

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

PARRY FOR CONGRESS

ADDRESS (number and street)

PO BOX 188

Check if different than previously reported. (ACC)

WASECA

MN

56093

2. **FEC IDENTIFICATION NUMBER**

C C00503706

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

MN

01

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 08 / 14 / 2012 in the State of MN

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

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

Election on / / in the State of

5. Covering Period

07 / 01 / 2012 through 07 / 25 / 2012

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 Dale DeRaad

Signature of Treasurer Dale DeRaad

[Electronically Filed]

Date

07 / 05 / 2013

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

Office Use Only								
-----------------	--	--	--	--	--	--	--	--

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
PARRY 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))....	8890.00	113414.94
(b) Total Contribution Refunds (from Line 20(d))	0.00	900.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	8890.00	112514.94
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	11701.30	83239.52
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.19
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	11701.30	83239.33
8. Cash on Hand at Close of Reporting Period (from Line 27).....	29275.61	
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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

PARRY FOR CONGRESS

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	7500.00	90819.44
(ii) Unitemized.....	1390.00	19525.66
(iii) TOTAL of contributions from individuals ▶	8890.00	110345.10
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	850.00
(d) The Candidate.....	0.00	2219.84
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	8890.00	113414.94
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.19
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	8890.00	113415.13

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	11701.30	83239.52
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	900.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	900.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	11701.30	84139.52

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	32086.91
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	8890.00
25. SUBTOTAL (add Line 23 and Line 24).....	40976.91
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	11701.30
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	29275.61

**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 5 OF 23
	<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)
PARRY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mitchell Davis

Mailing Address PO Box 14

City St Peter State MN Zip Code 56082

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

Name of Employer Davisco Foods International Occupation Food Processor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 25 / 2012

Transaction ID : SA11AI.5621

Amount of Each Receipt this Period
 5000.00

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

Mailing Address PO Box 14

City St Peter State MN Zip Code 56082

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

Name of Employer Davisco Foods International Occupation Food Processor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 25 / 2012

Transaction ID : SA11AI.5624

Amount of Each Receipt this Period
 -2500.00

Redesignate:
[MEMO ITEM]

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

Mailing Address PO Box 14

City St Peter State MN Zip Code 56082

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

Name of Employer Davisco Foods International Occupation Food Processor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 25 / 2012

Transaction ID : SA11AI.5625

Amount of Each Receipt this Period
 2500.00

Redesignate: General
[MEMO ITEM]

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

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

5000.00

**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 6 OF 23
	<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)
PARRY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Douglas Johnson

Mailing Address 55000 Sunrise Ln

City Mankato State MN Zip Code 56001

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

Name of Employer None Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 03 / 2012

Transaction ID : SA11AI.5493

Amount of Each Receipt this Period
 500.00

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

Mailing Address 4219 Cass Ave

City Webster State MN Zip Code 55088

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

Name of Employer Midstate Reclamation Occupation Manager

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 13 / 2012

Transaction ID : SA11AI.5520

Amount of Each Receipt this Period
 500.00

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

Mailing Address PO Box 978

City Winona State MN Zip Code 55987

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

Name of Employer Fastenal Occupation CEO

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 02 / 2012

Transaction ID : SA11AI.5491

Amount of Each Receipt this Period
 1000.00

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

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

2000.00

**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 7 OF 23
	<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)
PARRY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Robert Kierlin

Mailing Address **PO Box 978**

City **Winona** State **MN** Zip Code **55987**

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

Name of Employer **Fastenal** Occupation **CEO**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 02 / 2012

Transaction ID : SA11AI.5643

Amount of Each Receipt this Period
 _____ **-500.00**

Redesignate:
[MEMO ITEM]

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

Mailing Address **PO Box 978**

City **Winona** State **MN** Zip Code **55987**

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

Name of Employer **Fastenal** Occupation **CEO**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 02 / 2012

Transaction ID : SA11AI.5644

Amount of Each Receipt this Period
 _____ **500.00**

Redesignate: **General**
[MEMO ITEM]

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

Mailing Address **4460 Washington Blvd**

City **Madison Lake** State **MN** Zip Code **56063**

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

Name of Employer **None** Occupation **Retired**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 17 / 2012

Transaction ID : SA11AI.5522

Amount of Each Receipt this Period
 _____ **250.00**

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

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

_____ **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 23
	<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)
PARRY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Bill Rowekamp

