

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Minnesota Democratic-Farmer-Labor Party

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		152523.33
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	356077.08									
(c) Total Receipts (from Line 19)	249335.63	1684752.57								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	605412.71	1837275.90								
7. Total Disbursements (from Line 31)	595384.30	1827247.49								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	10028.41	10028.41								
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)	58148.84									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Minnesota Democratic-Farmer-Labor Party

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	13947.49	49516.79
(i) Itemized (use Schedule A)	9505.65	68959.96
(ii) Unitemized	23453.14	108476.75
(iii) TOTAL (add Lines 11(a)(i) and (ii)	3220.00	6570.00
(b) Political Party Committees	30000.00	33822.03
(c) Other Political Committees (such as PACs)	56673.14	148868.78
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees	23581.58	109712.52
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	17453.96	100527.96
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	105229.51	1256532.41
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	46397.44	69110.90
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	46397.44	69110.90
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	249335.63	1684752.57
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	202938.19	1615641.67

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	8016.31	73826.26
(i) Federal Share.....		
(ii) Non-Federal Share.....	31025.83	143012.61
(b) Other Federal Operating Expenditures.....	81074.05	267053.02
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	120116.19	483891.89
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	250.00	250.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	10000.00	10000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	10250.00	10250.00
29. Other Disbursements.....	463278.15	1324801.14
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	1739.96	8304.46
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	1739.96	8304.46
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	595384.30	1827247.49
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	564358.47	1684234.88

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	56673.14	148868.78
34. Total Contribution Refunds (from Line 28(d))	10250.00	10250.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	46423.14	138618.78
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	89090.36	340879.28
37. Offsets to Operating Expenditures (from Line 15, page 3)	17453.96	100527.96
38. Net Operating Expenditures (subtract Line 37 from Line 36)	71636.40	240351.32

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 83
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A.

Full Name (Last, First, Middle Initial)
Judith Bird

Mailing Address 960 Historic Dr SW

City State Zip Code
Rochester MN 55902-6615

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

Name of Employer Occupation
St Thomas University Administrator

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
04 / 06 / 2009

Transaction ID: C5193912

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Paul Brawner

Mailing Address C/O TCF Voluntary Political Contri
801 Marquette Ave

City State Zip Code
Minneapolis MN 55402

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

Name of Employer Occupation
TCF Bank Vice President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
04 / 09 / 2009

Transaction ID: C5197145

Amount of Each Receipt this Period
300.00

C.

Full Name (Last, First, Middle Initial)
Michael Bryant

Mailing Address 2610 Boone Ave S

City State Zip Code
Saint Louis Park MN 55426-2432

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

Name of Employer Occupation
Bradshaw and Bryant PLLC Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
04 / 06 / 2009

Transaction ID: C5192191

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **800.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 83
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial)
Dominic Ciresi

Mailing Address 1942 Dupont Ave S

City State Zip Code
Minneapolis MN 55403

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

Name of Employer Occupation
Haskell's Executive

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	2	/	2	0	0	9

Transaction ID: C5214936

Amount of Each Receipt this Period
250.00

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

Mailing Address 2104 Park Ave S

City State Zip Code
Minneapolis MN 55404

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

Name of Employer Occupation
Community Action of Minneapolis President/CEO

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	6	/	2	0	0	9

Transaction ID: C5192198

Amount of Each Receipt this Period
1250.00

C. Full Name (Last, First, Middle Initial)
Joseph Deuhs Sr

Mailing Address 311 Pleasant Ave
Apt 411

City State Zip Code
Saint Paul MN 55102-2371

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

Name of Employer Occupation
Retired Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	9	/	2	0	0	9

Transaction ID: C5206060

Amount of Each Receipt this Period
225.00

SUBTOTAL of Receipts This Page (optional) ► **1725.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 83
(check only one)

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

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A.

Full Name (Last, First, Middle Initial)
Daniel Fanning

Mailing Address PO Box 161113

City State Zip Code
Duluth MN 55816-1113

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

Name of Employer Occupation
Marty for Governor Campaign Manager

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
04 / 03 / 2009

Transaction ID: C5214905

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Shelley Fitzmaurice

Mailing Address 801 Marquette Ave
WYZ-02-A

City State Zip Code
Minneapolis MN 55402

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

Name of Employer Occupation
TCF National Bank Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
04 / 09 / 2009

Transaction ID: C5197142

Amount of Each Receipt this Period
300.00

C.

Full Name (Last, First, Middle Initial)
Louis W Frillman

Mailing Address 459 Portland Ave

City State Zip Code
Saint Paul MN 55102-2216

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

Name of Employer Occupation
GVA Marquette President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
04 / 06 / 2009

Transaction ID: C5192200

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **1550.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 83
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A.

Full Name (Last, First, Middle Initial)
Joseph T Green

Mailing Address 801 Marquette Ave
WYZ-02-A

City State Zip Code
Minneapolis MN 55402

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

Name of Employer Occupation
TCF National Bank Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	9	/	2	0	0	9

Transaction ID: C5195180

Amount of Each Receipt this Period
300.00

B.

Full Name (Last, First, Middle Initial)
William Harper

Mailing Address 16276 Swede Hill Dr S

City State Zip Code
Afton MN 55001-9637

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

Name of Employer Occupation
Harper & Peterson Partner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	6	/	2	0	0	9

Transaction ID: C5192195

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
James Hiller

Mailing Address 5638 Glen Ave

City State Zip Code
Minnetonka MN 55345-6610

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

Name of Employer Occupation
Honeywell Office

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	3	/	2	0	0	9

Transaction ID: C5214899

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **800.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 83
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A.

Full Name (Last, First, Middle Initial) Betsy Hodges		Date of Receipt MM / DD / YYYY 04 / 03 / 2009
Mailing Address 4312 Linden Hills Blvd Apt 203		Transaction ID: C5214098
City Minneapolis	State MN	Zip Code 55410-1630
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self Employed	Occupation Consultant	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.

