erson for Congress		
Re	port Covering the Period: From:	10	To: 12 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	II. DISBURSEMENTS		
	COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17.	OPERATING EXPENDITURES		
	234.15	114421.32	234.15
18.	TRANSFERS TO OTHER AUTHORIZE	D COMMITTEES	
	0.00	0.00	0.00
	LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by	the Candidate	
	0.00	0.00	0.00
	(b) Of All Other Loans		
	0.00	0.00	0.00
	(c) TOTAL LOAN REPAYMENTS (add	d Lines 19(a) and 19(b))	
	0.00	0.00	0.00
	REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other Than Po	litical Committees	
	0.00	0.00	0.00
	(b) Political Party Committees		
	0.00	0.00	0.00

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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	COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
	(c) Other Political Committees (such as PAC	Os)	
	0.00	0.00	0.00
	(d) TOTAL CONTRIBUTION REFUNDS (add	d Lines 20(a), (b) and (c))	
	0.00	0.00	0.00
0.4			
21.	OTHER DISBURSEMENTS		
	0.00	0.00	0.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18	3, 19(c), 20(d) and 21)	
	234.15	114421.32	234.15
	III. NET CONTRIBUTIONS (OTHER TO Note: Substitute in lieu of Line #6	THAN LOANS) of Summary Page for this report only; subtra	act Line 20(d) from Line 11(e))
	0.00	15922.34	0.00
	IV. NET OPERATING EXPENDITURE	ES	
	(Note: Substitute in lieu of Line #	#7 of Summary Page for this report only; sub	otract Line 14 from Line 17)
	234.15	114421.32	234.15
	V. CASH SUI	MMARY	
23.	CASH ON HAND AT BEGINNING OF REPO	PRTING 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 (fr	om Line 22)	234.15
27.	CASH ON HAND AT CLOSE OF REPORTIN	NG PERIOD (subtract Line 26 from Line 25)	1796.59

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

	FO	R LINE	NU	MBER	:	PAGE	=	7	OF	44
Use separate schedule(s)	(ch	(check only one)								
for each category of the		11a		11b		11c		11d		
Detailed Summary Page		12	X	13a		13b		14		15
not be sold or used by any person for the purpose of soliciting contributions dress of any political committee to solicit contributions from such committee.										

Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and ad-NAME OF COMMITTEE (In Full) Gerson for Congress Full Name (Last, First, Middle Initial) David Adam Gerson Date of Receipt Mailing Address 1035 Summit Ave 10 2014 28 City State Zip Code Transaction ID: SA13A.5587 MN 55075 South Saint Paul FEC ID number of contributing Amount of Each Receipt this Period H2MN02130 federal political committee. 391.00 Name of Employer Occupation Loan Meggitt Engineer Receipt For: 2014 Election Cycle-to-Date | Primary General 103882.25 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) 391.00 SUBTOTAL of Receipts This Page (optional)..... 391.00 TOTAL This Period (last page this line number only).....

S

SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate sc for each categor Detailed Summa	nedule(s) y of the	FOR LINE NUMBER: (check only one) X 17
Any information copied from such Reports and Stateme or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) Gerson for Congress			
Full Name (Last, First, Middle Initial) DiscountRubberStamps.com			Date of Disbursement
Mailing Address PO Box 445			12 26 2014
City Sta Butler WI	te Zip Code 55007		Amount of Each Disbursement this Period
Purpose of Disbursement Return Address Stamp Candidate Name		003	17.11 Transaction ID : SB17.5589
	nt For: 2014	Category/ Type	
Senate Pri	imary General cher (specify)		
Full Name (Last, First, Middle Initial)			
Go Daddy			Date of Disbursement
Mailing Address 14455 N. Hayden Rd. #219			12 26 2014
City Sta Scottsdale AZ			Amount of Each Disbursement this Period
Purpose of Disbursement Website renewal	- 00200	003	30.34
Candidate Name		Category/ Type	Transaction ID : SB17.5590
Senate Pr	nt For: 2014 imary	71	
State: District:			
Full Name (Last, First, Middle Initial)			Date of Disbursement
Mailing Address 7651 N. San Fernando Rd.			M M / D D / Y Y Y
			12 19 2014
City State Burbank CA	Zip Code 91505		Amount of Each Disbursement this Period
Purpose of Disbursement Business Card	91303	003	22.96
Candidate Name		Category/ Type	Transaction ID : SB17.5593
Senate Pr	nt For: 2014 imary		
State: District:			
SUBTOTAL of Disbursements This Page (optional)			70.41