Mailing Address 19374 County Road 14

City Lewiston State MN Zip Code 55952

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

Name of Employer Self Employed Occupation Dairy Farmer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 17 / 2012

Transaction ID : SA11AI.5513

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 / 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 / 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

7500.00

**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 23	
	<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)
PARRY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Tim Burke		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2012
Mailing Address 20087 Heathrow Way		Amount of Each Disbursement this Period 498.08 Transaction ID : SB17.5554
City Farmington State MN Zip Code 55024	Purpose of Disbursement Expense Reimbursement for Volunteer	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Best Buy		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2012
Mailing Address 4050 Hwy 52 N		Amount of Each Disbursement this Period 498.08 Transaction ID : SB17.5554.0 [MEMO ITEM]
City Rochester State MN Zip Code 55901	Purpose of Disbursement Campaign Video Equipment	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. By the Way		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2012
Mailing Address 123 E Elm Ave		Amount of Each Disbursement this Period 110.50 Transaction ID : SB17.5605
City Waseca State MN Zip Code 56058	Purpose of Disbursement Transportation: Fuel	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	608.58
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 23		
	<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)
PARRY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Casey's		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2012
Mailing Address 521 Woodkey St W		Amount of Each Disbursement this Period 125.00 Transaction ID : SB17.5606
City Northfield	State MN	
Zip Code 55057	Purpose of Disbursement Transportation: Fuel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Clear Lake Signs		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2012
Mailing Address 300 16th Ave Se		Amount of Each Disbursement this Period 283.22 Transaction ID : SB17.5599
City Waseca	State MN	
Zip Code 56093	Purpose of Disbursement Printing Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Clear Lake Signs		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2012
Mailing Address 300 16th Ave Se		Amount of Each Disbursement this Period 205.57 Transaction ID : SB17.5600
City Waseca	State MN	
Zip Code 56093	Purpose of Disbursement Printing Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	613.79
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 23			
	<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)
PARRY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Susan Clossmore		Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2012
Mailing Address 9420 140th St N		Amount of Each Disbursement this Period 484.33 Transaction ID : SB17.5552
City Hugo	State MN Zip Code 55038	
Purpose of Disbursement Expense Reimbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Constant Contact		Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2012
Mailing Address 122 Hudson St		Amount of Each Disbursement this Period 390.83 Transaction ID : SB17.5552.0 [MEMO ITEM]
City New York	State NY Zip Code 10013	
Purpose of Disbursement Online Marketing	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Constant Contact		Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2012
Mailing Address 122 Hudson St		Amount of Each Disbursement this Period 55.00 Transaction ID : SB17.5580
City New York	State NY Zip Code 10013	
Purpose of Disbursement Online Marketing	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	539.33
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 23		
	<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)
PARRY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Donation Pages		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2012
Mailing Address 1101 Pennsylvania Ave NW		Amount of Each Disbursement this Period 56.23 Transaction ID : SB17.5651
City Washington State DC Zip Code 20004	Purpose of Disbursement Credit Card Fees	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Downtowner		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2012
Mailing Address 253 7th St W		Amount of Each Disbursement this Period 30.39 Transaction ID : SB17.5561
City SAINT PAUL State MN Zip Code 55102	Purpose of Disbursement Food and Beverage	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Ford Credit		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2012