Full Name (Last, First, Middle Initial) Gail Jackson		Date of Receipt MM / DD / YYYY 04 / 02 / 2009
Mailing Address 155 Central Ave S		Transaction ID: C5224924
City Milaca	State MN	Zip Code 56353-1122
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer State of Minnesota	Occupation Representative	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.

Full Name (Last, First, Middle Initial) Dan Knuth		Date of Receipt MM / DD / YYYY 04 / 03 / 2009
Mailing Address 1106 Rockstone Ln		Transaction ID: C5214097
City New Brighton	State MN	Zip Code 55112-1614
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Dan Knuth Government Affairs	Occupation Consultant	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 83
(check only one)

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

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A.

Full Name (Last, First, Middle Initial)
David Lillehaug

Mailing Address 6701 Parkwood Ln

City Edina State MN Zip Code 55436-1735

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

Name of Employer Fredrickson & Byron Occupation Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 04 / 16 / 2009

Transaction ID: C5201209

Amount of Each Receipt this Period 1250.00

B.

Full Name (Last, First, Middle Initial)
Eric James Margolis

Mailing Address 649 North Van Buren Trail

City Hopkins State MN Zip Code 55343-8148

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

Name of Employer Self Occupation Web Page Designer

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 414.16

Date of Receipt 04 / 03 / 2009

Transaction ID: C5191856

Amount of Each Receipt this Period 22.50

C.

Full Name (Last, First, Middle Initial)
Eric James Margolis

Mailing Address 649 North Van Buren Trail

City Hopkins State MN Zip Code 55343-8148

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

Name of Employer Self Occupation Web Page Designer

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 414.16

Date of Receipt 04 / 13 / 2009

Transaction ID: C5209185

Amount of Each Receipt this Period 83.33

SUBTOTAL of Receipts This Page (optional) ► 1355.83

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 83

(check only one)

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

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A.

Full Name (Last, First, Middle Initial)
Judy Melanson

Mailing Address 5415 24th Ave S

City State Zip Code
Minneapolis MN 55417-1909

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 3 / 2 0 0 9

Transaction ID: C5187143

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Michael Olson

Mailing Address 801 Marquette Ave
C/O TCF Voluntary Political Contri

City State Zip Code
Minneapolis MN 55402-2807

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

Name of Employer Occupation
TCF National Bank Executive

Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 0 9

Transaction ID: C5195186

Amount of Each Receipt this Period
300.00

C.

Full Name (Last, First, Middle Initial)
Matthew Scherer

Mailing Address 6508 Cherokee Trail

City State Zip Code
Edina MN 55439

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

Name of Employer Occupation
State of Minnesota Legislative Assistant

Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
620.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 9

Transaction ID: C5191894

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional) ▶

875.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 83
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A.

Full Name (Last, First, Middle Initial)
David T Schultz

Mailing Address 885 Goodrich Ave

City State Zip Code
Saint Paul MN 55105-3125

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

Name of Employer Occupation
Maslon Edelman & Borman Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
04 / 06 / 2009

Transaction ID: C5192190

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Tina Flint Smith

Mailing Address 4720 West Lake Harriet Parkway

City State Zip Code
Minneapolis MN 55410-1923

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

Name of Employer Occupation
McWilliams Cosgrove Consultant

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
04 / 09 / 2009

Transaction ID: C5194183

Amount of Each Receipt this Period
5000.00

C.

Full Name (Last, First, Middle Initial)
Cordy Strand

Mailing Address 33801 446th Pl

City State Zip Code
Aitkin MN 56431-5089

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

Name of Employer Occupation
Retired Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
583.32

Date of Receipt
MM / DD / YYYY
04 / 01 / 2009

Transaction ID: C5209196

Amount of Each Receipt this Period
83.33

SUBTOTAL of Receipts This Page (optional) ► **5333.33**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 83
(check only one)

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

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A.

Full Name (Last, First, Middle Initial)
Cordy Strand

Mailing Address 33801 446th Pl

City State Zip Code
Aitkin MN 56431-5089

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

Name of Employer Retired Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 583.32

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 0 9

Transaction ID: C5206051

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Jennifer Thomas

Mailing Address 4744 Thomas Ave S

City State Zip Code
Minneapolis MN 55410-1834

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

Name of Employer Self Employed Occupation Consultant

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 3 / 2 0 0 9

Transaction ID: C5214907

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Rolf E. Westgard

Mailing Address 25189 Moonrise Trl

City State Zip Code
Deerwood MN 56444-8832

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

Name of Employer Retired Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1483.32

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 7 / 2 0 0 9

Transaction ID: C5209203

Amount of Each Receipt this Period
83.33

SUBTOTAL of Receipts This Page (optional)	583.33
TOTAL This Period (last page this line number only)	14022.49

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 15 / 83	
	(check only one)			
<input type="checkbox"/> 11a	<input checked="" type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A.