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

S

Purpose of Disbursement Thank You Cards Disbursement Thank You Cards Transaction ID : SB17.5592		J					
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) A. Jaynes Hallmark Mailing Address 1283 Promenade Place City State Zip Code Eagan MN 55122 Purpose of Disbursement Thank You Cards Candidate Name Other (specify) Date of Disbursement this Pericular Transaction ID: SB17.5592 Amount of Each Disbursement this Pericular Transaction ID: SB17.5592 Amount of Each Disbursement this Pericular Transaction ID: SB17.5592 Amount of Each Disbursement this Pericular Transaction ID: SB17.5592 Amount of Each Disbursement Transaction ID: SB17.5592			-	-	for each category	nedule(s) of the	(check only one) 18 19a 19b
Full Name (Last, First, Middle Initial) A. Jaynes Hallmark Mailing Address 1283 Promenade Place City State Zip Code Eagan MN 55122 Purpose of Disbursement Thank You Cards Candidate Name Office Sought: House President State: District: Full Name (Last, First, Middle Initial) B. Mailing Address City State Zip Code Gategory/ Type Office Sought: House President State: District: Full Name (Last, First, Middle Initial) B. Mailing Address City State Zip Code Amount of Each Disbursement this Peric Category/ Type Office Sought: House President State: District: Full Name (Last, First, Middle Initial) B. Mailing Address City State Zip Code Amount of Each Disbursement this Peric Category/ Type Office Sought: House President State: District: District: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Amount of Each Disbursement this Peric Category/ Type Date of Disbursement Type President State: District: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Amount of Each Disbursement this Peric Category/ Type Office Sought: Amount of Each Disbursement this Peric Category/ Type Category/ Type							
A. Jaynes Hallmark Mailing Address 1283 Promenade Place City State Zip Code Eagan MN 55122 Purpose of Disbursement Thank You Cards Candidate Name Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) B. Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House Disbursement For: 2014 Purpose of Disbursement Candidate Name Office Sought: Senate President Senate Primary General Primary General President State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Amount of Each Disbursement this Peric Category/ Type Date of Disbursement this Peric Category/ Type Office Sought: House Disbursement For: Senate President Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Amount of Each Disbursement this Peric Category/ Type Amount of Each Disbursement this Peric Category/ Type Amount of Each Disbursement this Peric Category/ Type Category/ Type Category/ Type			• •				
City State Zip Code Eagan MN 55122 Purpose of Disbursement Thank You Cards Candidate Name Office Sought: House Senate Primary Category/ Full Name (Last, First, Middle Initial) B. Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House Senate Primary Category/ Type Office Sought: House Disbursement Candidate Name Office Sought: House Primary Category/ Type Office Sought: House Disbursement Candidate Name Office Sought: House Primary General Primary General Disbursement Candidate Name Office Sought: House Disbursement For: Senate Primary General Disbursement Candidate Name Category/ Type Office Sought: Amount of Each Disbursement this Peric Date of Disbursement Amount of Each Disbursement Amount of Each Disbursement Category/ Type Amount of Each Disbursement Amount of Each Disbursement Category/ Type Amount of Each Disbursement this Peric	Α.						
Eagan MN 55122 Purpose of Disbursement Thank You Cards Candidate Name Office Sought: House Senate President Other (specify) State: District: Full Name (Last, First, Middle Initial) B. Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House President Senate Primary Amount of Each Disbursement this Pericular Senate President State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House President State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Date of Disbursement this Pericular State: District: Amount of Each Disbursement M M / D D / Y Y Y Y Y Date of Disbursement M M / D D / Y Y Y Y Y Amount of Each Disbursement M M M / D D / Y Y Y Y Y Amount of Each Disbursement M M M / D D / Y Y Y Y Y Amount of Each Disbursement Category/ Type		Mailing Address	1283 Promenade Plac	ce			
Thank You Cards Candidate Name Category/ Type Office Sought: House		Eagan					Amount of Each Disbursement this Period
Office Sought:		Thank You Card					
Senate President District: Full Name (Last, First, Middle Initial) B. Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House Primary General Office Sought: Primary General Office Sought: House Primary General Office Sought: Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Amount of Each Disbursement this Period Other (specify) Date of Disbursement this Period Amount of Each Disbursement Other (specify) Amount of Each Disbursement this Period Other (specify) Category/ Type Other (specify) Category/ Type Other (specify) Category/ Type			House	Dishursement For	· 2014		
Full Name (Last, First, Middle Initial) B. Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House Senate Primary General Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Amount of Each Disbursement this Period Disbursement For: Senate Primary General Other (specify) Date of Disbursement this Period Disbursement Amount of Each Disbursement Amount of Each Disbursement Amount of Each Disbursement Category/ Type Amount of Each Disbursement this Period Disbu		Office Sought.	Senate President	Primary	X General		
B. Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Candidate Name Disbursement For: Senate Primary General President Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Purpose of Disbursement Amount of Each Disbursement this Period Date of Disbursement M M M / D D / Y Y Y Y Y Y Amount of Each Disbursement this Period Amount of Each Disbursement M Amount of Each Disbursement M Amount of Each Disbursement Category/ Type Category/ Type	_						
City State Zip Code Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Amount of Each Disbursement this Period Category/ Type			Tirst, Middle Illitial)				
Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Amount of Each Disbursement this Perice Category/ Type		Mailing Address					
Candidate Name Category/ Type Office Sought: House Disbursement For: Senate President Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type				State	Zip Code		Amount of Each Disbursement this Period
Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Amount of Each Disbursement this Period Category/ Type			ırsement				
Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type General Other (specify) Date of Disbursement M M / D D / Y Y Y Y Y Category/ Type		Candidate Name					
State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type		Office Sought:	Senate	Primary	General		
C. Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Date of Disbursement Amount of Each Disbursement this Period Category/ Type		State:	District:				
City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Candidate Name Category/ Type	C.	Full Name (Last,	First, Middle Initial)				Date of Disbursement
Purpose of Disbursement Candidate Name Category/ Type		Mailing Address					M M / D D / Y Y Y
Candidate Name Category/ Type		City		State Zip	p Code		Amount of Each Disbursement this Period
Type		Purpose of Disbu	irsement				
Office Cought:							
Senate Primary General President Other (specify)		Office Sought:			General		
State: District:		State:			r~ <i>j</i> /		