Mailing Address 1001 Hoffman Dr		Amount of Each Disbursement this Period 7.00 Transaction ID : SB17.5545
City Owatonna State MN Zip Code 55060	Purpose of Disbursement Bank Charges	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	93.62
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 23			
	<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)
PARRY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Ford Credit		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2012
Mailing Address 1001 Hoffman Dr		Amount of Each Disbursement this Period 525.95
City Owatonna	State MN	
Zip Code 55060	Purpose of Disbursement Vehicle Lease	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) B. Doug Gardner		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address 5500 Nathan Lane N #3		Amount of Each Disbursement this Period 2000.00
City Plymouth	State MN	
Zip Code 55442	Purpose of Disbursement Management Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) c. Doug Gardner		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2012
Mailing Address 5500 Nathan Lane N #3		Amount of Each Disbursement this Period 535.16
City Plymouth	State MN	
Zip Code 55442	Purpose of Disbursement Expense Reimbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3061.11
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 14 OF 23			
	<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)
PARRY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Holiday		Date of Disbursement MM / DD / YYYY 07 / 06 / 2012
Mailing Address 420 N Main St		Amount of Each Disbursement this Period 256.03
City Le Sueur	State MN	
Zip Code 56058	Purpose of Disbursement Transportation: Fuel	Transaction ID : SB17.5551.0
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Fed Ex		Date of Disbursement MM / DD / YYYY 07 / 06 / 2012
Mailing Address 2700 Annapolis Circle N		Amount of Each Disbursement this Period 115.05
City Plymouth	State MN	
Zip Code 55441	Purpose of Disbursement Printing Fees	Transaction ID : SB17.5551.2
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. Kwik Trip		Date of Disbursement MM / DD / YYYY 07 / 03 / 2012
Mailing Address 501 Elm Ave W		Amount of Each Disbursement this Period 113.80
City Waseca	State MN	
Zip Code 56093	Purpose of Disbursement Transportation: Fuel	Transaction ID : SB17.5607
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	113.80
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 15 OF 23		
	<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)
PARRY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Kwik Trip		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2012
Mailing Address 501 Elm Ave W		Amount of Each Disbursement this Period 122.60 Transaction ID : SB17.5616
City Waseca	State MN	
Purpose of Disbursement Transportation: Fuel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Kwik Trip		Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2012
Mailing Address 501 Elm Ave W		Amount of Each Disbursement this Period 10.00 Transaction ID : SB17.5608
City Waseca	State MN	
Purpose of Disbursement Transportation: Fuel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. Kwik Trip		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2012
Mailing Address 501 Elm Ave W		Amount of Each Disbursement this Period 106.01 Transaction ID : SB17.5609
City Waseca	State MN	
Purpose of Disbursement Transportation: Fuel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....	238.61
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 16 OF 23		
	<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)
PARRY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Kwik Trip		Date of Disbursement
Mailing Address 501 Elm Ave W		M M / D D / Y Y Y Y 07 / 09 / 2012
City Waseca	State MN	Zip Code 56093
Purpose of Disbursement Transportation: Fuel	Amount of Each Disbursement this Period 10.00	
Candidate Name	Transaction ID : SB17.5610	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) B. Kwik Trip		Date of Disbursement
Mailing Address 501 Elm Ave W		M M / D D / Y Y Y Y 07 / 10 / 2012
City Waseca	State MN	Zip Code 56093
Purpose of Disbursement Transportation: Fuel	Amount of Each Disbursement this Period 119.50	
Candidate Name	Transaction ID : SB17.5611	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) C. Kwik Trip		Date of Disbursement
Mailing Address 501 Elm Ave W		M M / D D / Y Y Y Y 07 / 16 / 2012
City Waseca	State MN	Zip Code 56093
Purpose of Disbursement Transportation: Fuel	Amount of Each Disbursement this Period 89.49	
Candidate Name	Transaction ID : SB17.5612	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/ Type	

