

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 CRAFT FOR CONGRESS

ADDRESS (number and street) PO BOX 22037 EAGAN MN 55122 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00546465 3. IS THIS REPORT NEW (N) OR AMENDED (A) MN 02 CITY STATE ZIP CODE STATE DISTRICT

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 M M / D D / Y Y Y Y in the State of (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y 10 / 01 / 2013 through M M / D D / Y Y Y Y 12 / 31 / 2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Thomas Craft

Signature of Treasurer Thomas Craft [Electronically Filed] Date M M / D D / Y Y Y Y 01 / 29 / 2014

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
CRAFT FOR CONGRESS

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

	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))....	671.14	22676.92
(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)).....	671.14	22676.92
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	5201.18	8883.71
(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)).....	5201.18	8883.71
8. Cash on Hand at Close of Reporting Period (from Line 27).....	8978.66	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

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

CRAFT FOR CONGRESS

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

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of <input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2013"/> (date of general election)	COLUMN C Total for <input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2013"/> (date after general election) through <input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2013"/> (last day of reporting period)
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)		
<input type="text" value="250.00"/>	<input type="text" value="15962.46"/>	<input type="text" value="0.00"/>
(ii) Unitemized		
<input type="text" value="375.00"/>	<input type="text" value="5107.49"/>	<input type="text" value="225.00"/>
(iii) Total of contributions from individuals		
<input type="text" value="625.00"/>	<input type="text" value="21069.95"/>	<input type="text" value="225.00"/>
(b) Political Party Committees		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) Other Political 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)

PAGE 4 / 13

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		
46.14	1606.97	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
671.14	22676.92	225.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0.00	0.00	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)		
671.14	22676.92	225.00

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 5 / 13

Write or Type Committee Name

CRAFT FOR CONGRESS

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

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		
<input type="text" value="5201.18"/>	<input type="text" value="8883.71"/>	<input type="text" value="5039.55"/>
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)

PAGE 6 / 13

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 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)

5201.18	8883.71	5039.55
---------	---------	---------

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))

671.14	22676.92	225.00
--------	----------	--------

IV. NET OPERATING EXPENDITURES

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

5201.18	8883.71	5039.55
---------	---------	---------

V. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	13508.70
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	671.14
25. SUBTOTAL (add Line 23 and Line 24).....	14179.84
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	5201.18
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	8978.66

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 13		
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
CRAFT FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
David Elstad

Mailing Address 32240 70th Ave.

City Cushing State MN Zip Code 56443

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013

Transaction ID : SA11Al.4369

Amount of Each Receipt this Period
250.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

250.00

250.00

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

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

A. Full Name (Last, First, Middle Initial)
Thomas Craft

Mailing Address 1450 Richards Ct.

City Eagan State MN Zip Code 55122

FEC ID number of contributing federal political committee. **C H4MN02128**

Name of Employer Perficent Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1591.97

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2013

Transaction ID : SA11D.4422

Amount of Each Receipt this Period
31.14

In-kind - Online Advertising

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

Mailing Address 1450 Richards Ct.

City Eagan State MN Zip Code 55122

FEC ID number of contributing federal political committee. **C H4MN02128**

Name of Employer Perficent Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1606.97

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2013

Transaction ID : SA11D.4420

Amount of Each Receipt this Period
15.00

In-kind - Facebook Advertising

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

46.14

46.14

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 13			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)
CRAFT FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2013
Mailing Address 366 Summer Street		Amount of Each Disbursement this Period 0.99 Transaction ID : SB17.4415
City Somerville State MA Zip Code 02144-3132	Purpose of Disbursement Payment Processing Fee 003 Category/Type	
Candidate Name CRAFT FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MN District: 02		

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2013
Mailing Address 366 Summer Street		Amount of Each Disbursement this Period 3.96 Transaction ID : SB17.4414
City Somerville State MA Zip Code 02144-3132	Purpose of Disbursement Payment Processing Fee 003 Category/Type	
Candidate Name CRAFT FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MN District: 02		

Full Name (Last, First, Middle Initial) c. Acuity Insurance		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2013
Mailing Address P.O. Box 718		Amount of Each Disbursement this Period 186.20 Transaction ID : SB17.4396
City Sheboygan State WI Zip Code 53082	Purpose of Disbursement Liability Insurance 001 Category/Type	
Candidate Name CRAFT FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MN District: 02		

SUBTOTAL of Disbursements This Page (optional).....	191.15
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 13
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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)
CRAFT FOR CONGRESS