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

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

163.74

234.15

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

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×	13a
	13b

44

Detailed Summary Page Transaction ID: SC/10.4392 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) ullet1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 16554.96 0.00 16554.96 **TERMS** Date Incurred Date Due Interest Rate Secured: 29 ^M 05^M Ž012 1/1/2020 0.00 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE

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×	13a
	13h

44

(check only one) Detailed Summary Page Transaction ID: SC/10.4365 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) \blacktriangledown 1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 10000.00 0.00 10000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 07^M ^D19^D Ž012 0.00 NA % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE

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	13h

44

(check only one) Detailed Summary Page Transaction ID: SC/10.4381 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) ullet1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D24^D ^M 07^M Ž012 0.00 NA % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE

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X	13a
	13h

44

(check only one) Detailed Summary Page Transaction ID: SC/10.4468 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) ullet1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 5.00 0.00 5.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 07^M ^D24^D Ž012 0.00 NA % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 5.00 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.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

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	13b

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Detailed Summary Page Transaction ID: SC/10.4128 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) ullet1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 07^M ^D26 Ž012 0.00 NA % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

Use separate schedule(s) for each category of the

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Detailed Summary Page Transaction ID: SC/10.4389 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) ullet1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 01 ^M08^M Ž012 0.00 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

Use separate schedule(s)