Full Name (Last, First, Middle Initial) Democratic National Committee		Date of Receipt																				
Mailing Address 430 S Capitol St SE Federal Fund		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		1	9		2	0	0	9													
City	State	Zip Code																				
Washington	DC	20003-4024																				
FEC ID number of contributing federal political committee.		Transaction ID: C5226098																				
<input checked="" type="checkbox"/> C C00010603		Amount of Each Receipt this Period																				
Name of Employer		<table border="1"><tr><td>3220.00</td></tr></table>	3220.00																			
3220.00																						
Occupation																						
Receipt For:	Aggregate Year-to-Date ▼	* In-Kind: On Line Voter File Access																				
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<table border="1"><tr><td>265151.58</td></tr></table>		265151.58																			
265151.58																						

SUBTOTAL of Receipts This Page (optional)	<table border="1"><tr><td>3220.00</td></tr></table>	3220.00
3220.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td>3220.00</td></tr></table>	3220.00
3220.00		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 83
(check only one)

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

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial)
Friends of Jim Oberstar

Mailing Address PO Box 465

City Duluth State MN Zip Code 55801-0465

FEC ID number of contributing federal political committee. **C** C00187419

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 16275.00

Date of Receipt: 04 / 09 / 2009

Transaction ID: C5194171

Amount of Each Receipt this Period: 15000.00

Transfer of Excess Funds

B. Full Name (Last, First, Middle Initial)
McCollum (Betty) for Congress

Mailing Address PO Box 14131

City Saint Paul State MN Zip Code 55114

FEC ID number of contributing federal political committee. **C** C00354688

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 6250.00

Date of Receipt: 04 / 20 / 2009

Transaction ID: C5201232

Amount of Each Receipt this Period: 5000.00

Transfer of Excess Funds

C. Full Name (Last, First, Middle Initial)
Tinklenberg for Congress

Mailing Address PO Box 49787

City Blaine State MN Zip Code 55449

FEC ID number of contributing federal political committee. **C** C00411066

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt: 04 / 01 / 2009

Transaction ID: C5186013

Amount of Each Receipt this Period: 10000.00

Transfer of Excess Funds

SUBTOTAL of Receipts This Page (optional)	▶	30000.00
TOTAL This Period (last page this line number only)	▶	30000.00

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

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

FOR LINE NUMBER: PAGE 17 / 83
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial)
Democratic National Committee

Mailing Address 430 S Capitol St SE
Federal Fund

City State Zip Code
Washington DC 20003-4024

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265151.58

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 3 0 / 2 0 0 9

Transaction ID: C5206300

Amount of Each Receipt this Period
8581.58

B. Full Name (Last, First, Middle Initial)
Dollars for Democrats

Mailing Address 430 S Capitol St SE
C00073791

City State Zip Code
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00073791

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
70000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 2 2 / 2 0 0 9

Transaction ID: C5201247

Amount of Each Receipt this Period
15000.00

SUBTOTAL of Receipts This Page (optional) ► **23581.58**

TOTAL This Period (last page this line number only) ► **23581.58**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 83
(check only one)

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

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial)
Ellison (Keith) for Congress

Mailing Address 1629 Bryant Ave N

City State Zip Code
Minneapolis MN 55411

FEC ID number of contributing federal political committee. **C** C00422410

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 46188.50

Date of Receipt
MM / DD / YYYY
04 / 10 / 2009

Transaction ID: C5198825

Amount of Each Receipt this Period
4760.12

Payroll

B. Full Name (Last, First, Middle Initial)
Ellison (Keith) for Congress

Mailing Address 1629 Bryant Ave N

City State Zip Code
Minneapolis MN 55411

FEC ID number of contributing federal political committee. **C** C00422410

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 46188.50

Date of Receipt
MM / DD / YYYY
04 / 22 / 2009

Transaction ID: C5201246

Amount of Each Receipt this Period
4402.00

Payroll

C. Full Name (Last, First, Middle Initial)
Ellison (Keith) for Congress

Mailing Address 1629 Bryant Ave N

City State Zip Code
Minneapolis MN 55411

FEC ID number of contributing federal political committee. **C** C00422410

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 46188.50

Date of Receipt
MM / DD / YYYY
04 / 29 / 2009

Transaction ID: C5206052

Amount of Each Receipt this Period
3.79

Email Charge

SUBTOTAL of Receipts This Page (optional) ► **9165.91**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 83
(check only one)

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

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A.

Full Name (Last, First, Middle Initial)
QWest

Mailing Address PO Box 1301

City State Zip Code
Minneapolis MN 55483-0002

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
39331.01

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	0	9

Transaction ID: C5206039

Amount of Each Receipt this Period
28.38

Refund

B.

Full Name (Last, First, Middle Initial)
QWest

Mailing Address PO Box 1301

City State Zip Code
Minneapolis MN 55483-0002

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
39331.01

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	0	9

Transaction ID: C5206040

Amount of Each Receipt this Period
100.85

Refund

C.

Full Name (Last, First, Middle Initial)
QWest

Mailing Address PO Box 1301

City State Zip Code
Minneapolis MN 55483-0002

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
39331.01

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	0	9

Transaction ID: C5206041

Amount of Each Receipt this Period
783.18

Refund

SUBTOTAL of Receipts This Page (optional) ► **912.41**

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

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

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

FOR LINE NUMBER: PAGE 20 / 83
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial)
QWest
Mailing Address PO Box 1301
City Minneapolis State MN Zip Code 55483-0002
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 39331.01
Date of Receipt 04 / 29 / 2009
Transaction ID: C5206042
Amount of Each Receipt this Period 975.34
Refund

B. Full Name (Last, First, Middle Initial)
QWest
Mailing Address PO Box 1301
City Minneapolis State MN Zip Code 55483-0002
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 39331.01
Date of Receipt 04 / 29 / 2009
Transaction ID: C5206043
Amount of Each Receipt this Period 835.00
Refund

C. Full Name (Last, First, Middle Initial)
QWest
Mailing Address PO Box 1301
City Minneapolis State MN Zip Code 55483-0002
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 39331.01
Date of Receipt 04 / 29 / 2009
Transaction ID: C5206044
Amount of Each Receipt this Period 1279.44
Refund

SUBTOTAL of Receipts This Page (optional) ► 3089.78
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 21 / 83
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial)
QWest
Mailing Address PO Box 1301
City Minneapolis State MN Zip Code 55483-0002
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 39331.01
Date of Receipt 04 / 30 / 2009
Transaction ID: C5206288
Amount of Each Receipt this Period 897.61
Refund

B. Full Name (Last, First, Middle Initial)
QWest
Mailing Address PO Box 1301
City Minneapolis State MN Zip Code 55483-0002
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 39331.01
Date of Receipt 04 / 30 / 2009
Transaction ID: C5206289
Amount of Each Receipt this Period 756.20
Refund

C. Full Name (Last, First, Middle Initial)
QWest
Mailing Address PO Box 1301
City Minneapolis State MN Zip Code 55483-0002
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 39331.01
Date of Receipt 04 / 30 / 2009
Transaction ID: C5206290
Amount of Each Receipt this Period 737.43
Refund

SUBTOTAL of Receipts This Page (optional) ► 2391.24
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 22 / 83
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input checked="" type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A.