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Automatic Data Processing		M M / D D / Y Y Y Y 12 / 12 / 2013
Mailing Address 100 Northwest Point Blvd		Amount of Each Disbursement this Period
City Elk Grove Village State IL Zip Code 60007	Purpose of Disbursement Payroll Processing Tax and Financial Services	203.12
Candidate Name CRAFT FOR CONGRESS	Category/Type 001	Transaction ID : SB17.4400
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MN District: 02		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. Automatic Data Processing		M M / D D / Y Y Y Y 12 / 12 / 2013
Mailing Address 100 Northwest Point Blvd		Amount of Each Disbursement this Period
City Elk Grove Village State IL Zip Code 60007	Purpose of Disbursement Payroll Processing Tax and Financial Services	478.39
Candidate Name CRAFT FOR CONGRESS	Category/Type 001	Transaction ID : SB17.4401
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MN District: 02		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. Automatic Data Processing		M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address 100 Northwest Point Blvd		Amount of Each Disbursement this Period
City Elk Grove Village State IL Zip Code 60007	Purpose of Disbursement Payroll Processing Tax and Financial Services	25.00
Candidate Name CRAFT FOR CONGRESS	Category/Type 001	Transaction ID : SB17.4403
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MN District: 02		

SUBTOTAL of Disbursements This Page (optional).....	706.51
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 13		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
CRAFT FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Automatic Data Processing		Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2013
Mailing Address 100 Northwest Point Blvd		Amount of Each Disbursement this Period 478.38 Transaction ID : SB17.4404
City Elk Grove Village State IL Zip Code 60007	Purpose of Disbursement Payroll Processing Tax and Financial Services 001 Category/Type	
Candidate Name CRAFT FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MN District: 02		

Full Name (Last, First, Middle Initial) B. Daniel Cox		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2013
Mailing Address 417 W Cherry St		Amount of Each Disbursement this Period 565.31 Transaction ID : SB17.4406
City Stillwater State MN Zip Code 55082	Purpose of Disbursement Salary 001 Category/Type	
Candidate Name CRAFT FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MN District: 02		

Full Name (Last, First, Middle Initial) c. Daniel Cox		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2013
Mailing Address 417 W Cherry St		Amount of Each Disbursement this Period 1058.45 Transaction ID : SB17.4407
City Stillwater State MN Zip Code 55082	Purpose of Disbursement Salary 001 Category/Type	
Candidate Name CRAFT FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MN District: 02		

SUBTOTAL of Disbursements This Page (optional).....	2102.14
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 13
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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)
CRAFT FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Daniel Cox		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2013
Mailing Address 417 W Cherry St		Amount of Each Disbursement this Period 1058.46 Transaction ID : SB17.4408
City Stillwater	State MN	
Zip Code 55082	Purpose of Disbursement Salary	Category/ Type 001
Candidate Name CRAFT FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MN District: 02	

Full Name (Last, First, Middle Initial) B. Thomas Craft		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2013
Mailing Address 1450 Richards Ct.		Amount of Each Disbursement this Period 31.14 Transaction ID : SB17.4423
City Eagan	State MN	
Zip Code 55122	Purpose of Disbursement In-kind - Online Advertising	Category/ Type
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MN District: 02	

Full Name (Last, First, Middle Initial) c. Thomas Craft		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2013
Mailing Address 1450 Richards Ct.		Amount of Each Disbursement this Period 15.00 Transaction ID : SB17.4421
City Eagan	State MN	
Zip Code 55122	Purpose of Disbursement In-kind - Facebook Advertising	Category/ Type
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MN District: 02	

SUBTOTAL of Disbursements This Page (optional).....	1104.60
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 13			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)
CRAFT FOR CONGRESS

Full Name (Last, First, Middle Initial) A. McNurlin & Associates Inc			Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2013		
Mailing Address 3036 McCarthy Ridge Rd			Amount of Each Disbursement this Period 294.00		
City Eagan	State MN	Zip Code 55121	Transaction ID : SB17.4398		
Purpose of Disbursement MN Worker's Compensation Insurance		Category/ Type 001			
Candidate Name CRAFT FOR CONGRESS					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: MN	District: 02				

Full Name (Last, First, Middle Initial) B. Walmart			Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2013		
Mailing Address 1360 Town Centre Dr			Amount of Each Disbursement this Period 128.29		
City Eagan	State MN	Zip Code 55123	Transaction ID : SB17.4391		
Purpose of Disbursement Phones and Phone Minutes		Category/ Type 003			
Candidate Name CRAFT FOR CONGRESS					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: MN	District: 02				

Full Name (Last, First, Middle Initial) c. Walmart			Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2013		
Mailing Address 1360 Town Centre Dr			Amount of Each Disbursement this Period 128.55		
City Eagan	State MN	Zip Code 55123	Transaction ID : SB17.4392		
Purpose of Disbursement Phone Minutes		Category/ Type 003			
Candidate Name CRAFT FOR CONGRESS					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: MN	District: 02				

SUBTOTAL of Disbursements This Page (optional).....	550.84
TOTAL This Period (last page this line number only).....	4655.24