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DANS			Detailed Summary Pa	
AME OF COMMITTEE (In Full) Gerson for Congress			Transa	ction ID : SC/10.4129
LOAN SOURCE Full Name (Last, Find David Adam Gerson Mailing Address 1035 Summit Ave	rst, Middle Initial)	[PERSONAL FUNDS]	Election: 2012 Primary General Other (specify)
City	State	ZIP Cod	de	
South Saint Paul	MN	55075		
Original Amount of Loan 5000.0		tive Payment To	Date Bal	ance Outstanding at Close of This Period
TERMS Date Incurred M08M / D10D / Y 2012 List All Endorsers or Guarantors (if	M M /	Date Due	Interest Rat	
Full Name (Last, First, Middle Init)		source	Name of Employer	
Mailing Address			Occupation	
City	tate ZIP Co	ode	Amount Guaranteed Outstanding:	7
2. Full Name (Last, First, Middle Initia	al)		Name of Employer	
Mailing Address			Occupation	
City	tate ZIP Co	ode	Amount Guaranteed Outstanding:	9 9 9 9
3. Full Name (Last, First, Middle Initia	al)		Name of Employer	
Mailing Address			Occupation	
City	tate ZIP Co	ode	Amount Guaranteed Outstanding:	7
4. Full Name (Last, First, Middle Initia	al)		Name of Employer	
Mailing Address			Occupation	
City	tate ZIP Co	ode	Amount Guaranteed Outstanding:	7 7 7
SUBTOTALS This Period This Page (op	<u> </u>			5000.00
				ward to appropriate line of Summary.

Use separate schedule(s)

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DANS			Detailed Summary Pag		13a 13b
AME OF COMMITTEE (In Full)			Transac	ction ID : SC/10.4470	
Gerson for Congress					
LOAN SOURCE Full Name David Adam Gerson	(Last, First, Middle	e Initial)	[PERSONAL FUNDS]	Election: 2012 Primary General	
Mailing Address 1035 Summit Ave				Other (specify)	
City	St	ate ZIP C	Code		
South Saint Paul		MN 5507	5		
Original Amount of Loan	(Cumulative Payment ⁻	To Date Bala	ance Outstanding at Close of	This Period
, , , ,	6.00		0.00		6.00
TERMS Data Inquired		Data Du	a Interest Date	e Secure	
Date Incurred	Ž01Ž Y	Date Du	e Interest Rate	% (apr)	X
List All Endorsers or Guara	ntors (if any) to L	oan Source		Ye	es No
1. Full Name (Last, First, M	iddle Initial)		Name of Employer		
Mailing Address			Occupation		
			Amount Guaranteed		_
City	State	ZIP Code	Outstanding:	7	
2. Full Name (Last, First, Mic	ddle Initial)		Name of Employer		
Mailing Address			Occupation		
City	State	ZIP Code	Amount Guaranteed		П
3. Full Name (Last, First, Mid	ddle Initial)		Outstanding: Name of Employer		
, , ,					
Mailing Address			Occupation		
City	State	ZIP Code	Amount Guaranteed]
4. Full Name (Last, First, Mid	ddle Initial)		Outstanding: Name of Employer	,	
Mailing Address			Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:	7 7 7	
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Use separate schedule(s) for each category of the

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DANS			Detailed Summary Page	ge (Crieck Only Orie) 13b
AME OF COMMITTEE (In Full) Gerson for Congress			Transac	ction ID : SC/10.4130
LOAN SOURCE Full Name (La David Adam Gerson	st, First, Middle	e Initial)	[PERSONAL FUNDS]	Election: 2012 Primary
				General
Mailing Address 1035 Summit Ave				Other (specify)
City	Si	tate ZIP Co	ode	
South Saint Paul		MN 55075		
Original Amount of Loan	(Cumulative Payment To	Date Bala	ance Outstanding at Close of This Period
1	1000.00	9	0.00	1000.00
TERMS Date Incurred		Date Due	Interest Rat	e Secured:
M ₀₈ M / D ₁₇ D / Y Ž0	12 Y	M / D D / Y	NA O.00	% (apr)
List All Endorsers or Guaranto	ors (if any) to L	_oan Source		Yes No
1. Full Name (Last, First, Midd	le Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	9 1 9 1 9
2. Full Name (Last, First, Middle	e Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	7 7 7 7
3. Full Name (Last, First, Middle	e Initial)		Name of Employer	
Mailing Address			Occupation	
City	Chaha	ZID Code	Amount Guaranteed	
City		ZIP Code	Outstanding:	y y w
4. Full Name (Last, First, Middle	e Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	7 7 7 7
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(check only one) Detailed Summary Page Transaction ID: SC/10.4131 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) ullet1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 1000.00 0.00 1000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 20 ^M08^M Ž012 0.00 NA % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