Full Name (Last, First, Middle Initial) QWest		Date of Receipt
Mailing Address PO Box 1301		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 0 4 / 3 0 / 2 0 0 9
City	State	Zip Code
Minneapolis	MN	55483-0002
FEC ID number of contributing federal political committee.		Transaction ID: C5206291
C <input type="text"/>		Amount of Each Receipt this Period
		<input type="text"/> 718.41
Name of Employer	Occupation	Refund
Receipt For: 2010	Aggregate Year-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text"/> 39331.01	
<input type="checkbox"/> Other (specify) ▼		

B.

Full Name (Last, First, Middle Initial) QWest		Date of Receipt
Mailing Address PO Box 1301		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 0 4 / 3 0 / 2 0 0 9
City	State	Zip Code
Minneapolis	MN	55483-0002
FEC ID number of contributing federal political committee.		Transaction ID: C5206292
C <input type="text"/>		Amount of Each Receipt this Period
		<input type="text"/> 1103.61
Name of Employer	Occupation	Refund
Receipt For: 2010	Aggregate Year-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text"/> 39331.01	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1822.02
TOTAL This Period (last page this line number only)	<input type="text"/> 17381.36

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 83
(check only one)

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

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A.

Full Name (Last, First, Middle Initial) Franken Recount Fund		Date of Receipt MM / DD / YYYY 04 / 14 / 2009
Mailing Address 4190 Vinewood Ln N # 111-554		Transaction ID: C5201157
City Minneapolis	State MN	Zip Code 55442-1715
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 64560.13
Name of Employer	Occupation	
Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Recount	Aggregate Year-to-Date 959055.13	

B.

Full Name (Last, First, Middle Initial) Franken Recount Fund		Date of Receipt MM / DD / YYYY 04 / 28 / 2009
Mailing Address 4190 Vinewood Ln N # 111-554		Transaction ID: C5205962
City Minneapolis	State MN	Zip Code 55442-1715
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30000.00
Name of Employer	Occupation	
Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Recount	Aggregate Year-to-Date 959055.13	

C.

Full Name (Last, First, Middle Initial) State Tax Checkoff - MN Dept. of Revenue		Date of Receipt MM / DD / YYYY 04 / 16 / 2009
Mailing Address PO Box 821		Transaction ID: C5223334
City Minneapolis	State MN	Zip Code 55480-0821
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 9828.00
Name of Employer	Occupation	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date 19985.90	

State Check Off Money

SUBTOTAL of Receipts This Page (optional)	104388.13
TOTAL This Period (last page this line number only)	

Form/Schedule : **SA17**
Transaction ID : **C5201157**

Winston Barbara 03/26/2009 \$1,000.00 2219 Del Monte Houston TX 77019 Retired Ludwig Eugene 03/30/20-
09 \$1,000.00 2629 Foxhall Rd NW Washington DC 20007 Promontory Interfinancial Network Managing Partn-
er Kovner Victor 03/30/2009 \$700.00 27 W 67th St New York NY 10023 Davis Wright Tremaine Attorney
Crosby Harriet 03/30/2009 \$1,500.00 6515 79th Pl Cabin John MD 20818 ISAR CEO Bunge Jonathan 03/31/-
2009 \$200.00 339 White Oak Ln Winnetka IL 60093 Kirkland Ellis Attorney Lakhani Muslim 03/30/2009
\$200.00 1111 23rd St PH 2A Washington DC 20037 ML Resources CEO Gordon Rena 03/29/2009 \$200.00 11607
Springridge Rd Potomac MD 20854 Not Employed Not Employed Burgy William 03/30/2009 \$2,700.00 11529
Stardust Ln Ellicott City MD 21042 Law Office of Peter T Nicholl Attorney Goldberg Henry 03/30/2009
\$5,000.00 7200 Wisconsin Ave Bethesda MD 20814 Atery Group LLC Owner Goldberg Carol 03/30/2009 \$5,0-
00.00 5630 Wisconsin Ave #1702W Chevy Chase MD 20815 American University Professor Benter William
03/30/2009 \$10,000.00 2901 Smallman St 5D Pittsburgh PA 15201 Self-Employed Business Owner Rice Edw-
ard 03/30/2009 \$10,000.00 2217 Halcon Ln Vienna VA 22181 Self-Employed Consultant Sussman Donald 03-
/30/2009 \$10,000.00 6100 Red Hook Qtrs St. Thomas VI 802 Self-Employed Financial Advisor America's
Leadership PAC 03/26/2009 \$5,000.00 607 14th St NW #800 Washington DC 20005 C-00375584 New Jersey
First 03/26/2009 \$5,000.00 PO Box 200597 Newark NJ 07102 C-00391458 UAW V CAP 03/30/2009 \$5,000.00
8000 East Jefferson Detroit MI 48214 C-00002840 To Organize A Majority PAC 03/30/2009 \$5,000.00
PO Box 752 Des Moines IA 50303 C-00385732