SUBTOTAL of Disbursements This Page (optional).....	218.99
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 17 OF 23			
	<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)
PARRY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Kwik Trip		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2012
Mailing Address 501 Elm Ave W		Amount of Each Disbursement this Period 10.00 Transaction ID : SB17.5613
City Waseca	State MN	
Zip Code 56093	Purpose of Disbursement Transportation: Fuel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Kwik Trip		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2012
Mailing Address 501 Elm Ave W		Amount of Each Disbursement this Period 145.93 Transaction ID : SB17.5614
City Waseca	State MN	
Zip Code 56093	Purpose of Disbursement Transportation: Fuel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Kwik Trip		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2012
Mailing Address 501 Elm Ave W		Amount of Each Disbursement this Period 10.00 Transaction ID : SB17.5615
City Waseca	State MN	
Zip Code 56093	Purpose of Disbursement Transportation: Fuel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	165.93
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 18 OF 23			
	<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)
PARRY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Office Max		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2012
Mailing Address 1201 S Broadway		Amount of Each Disbursement this Period 296.00 Transaction ID : SB17.5576
City Rochester	State MN Zip Code 55904	
Purpose of Disbursement Office Supplies	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. One Little Shirt Shop		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2012
Mailing Address 119 3rd St S		Amount of Each Disbursement this Period 72.68 Transaction ID : SB17.5544
City Waterville	State MN Zip Code 56096	
Purpose of Disbursement Advertising: T-Shirts	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Owatonna Country Club		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2012
Mailing Address 1991 Lemond Rd		Amount of Each Disbursement this Period 1259.84 Transaction ID : SB17.5550
City Owatonna	State MN Zip Code 55060	
Purpose of Disbursement Campaign Event: Food and Beverage	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1628.52
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 19 OF 23		
	<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)
PARRY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Stephen B Productions		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2012
Mailing Address 338 S Sunnyside Dr		Amount of Each Disbursement this Period 2190.93 Transaction ID : SB17.5602
City Caledonia	State MN Zip Code 55921	
Purpose of Disbursement Radio Advertising	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. Sweet Sounds		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2012
Mailing Address 1418 North Riverfront Dr		Amount of Each Disbursement this Period 380.09 Transaction ID : SB17.5620
City Mankato	State MN Zip Code 56001	
Purpose of Disbursement Campaign Vehicle Services	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2012
Mailing Address 114 2nd St NE		Amount of Each Disbursement this Period 180.00 Transaction ID : SB17.5597
City Waseca	State MN Zip Code 56093	
Purpose of Disbursement Postage	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2751.02
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 20 OF 23		
	<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)
PARRY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Verizon		Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2012
Mailing Address 1800 North State St		Amount of Each Disbursement this Period 427.01 Transaction ID : SB17.5603
City Waseca State MN Zip Code 56093	Purpose of Disbursement Telephone Services	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Verizon		Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2012
Mailing Address 1800 North State St		Amount of Each Disbursement this Period 252.84 Transaction ID : SB17.5604
City Waseca State MN Zip Code 56093	Purpose of Disbursement Telephone Services	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Walmart		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address 2103 North State St		Amount of Each Disbursement this Period 28.85 Transaction ID : SB17.5587
City Waseca State MN Zip Code 56093	Purpose of Disbursement Parade Supplies	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	427.01
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 21 OF 23	
	<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)
PARRY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Walmart		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address 2103 North State St		Amount of Each Disbursement this Period 164.83
City Waseca	State MN	
Zip Code 56093	Purpose of Disbursement Parade Supplies	Transaction ID : SB17.5588
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Walmart		Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2012
Mailing Address 2103 North State St		Amount of Each Disbursement this Period 30.18
City Waseca	State MN	
Zip Code 56093	Purpose of Disbursement Parade Supplies	Transaction ID : SB17.5589
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Walmart		Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2012
Mailing Address 2103 North State St		Amount of Each Disbursement this Period 88.45
City Waseca	State MN	
Zip Code 56093	Purpose of Disbursement Parade Supplies	Transaction ID : SB17.5590
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	283.46
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 22 OF 23	
	<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)
PARRY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Walmart		Date of Disbursement MM / DD / YYYY 07 / 09 / 2012
Mailing Address 2103 North State St		Amount of Each Disbursement this Period 41.22
City Waseca State MN Zip Code 56093	Purpose of Disbursement Parade Supplies	
Candidate Name	Category/Type	Transaction ID : SB17.5591
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Walmart		Date of Disbursement MM / DD / YYYY 07 / 09 / 2012
Mailing Address 2103 North State St		Amount of Each Disbursement this Period 36.81
City Waseca State MN Zip Code 56093	Purpose of Disbursement Transportation: Fuel	
Candidate Name	Category/Type	Transaction ID : SB17.5617
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Walmart		Date of Disbursement MM / DD / YYYY 07 / 11 / 2012
Mailing Address 2103 North State St		Amount of Each Disbursement this Period 46.17
City Waseca State MN Zip Code 56093	Purpose of Disbursement Parade Supplies	
Candidate Name	Category/Type	Transaction ID : SB17.5592
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	124.20
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 23 OF 23			
	<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)
PARRY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Walmart		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2012
Mailing Address 2103 North State St		Amount of Each Disbursement this Period 46.00
City Waseca State MN Zip Code 56093	Purpose of Disbursement Parade Supplies	
Candidate Name		Transaction ID : SB17.5593
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Walmart		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2012
Mailing Address 2103 North State St		Amount of Each Disbursement this Period 43.24
City Waseca State MN Zip Code 56093	Purpose of Disbursement Parade Supplies	
Candidate Name		Transaction ID : SB17.5594
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

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

SUBTOTAL of Disbursements This Page (optional).....	89.24
TOTAL This Period (last page this line number only).....	10957.21