Use separate schedule(s) for each category of the

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Detailed Summary Page Transaction ID: SC/10.4442 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) ullet1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 479.33 0.00 479.33 **TERMS** Date Incurred Date Due Interest Rate Secured: 22 ^M 02^M 2013 1/1/2020 0.00 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

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

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JAN5		Detailed Summary Pag	ie (check only one)
AME OF COMMITTEE (In Full) Gerson for Congress		Transac	tion ID : SC/10.4444
LOAN SOURCE Full Name (Last, First, Mic David Adam Gerson	ddle Initial)	[PERSONAL FUNDS]	Election: 2014 Primary General
Mailing Address 1035 Summit Ave			Other (specify)
City South Saint Paul	State ZIP Coo MN 55075	le	
Original Amount of Loan	Cumulative Payment To	Date Bala	nce Outstanding at Close of This Period
Date Incurred M 02 / 25 / Y 2013	Date Due	Interest Rate	
List All Endorsers or Guarantors (if any) t	o Loan Source	N (5)	
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:	7
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	9
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	9 9
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OTALS This Period (last page in this line only Carry outstanding balance only to LINE 3, Sci	•		vard to appropriate line of Summarv.

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DANS			Detailed Summary Page	
AME OF COMMITTEE (In Full)			Transac	ction ID : SC/10.4464
Serson for Congress				
LOAN SOURCE Full Name (Las	t, First, Midd	le Initial)	[PERSONAL FUNDS]	Election: 2014
David Adam Gerson				Y Primary General
Mailing Address 1035 Summit Ave				Other (specify)
City	S	state ZIP Co	ode	
South Saint Paul		MN 55075		
Original Amount of Loan		Cumulative Payment To	Date Bala	ance Outstanding at Close of This Period
30	00.00	9	0.00	3000.00
TERMS Date Incurred		Date Due	Interest Rate	e Secured:
M 03 M / D 26 D / Y Ž01:	ў Y	M / D D / Y	1/1/2020 Y 0.00	% (apr) Yes No
List All Endorsers or Guarantor	s (if any) to	Loan Source		Tes INO
1. Full Name (Last, First, Middle	lnitial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed	
	"		Outstanding:	7 7 7
2. Full Name (Last, First, Middle	Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed	
		211 Gode	Outstanding:	9
3. Full Name (Last, First, Middle	Initial)		Name of Employer	
Mailing Address			Occupation	
0''	01.1	710.0	Amount Guaranteed	
City	State	ZIP Code	Outstanding:	7
4. Full Name (Last, First, Middle	Initial)		Name of Employer	
Mailing Address			Occupation	
			Amount	
City	State	ZIP Code	Guaranteed Outstanding:	9 9 9 9
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Use separate schedule(s) for each category of the

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Detailed Summary Page Transaction ID: SC/10.4502 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) ullet1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 4000.00 0.00 4000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D 18^D ^M 04 2013 0.00 1/1/20 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

Use separate schedule(s) for each category of the

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Detailed Summary Page Transaction ID: SC/10.4545 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) ullet1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 4000.00 0.00 4000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D 13^D ^M 05^M 2013 0.00 1/1/20 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