Form/Schedule : **SA17**
Transaction ID : **C5205962**

Richard Warner 04/12/2009 \$200.00 3100 Newport Ct Arlington TX 76015 SDS Software Engineer Marc Sel-
tzer 04/07/2009 \$200.00 1022 Ridgedale Dr Beverly Hills CA 90210 Susman Godfrey Attorney Michael Kl-
ein 04/10/2009 \$200.00 500 W Texas Midland TX 79701 Midland Oil Executive Wolfe Rudman 04/07/2009

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 25 / 83	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A.	Full Name (Last, First, Middle Initial) Xcel Energy		Date of Receipt
	Mailing Address 414 Nicollet Mall		<input type="text" value="04"/> / <input type="text" value="29"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Minneapolis	MN	55401-1927
	FEC ID number of contributing federal political committee.		Transaction ID: C5214948
	C		Amount of Each Receipt this Period
Name of Employer		Occupation	Refund
Receipt For: 2010		Aggregate Year-to-Date ▼	
<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="text" value="785.60"/>	
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="785.60"/>
TOTAL This Period (last page this line number only)	<input type="text" value="105173.73"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A.	Full Name (Last, First, Middle Initial) Apres Party & Tent Rental	Transaction ID: D281575 Date of Disbursement
	Mailing Address 7625 Cahill Rd	<input type="text" value="04"/> / <input type="text" value="12"/> / <input type="text" value="2009"/>
	City Edina State MN Zip Code 55439-2747	Amount of Each Disbursement this Period
	Purpose of Disbursement Finance Charge	<input type="text" value="6.22"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Donna Cassutt	Transaction ID: D281617 Date of Disbursement
	Mailing Address 815 E 61st St	<input type="text" value="04"/> / <input type="text" value="10"/> / <input type="text" value="2009"/>
	City Minneapolis State MN Zip Code 55417-3144	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll	<input type="text" value="1866.14"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Donna Cassutt	Transaction ID: D281618 Date of Disbursement
	Mailing Address 815 E 61st St	<input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City Minneapolis State MN Zip Code 55417-3144	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll	<input type="text" value="1866.16"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3738.52"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

<p>A. Full Name (Last, First, Middle Initial) Donna Cassutt</p> <p>Mailing Address 815 E 61st St</p> <p>City Minneapolis State MN Zip Code 55417-3144</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D281619</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1800.00"/></p>
<p>B. Full Name (Last, First, Middle Initial) Cornerstone Horses, Inc.</p> <p>Mailing Address 591 Lincoln Avenue</p> <p>City Saint Paul State MN Zip Code 55102</p> <p>Purpose of Disbursement Accounting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D281544</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5000.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) Democratic National Committee</p> <p>Mailing Address 430 S Capitol St SE Federal Fund</p> <p>City Washington State DC Zip Code 20003-4024</p> <p>Purpose of Disbursement On Line Voter File Access</p> <p>Candidate Name Democratic National Committee</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D281664</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3220.00"/></p> <p>* In-Kind Received</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="10020.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value=""/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

<p>A. Full Name (Last, First, Middle Initial) EFTPS Fed Tax Payment</p> <p>Mailing Address Federal Withholding Taxes</p> <p>City Iowa City State IA Zip Code 52244</p> <p>Purpose of Disbursement Withholding Tax</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D281601</p> <p>Date of Disbursement 04 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 1185.68</p>
<p>B. Full Name (Last, First, Middle Initial) EFTPS Fed Tax Payment</p> <p>Mailing Address Federal Withholding Taxes</p> <p>City Iowa City State IA Zip Code 52244</p> <p>Purpose of Disbursement Withholding Tax</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D281602</p> <p>Date of Disbursement 04 / 14 / 2009</p> <p>Amount of Each Disbursement this Period 5105.26</p>
<p>C. Full Name (Last, First, Middle Initial) EFTPS Fed Tax Payment</p> <p>Mailing Address Federal Withholding Taxes</p> <p>City Iowa City State IA Zip Code 52244</p> <p>Purpose of Disbursement Withholding Tax</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D281603</p> <p>Date of Disbursement 04 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 5337.54</p>

SUBTOTAL of Disbursements This Page (optional) ▶

11628.48

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

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A.	Full Name (Last, First, Middle Initial) EFTPS Fed Tax Payment	Transaction ID: D281604 Date of Disbursement
	Mailing Address Federal Withholding Taxes	<input type="text" value="04"/> / <input type="text" value="29"/> / <input type="text" value="2009"/>
	City Iowa City State IA Zip Code 52244	Amount of Each Disbursement this Period
	Purpose of Disbursement Federal Unemployment Tax	<input type="text" value="470.40"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Eric Fought	Transaction ID: D281548 Date of Disbursement
	Mailing Address 215 Oak Grove Street, #1801	<input type="text" value="04"/> / <input type="text" value="22"/> / <input type="text" value="2009"/>
	City Minneapolis State MN Zip Code 55440	Amount of Each Disbursement this Period
	Purpose of Disbursement Parking, Cell Phone	<input type="text" value="215.79"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Eric Fought	Transaction ID: D281620 Date of Disbursement
	Mailing Address 215 Oak Grove Street, #1801	<input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City Minneapolis State MN Zip Code 55440	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll	<input type="text" value="703.42"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1389.61"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

Form/Schedule : **SB21B**
Transaction ID : **D281548**

Verizon Cell Phone \$203.79, City Center- Parking \$12.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A.	Full Name (Last, First, Middle Initial) Eric Fought	Transaction ID: D281621 Date of Disbursement 04 / 22 / 2009
	Mailing Address 215 Oak Grove Street, #1801	Amount of Each Disbursement this Period 700.00
	City Minneapolis State MN Zip Code 55440	
	Purpose of Disbursement Payroll	
	Candidate Name	Category/Type
	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:	

B.	Full Name (Last, First, Middle Initial) Eric Fought	Transaction ID: D281622 Date of Disbursement 04 / 14 / 2009
	Mailing Address 215 Oak Grove Street, #1801	Amount of Each Disbursement this Period 700.00
	City Minneapolis State MN Zip Code 55440	
	Purpose of Disbursement Payroll	
	Candidate Name	Category/Type
	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:	