Use separate schedule(s) for each category of the

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DANS			Detailed Summary I		(check only on	e) <u>.</u>	13a 13b
AME OF COMMITTEE (In Full)			Trans	saction	ID : SC/10.4591		
Gerson for Congress							
LOAN SOURCE Full Name (Last, F	irst, Middle Initial)		[PERSONAL FUNDS	ı Ele	ction: 2014		
David Adam Gerson	,		[ENGONAL TONDO		Primary		
Mailing Address 1035 Summit Ave					General Other (specify)	•	
City	State	ZIP Cod	le				
South Saint Paul	MN	55075					
Original Amount of Loan	Cumulativ	e Payment To	Date B	salance	Outstanding at Cl	ose of Th	nis Period
5000.	00	2 2	0.00		3 3	5000	0.00
TERMS Date Incurred		Date Due	Interest F	late		Secured:	:
M06 ^M / D10 ^D / Y 2013	Y M M /	D D / Y	1/1/20 Y	.00	% (apr)	Yes	No
List All Endorsers or Guarantors (i	f any) to Loan Sou	urce				165	INO
1. Full Name (Last, First, Middle In	tial)		Name of Employer				
Mailing Address			Occupation				
City	State ZIP Cod	e	Amount Guaranteed Outstanding:	- 7			
2. Full Name (Last, First, Middle Init	ial)		Name of Employer				
Mailing Address			Occupation				
		-	Amount				
City	State ZIP Code	e	Guaranteed Outstanding:				
3. Full Name (Last, First, Middle Init	ial)		Name of Employer				
Mailing Address			Occupation				
		_	Amount	-			7
City	State ZIP Code	e	Guaranteed Outstanding:	7	7		
4. Full Name (Last, First, Middle Init	ial)		Name of Employer				
Mailing Address			Occupation				
		-	Amount	-			_
City	State ZIP Code	e	Guaranteed Outstanding:	7	9	-	
		'					
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Detailed Summary Page Transaction ID: SC/10.4622 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) ullet1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 131.12 0.00 131.12 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D30 ^M06^M 2013 0.00 1/1/20 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

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OANS			Detailed Summary Pag		(check only on	e)	-	13a 13b
AME OF COMMITTEE (In Full)		Transac	ction I	D : SC/10.5169			
Gerson for Congress								
LOAN SOURCE Full Name	e (Last, First, Middl	e Initial)	[PERSONAL FUNDS]		ction: 2014			
David Adam Gerson				X	Primary General			
Mailing Address 1035 Summit Ave					Other (specify)	▼		
City	S	tate ZIP Co	de					
South Saint Paul		MN 55075						
Original Amount of Loan		Cumulative Payment To	Date Bala	ance C	Outstanding at C	lose of Th	nis i	Period
yy	5000.00		0.00		2 2	5000).00)
TERMS Date Incurred	d	Date Due	Interest Rate	е		Secured:	:	
M 07 / D D / Y	Ž013 Y	M / D D / Y	1)/1/20 Y 0.00)	% (apr)	Yes	\triangleright	No
List All Endorsers or Guar		Loan Source						
1. Full Name (Last, First, N	Middle Initial)		Name of Employer					
Mailing Address			Occupation					
			Amount	_			_	
City	State	ZIP Code	Guaranteed Outstanding:	7		-	_	
2. Full Name (Last, First, M	iddle Initial)		Name of Employer					
Mailing Address			Occupation					
			Amount Guaranteed				Ŧ	
City	State	ZIP Code	Outstanding:	7	7	-	_	
3. Full Name (Last, First, M	iddle Initial)		Name of Employer					
Mailing Address			Occupation					
			Amount	-			╗	
City	State	ZIP Code	Guaranteed Outstanding:	7	7	-	_	
4. Full Name (Last, First, M	iddle Initial)		Name of Employer					
Mailing Address			Occupation					
			Amount				Ŧ	
City	State	ZIP Code	Guaranteed Outstanding:	7	-		_	
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(check only one) Detailed Summary Page Transaction ID: SC/10.5170 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) ullet1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 07^M ^D29^D 2013 0.00 1/1/20 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

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Detailed Summary Page Transaction ID: SC/10.5172 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) ullet1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D 19^D ^M08^M 2013 0.00 1/1/20 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

Use separate schedule(s)