C.	Full Name (Last, First, Middle Initial) Eric Fought	Transaction ID: D281623 Date of Disbursement 04 / 10 / 2009
	Mailing Address 215 Oak Grove Street, #1801	Amount of Each Disbursement this Period 1456.96
	City Minneapolis State MN Zip Code 55440	
	Purpose of Disbursement Payroll	
	Candidate Name	Category/Type
	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:	

SUBTOTAL of Disbursements This Page (optional)	2856.96
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A.	Full Name (Last, First, Middle Initial) HealthPartners	Transaction ID: D281572 Date of Disbursement 04 / 10 / 2009
	Mailing Address 8170 33rd Ave S	Amount of Each Disbursement this Period 18082.40
	City Bloomington State MN Zip Code 55425	
	Purpose of Disbursement Health Insurance	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Sarah Helgen	Transaction ID: D281547 Date of Disbursement 04 / 09 / 2009
	Mailing Address 3127 18th Ave S	Amount of Each Disbursement this Period 160.43
	City Minneapolis State MN Zip Code 55407-4791	
	Purpose of Disbursement Parking, Tolls, Travel, Postage, Maintenance, Office Supplies, Gas	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Sarah Helgen	Transaction ID: D281624 Date of Disbursement 04 / 10 / 2009
	Mailing Address 3127 18th Ave S	Amount of Each Disbursement this Period 1228.28
	City Minneapolis State MN Zip Code 55407-4791	
	Purpose of Disbursement Payroll	Category/ Type
	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:	

SUBTOTAL of Disbursements This Page (optional)	▶	19471.11
TOTAL This Period (last page this line number only)	▶	

Form/Schedule : **SB21B**
Transaction ID : **D281547**

Parking - Graves 101 & Crown Plaza \$29.00. Tolls- Maryland Transportation - 9.00. General Office postage - 17.50. Target- Light Bulbs \$ 52.38. Gas \$21.86 Flying J Travel Plaza, Fed X & Kinko's \$30.69
Misc construction paper

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) Sarah Helgen Mailing Address 3127 18th Ave S City Minneapolis State MN Zip Code 55407-4791 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D281625 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 1228.29 Category/Type
B. Full Name (Last, First, Middle Initial) Hibo S Isaq Mailing Address 371 S Winthrop St #291 City Saint Paul State MN Zip Code 55119 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D281626 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 9
	Amount of Each Disbursement this Period 298.37 Category/Type
C. Full Name (Last, First, Middle Initial) Libby Keefe Mailing Address 591 Lincoln Ave City Saint Paul State MN Zip Code 55102-2814 Purpose of Disbursement Postage, Office Supplies, Trash Pick Up Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D281546 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 0 9
	Amount of Each Disbursement this Period 406.96 Category/Type

SUBTOTAL of Disbursements This Page (optional)	1933.62
TOTAL This Period (last page this line number only)	

Form/Schedule : **SB21B**
Transaction ID : **D281546**

Accounting office mail \$54.09 Office Max \$ 7.49 1099 & 1096 Forms 4 7.49 1-800 Got Junk- Trash
Pickup \$345.38

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A.	Full Name (Last, First, Middle Initial) LawProse Inc Mailing Address 14180 Dallas Parkway, Suite 280 City Dallas State TX Zip Code 75225 Purpose of Disbursement Writing Seminar Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D281565 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 8 / 2 0 0 9 Amount of Each Disbursement this Period 410.00
B.	Full Name (Last, First, Middle Initial) Lori Peterson & Associates Mailing Address 10 S 5th St City Minneapolis State MN Zip Code 55402-1001 Purpose of Disbursement Issue Research Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D281553 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 0 9 Amount of Each Disbursement this Period 311.46
C.	Full Name (Last, First, Middle Initial) Brian Melendez Mailing Address 1777 Dupont Ave S City Minneapolis State MN Zip Code 55403-3066 Purpose of Disbursement Travel, Periodical, Fundraising Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D281545 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 0 9 Amount of Each Disbursement this Period 2766.11

SUBTOTAL of Disbursements This Page (optional) ▶

3487.57

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

Form/Schedule : **SB21B**
Transaction ID : **D281545**

Food for Chair fundraising meetings- Pizza Hut \$83.62, Boca Chica \$25.18, Peter's Grill - \$20.96,
Ike's Food \$39.38, Vincents Restaurant \$31.89, Key's Cafe \$11.01, Murray's 20 S 6th St Minneapolis,
MN \$310.36 , Fogo de Chao 645 Hennepin Ave, Minneapolis, MN 55403 \$571.33 Periodical- The Spokesman
Recorder Subscription \$60.00, Amazon, Periodicals \$20.99. Olmstead County DFL Dinner \$150.00, Lowry
Hill Liquor, 1922 Hennepin Ave, Minneapolis, MN HHH Day reception \$402.52, Air Fare \$ 1,038.57 for
Andy O'Leary, Donna Cassutt, Jamie Tincher, meetings in Washington DC

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A.	Full Name (Last, First, Middle Initial) Minnesota Department of Revenue	Transaction ID: D281595 Date of Disbursement 04 / 08 / 2009
	Mailing Address PO Box 821	Amount of Each Disbursement this Period 214.00
	City Minneapolis State MN Zip Code 55480-0821	
	Purpose of Disbursement Withholding tax	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Minnesota Department of Revenue	Transaction ID: D281596 Date of Disbursement 04 / 14 / 2009
	Mailing Address PO Box 821	Amount of Each Disbursement this Period 794.00
	City Minneapolis State MN Zip Code 55480-0821	
	Purpose of Disbursement Withholding Tax	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Minnesota Department of Revenue	Transaction ID: D281597 Date of Disbursement 04 / 29 / 2009
	Mailing Address PO Box 821	Amount of Each Disbursement this Period 966.00
	City Minneapolis State MN Zip Code 55480-0821	
	Purpose of Disbursement Withholding Tax	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	1974.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A.	Full Name (Last, First, Middle Initial) Minnesota Department of Revenue	Transaction ID: D281598 Date of Disbursement
	Mailing Address PO Box 821	<input type="text" value="04"/> / <input type="text" value="10"/> / <input type="text" value="2009"/>
	City Minneapolis State MN Zip Code 55480-0821	Amount of Each Disbursement this Period
	Purpose of Disbursement Withholding Tax	<input type="text" value="246.05"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Minnesota UC Fund	Transaction ID: D281609 Date of Disbursement
	Mailing Address PO Box 821	<input type="text" value="04"/> / <input type="text" value="29"/> / <input type="text" value="2009"/>
	City Minneapolis State MN Zip Code 55480-0821	Amount of Each Disbursement this Period
	Purpose of Disbursement State Unemployment Tax	<input type="text" value="3395.23"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Andrew O'Leary	Transaction ID: D281612 Date of Disbursement
	Mailing Address 255 Plato Blvd E	<input type="text" value="04"/> / <input type="text" value="07"/> / <input type="text" value="2009"/>
	City Saint Paul State MN Zip Code 55107-1623	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll	<input type="text" value="1907.86"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="5549.14"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A.	Full Name (Last, First, Middle Initial) Andrew O'Leary	Transaction ID: D281613 Date of Disbursement 04 / 07 / 2009
	Mailing Address 255 Plato Blvd E	
	City Saint Paul State MN Zip Code 55107-1623	Amount of Each Disbursement this Period 1186.20
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Andrew O'Leary	Transaction ID: D281614 Date of Disbursement 04 / 07 / 2009
	Mailing Address 255 Plato Blvd E	
	City Saint Paul State MN Zip Code 55107-1623	Amount of Each Disbursement this Period 800.00
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Andrew O'Leary	Transaction ID: D281615 Date of Disbursement 04 / 24 / 2009
	Mailing Address 255 Plato Blvd E	
	City Saint Paul State MN Zip Code 55107-1623	Amount of Each Disbursement this Period 1107.85
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	3094.05
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

<p>A. Full Name (Last, First, Middle Initial) Andrew O'Leary</p> <p>Mailing Address 255 Plato Blvd E</p> <p>City Saint Paul State MN Zip Code 55107-1623</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D281616</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1186.20"/></p>
<p>B. Full Name (Last, First, Middle Initial) Andrew O'Leary</p> <p>Mailing Address 255 Plato Blvd E</p> <p>City Saint Paul State MN Zip Code 55107-1623</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D281631</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="800.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) OPEIU # 12</p> <p>Mailing Address 2520 Broadway St NE Ste 200</p> <p>City Minneapolis State MN Zip Code 55413-1975</p> <p>Purpose of Disbursement Union Dues</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D281568</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1049.00"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="3035.20"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A.	Full Name (Last, First, Middle Initial) Take Action Minnesota Mailing Address 1821 University Ave W City Saint Paul State MN Zip Code 55104 Purpose of Disbursement Bowling Event Candidate Name Take Action Minnesota Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D281551 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 9	Amount of Each Disbursement this Period 150.00
B.	Full Name (Last, First, Middle Initial) Jaime Tincher Mailing Address 3628 24th Ave S City Minneapolis State MN Zip Code 55406-2521 Purpose of Disbursement Payroll 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:	Transaction ID: D281629 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 9	Amount of Each Disbursement this Period 2585.71
C.	Full Name (Last, First, Middle Initial) Jaime Tincher Mailing Address 3628 24th Ave S City Minneapolis State MN Zip Code 55406-2521 Purpose of Disbursement Payroll 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:	Transaction ID: D281630 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 9	Amount of Each Disbursement this Period 2585.73

SUBTOTAL of Disbursements This Page (optional)	5321.44
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A.	Full Name (Last, First, Middle Initial) US Bank Mailing Address 5th and Robert St City Saint Paul State MN Zip Code 55101 Purpose of Disbursement Bank Charges Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D281562 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 9 Amount of Each Disbursement this Period 150.85
B.	Full Name (Last, First, Middle Initial) US Bank Mailing Address 5th and Robert St City Saint Paul State MN Zip Code 55101 Purpose of Disbursement Bank Charges Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D281563 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 3 / 2 0 0 9 Amount of Each Disbursement this Period 305.10
C.	Full Name (Last, First, Middle Initial) US Bank Mailing Address 5th and Robert St City Saint Paul State MN Zip Code 55101 Purpose of Disbursement Bank Charges Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D281564 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 0 9 Amount of Each Disbursement this Period 35.00

SUBTOTAL of Disbursements This Page (optional) ▶	490.95
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A.	Full Name (Last, First, Middle Initial) David Wakely Mailing Address 1151 Hamline Ave N City Saint Paul State MN Zip Code 55108-2613 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D281627 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 9	Amount of Each Disbursement this Period 1413.00
B.	Full Name (Last, First, Middle Initial) David Wakely Mailing Address 1151 Hamline Ave N City Saint Paul State MN Zip Code 55108-2613 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D281628 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 9	Amount of Each Disbursement this Period 1413.00
C.	Full Name (Last, First, Middle Initial) Anna Wojtanowicz Mailing Address 2700 Lake St E #2400 City Minneapolis State MN Zip Code 55406 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D281634 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 9	Amount of Each Disbursement this Period 1458.00

SUBTOTAL of Disbursements This Page (optional)		4284.00
TOTAL This Period (last page this line number only)		