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AME OF COMMITTEE (In Full) Gerson for Congress			Transac	etion ID : SC/10.5173
LOAN SOURCE Full Name (David Adam Gerson Mailing Address 1035 Summit Ave	Last, First, Middl	e Initial)	[PERSONAL FUNDS]	Election: 2014 X Primary General Other (specify) ▼
		tate ZIP	Code	
City South Saint Paul		MN 550		
Original Amount of Loan		Cumulative Payment	To Date Bala	ance Outstanding at Close of This Period
	5000.00	,	0.00	5000.00
	2013 Y	Date D	ue Interest Rate	
List All Endorsers or Guarar 1. Full Name (Last, First, Mid		Loan Source	Name of Employer	
Mailing Address	,		Occupation	
Mailing Address				
City	State	ZIP Code	Amount Guaranteed Outstanding:	9
2. Full Name (Last, First, Mide	dle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	7
3. Full Name (Last, First, Mide	dle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	9 9
4. Full Name (Last, First, Mide	dle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	7
SUBTOTALS This Period This Page 1	age (optional)		<u> </u>	5000.00
TOTALS This Period (last page i	n this line only).		······	9 9 9
Carry outstanding balance only	to LINE 3. Sched	dule D, for this line.	If no Schedule D. carry forv	vard to appropriate line of Summary.

Use separate schedule(s) for each category of the

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OF

DANS			Detailed Summary Page	
AME OF COMMITTEE (In Full)			Transac	ction ID : SC/10.5174
Gerson for Congress				
LOAN SOURCE Full Name (Las	t, First, Mido	lle Initial)	[PERSONAL FUNDS]	Election: 2014
David Adam Gerson				Primary General
Mailing Address 1035 Summit Ave				Other (specify)
City	Ç	State ZIP Co	de	
South Saint Paul		MN 55075		
Original Amount of Loan		Cumulative Payment To	Date Bala	ance Outstanding at Close of This Period
30	00.00		0.00	3000.00
TERMS Date Incurred		Date Due	Interest Rate	e Secured:
M ₀₉ M / D ₃₀ D / Y 201	ў Y	M / D D / Y	1)/1/20 Y 0.00	% (apr)
List All Endorsers or Guarantor	s (if any) to	Loan Source		Yes No
1. Full Name (Last, First, Middle	nitial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Middle	Initial)		Name of Employer	<u> </u>
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed	
			Outstanding:	7
3. Full Name (Last, First, Middle	Initial)		Name of Employer	
Mailing Address			Occupation	
011		710.0	Amount Guaranteed	
City	State	ZIP Code	Outstanding:	7
4. Full Name (Last, First, Middle	Initial)		Name of Employer	
Mailing Address			Occupation	
			Amount	
City	State	ZIP Code	Guaranteed Outstanding:	9 9 9
SUBTOTALS This Period This Page	(optional)		·····	3000.00
OTALS This Period (last page in the	nis line only)		·····	
Carry outstanding balance only to	LINE 3, Sche	dule D, for this line. If	no Schedule D, carry for	ward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

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Detailed Summary Page Transaction ID: SC/10.5202 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) ullet1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 04 ^M 10^M 2013 0.00 1/1/20 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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OANS		Detailed Summary Pag	
AME OF COMMITTEE (In Full)		Transac	etion ID : SC/10.5203
Gerson for Congress			
LOAN SOURCE Full Name (Last, First, M	iddle Initial)	[PERSONAL FUNDS]	Election: 2014
David Adam Gerson	,	[ENGONAL TONDO]	Primary
Mailing Address			General Other (appoint)
1035 Summit Ave			Other (specify) ———————————————————————————————————
City	State ZIP Co	ode	
South Saint Paul	MN 55075		
Original Amount of Loan	Cumulative Payment To	Date Bala	ance Outstanding at Close of This Period
5000.00	,	0.00	5000.00
TERMS Date Incurred	Date Due	Interest Rate	e Secured:
M ₁₀ M / D ₁₆ D / Y 2013	M M / D D / Y	1/1/20 Y 0.00	
			% (apr) Yes No
List All Endorsers or Guarantors (if any) 1. Full Name (Last, First, Middle Initial)	to Loan Source	Name of Employer	
1. Tuli Name (Last, Flist, Middle Illian)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	9 9 9
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		0	
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	9
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	7
SUBTOTALS This Period This Page (optional)		······································	5000.00
TOTALS This Period (last page in this line on	ıly)		7
Carry outstanding balance only to LINE 3, So	chedule D. for this line. If	no Schedule D. carry fore	vard to appropriate line of Summarv.
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Use separate schedule(s) for each category of the

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Detailed Summary Page Transaction ID: SC/10.5204 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) ullet1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 23 ^M 10^M 2013 0.00 1/1/20 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

Use separate schedule(s) for each category of the

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Detailed Summary Page Transaction ID: SC/10.5205 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) ullet1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: м _{= М} 04 2013 0.00 1/1/20 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

Use separate schedule(s)

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DANS			Detailed Summary Page		13a 13b
AME OF COMMITTEE (In Full)			Transac	ction ID : SC/10.5206	
Gerson for Congress					
LOAN SOURCE Full Name David Adam Gerson	(Last, First, Middl	e Initial)	[PERSONAL FUNDS]	Election: 2014 Primary General	
Mailing Address 1035 Summit Ave				Other (specify)	
City	S	tate ZIP Co	ode		
South Saint Paul		MN 55075			
Original Amount of Loan		Cumulative Payment To	Date Bala	ance Outstanding at Close of	This Period
7	4000.00		0.00	40	00.00
Date Incurred	ž013 ^Y	Date Due	Interest Rate		ed:
List All Endorsers or Guara	antors (if any) to	oan Source		Ye (api)	s No
Full Name (Last, First, N	, ,,		Name of Employer		
Mailing Address			Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:	9 1 9 1 1 9	
2. Full Name (Last, First, Mi	ddle Initial)		Name of Employer		
Mailing Address			Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:	7 7 7	
3. Full Name (Last, First, Mi	ddle Initial)		Name of Employer		
Mailing Address			Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:	7 7 7 7	
4. Full Name (Last, First, Mi	ddle Initial)		Name of Employer		
Mailing Address			Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:	9 9 9 9	
SUBTOTALS This Period This	Page (optional)		·····	40	00.00
TOTALS This Period (last page	in this line only).			, ,	
Carry outstanding balance onl	y to LINE 3. Sched	lule D, for this line. If	no Schedule D. carry for	ward to appropriate line of S	Summarv.

Use separate schedule(s) for each category of the

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Detailed Summary Page Transaction ID: SC/10.5207 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) \blacktriangledown 1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 3000.00 0.00 3000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: м _{= М} ^D 19^D 2013 0.00 1/1/20 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

Use separate schedule(s) for each category of the

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(check only one) Detailed Summary Page Transaction ID: SC/10.5208 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) \blacktriangledown 1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 4000.00 0.00 4000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: м _{= М} ^D29^D 2013 0.00 1/1/20 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

Use separate schedule(s) for each category of the

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(check only one) Detailed Summary Page Transaction ID: SC/10.5209 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) \blacktriangledown 1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 4000.00 0.00 4000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 12^M 09 2013 0.00 1/1/20 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

Use separate schedule(s) for each category of the

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(check only one) Detailed Summary Page Transaction ID: SC/10.5210 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) \blacktriangledown 1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 3000.00 0.00 3000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^м 12^м ^D16 2013 0.00 1/1/20 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

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Detailed Summary Page Transaction ID: SC/10.5542 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) \blacktriangledown 1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 3000.00 0.00 3000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 01 ^M 08 ž014 0.00 1/1/20 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

Use separate schedule(s) for each category of the

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Detailed Summary Page Transaction ID: SC/10.5543 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) \blacktriangledown 1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 01 ^M ^D16 ž014 0.00 1/1/20 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

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Detailed Summary Page Transaction ID: SC/10.5544 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) \blacktriangledown 1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 10000.00 0.00 10000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D26 ^M 02^M ž014 0.00 1/1/20 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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(check only one) Detailed Summary Page Transaction ID: SC/10.5587 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) \blacktriangledown 1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 391.00 0.00 391.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 10^M ^D28^D ž014 0.00 NA % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 391.00 147567.41 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.