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A.	Full Name (Last, First, Middle Initial) Anna Wojtanowicz	Transaction ID: D281635 Date of Disbursement MM / DD / YYYY 04 / 24 / 2009
	Mailing Address 2700 Lake St E #2400	Amount of Each Disbursement this Period 1458.00
	City Minneapolis State MN Zip Code 55406	
	Purpose of Disbursement Payroll	Category/ Type
	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:	

B.	Full Name (Last, First, Middle Initial) Mary Xiong	Transaction ID: D281632 Date of Disbursement MM / DD / YYYY 04 / 10 / 2009
	Mailing Address 480 Hazel St N Apt 201	Amount of Each Disbursement this Period 742.30
	City Saint Paul State MN Zip Code 55119-3497	
	Purpose of Disbursement Payroll	Category/ Type
	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:	

C.	Full Name (Last, First, Middle Initial) Mary Xiong	Transaction ID: D281633 Date of Disbursement MM / DD / YYYY 04 / 10 / 2009
	Mailing Address 480 Hazel St N Apt 201	Amount of Each Disbursement this Period 549.10
	City Saint Paul State MN Zip Code 55119-3497	
	Purpose of Disbursement Payroll	Category/ Type
	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:	

SUBTOTAL of Disbursements This Page (optional)	▶	2749.40
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A.

Full Name (Last, First, Middle Initial)
Young Democrats of America

Transaction ID: D281543

Date of Disbursement

Mailing Address PO Box 77496

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	0	9

City Washington State DC Zip Code 20006

Amount of Each Disbursement this Period

50.00

Purpose of Disbursement
Registration Fee

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

50.00

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

81074.05

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A.

Full Name (Last, First, Middle Initial)

John Raplinger

Mailing Address 11897 210th St W

City State Zip Code
Lakeville MN 55044-7450

Purpose of Disbursement
Refund Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D281571

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ►

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

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input checked="" type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A.

Full Name (Last, First, Middle Initial)
Laborers Political League Edu Fund

Transaction ID: D281561

Date of Disbursement

Mailing Address 905 16th St NW

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	0	9

City Washington State DC Zip Code 20006

Amount of Each Disbursement this Period

10000.00

Purpose of Disbursement
Refund Contribution

Category/
Type

Candidate Name
Laborers Political League Edu Fund

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

10000.00

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

10000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

<p>A. Full Name (Last, First, Middle Initial) American Security</p> <p>Mailing Address PO Box 1150</p> <p>City Minneapolis State MN Zip Code 55480-1150</p> <p>Purpose of Disbursement Recount Office Security</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p> <p>Recount</p>	<p>Transaction ID: D281554 Date of Disbursement: 04 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 6398.95</p>
<p>B. Full Name (Last, First, Middle Initial) American Security</p> <p>Mailing Address PO Box 1150</p> <p>City Minneapolis State MN Zip Code 55480-1150</p> <p>Purpose of Disbursement Recount Office Security</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p> <p>Recount</p>	<p>Transaction ID: D281555 Date of Disbursement: 04 / 27 / 2009</p> <p>Amount of Each Disbursement this Period 6524.19</p>
<p>C. Full Name (Last, First, Middle Initial) EFTPS Fed Tax Payment</p> <p>Mailing Address Federal Withholding Taxes</p> <p>City Iowa City State IA Zip Code 52244</p> <p>Purpose of Disbursement Recount Federal Unemployment Tax</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p> <p>Recount</p>	<p>Transaction ID: D281605 Date of Disbursement: 04 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 374.77</p>

SUBTOTAL of Disbursements This Page (optional) ▶

13297.91

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 50 / 83

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
Minnesota Democratic-Farmer-Labor Party

A.	Full Name (Last, First, Middle Initial) Fredrikson & Byron, PA	Transaction ID: D281557 Date of Disbursement 04 / 22 / 2009
	Mailing Address PO Box 1484	Amount of Each Disbursement this Period 160233.18
	City Minneapolis State MN Zip Code 55480	
	Purpose of Disbursement Recount Legal Services	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Recount

B.	Full Name (Last, First, Middle Initial) Lockridge Grindal Nauen PLLP	Transaction ID: D281558 Date of Disbursement 04 / 22 / 2009
	Mailing Address 100 Washington Ave S, Ste 2200	Amount of Each Disbursement this Period 34216.81
	City Minneapolis State MN Zip Code 55401	
	Purpose of Disbursement Recount Legal Services	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Recount

C.	Full Name (Last, First, Middle Initial) Lockridge Grindal Nauen PLLP	Transaction ID: D281559 Date of Disbursement 04 / 22 / 2009
	Mailing Address 100 Washington Ave S, Ste 2200	Amount of Each Disbursement this Period 1900.00
	City Minneapolis State MN Zip Code 55401	
	Purpose of Disbursement Recount Legal Services	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Recount

SUBTOTAL of Disbursements This Page (optional)	196349.99
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) Minnesota UC Fund <hr/> Mailing Address PO Box 821 <hr/> City Minneapolis State MN Zip Code 55480-0821 <hr/> Purpose of Disbursement Recount State Unemployment Taxes Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Recount	Transaction ID: D281610 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 1748.25
	Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Recount
B. Full Name (Last, First, Middle Initial) Perkins Coie <hr/> Mailing Address 1201 Third Ave #4800 <hr/> City Seattle State WA Zip Code 98101 <hr/> Purpose of Disbursement Recount Legal Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Recount	Transaction ID: D281560 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 2 / 2 0 0 9
	Amount of Each Disbursement this Period 250000.00
	Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Recount
C. Full Name (Last, First, Middle Initial) Schlough Strategic Consulting <hr/> Mailing Address 2328 Champlain St NW #324 <hr/> City Washington State DC Zip Code 20009 <hr/> Purpose of Disbursement Recount Consulting Interactive Media Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Recount	Transaction ID: D281556 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 9
	Amount of Each Disbursement this Period 1882.00
	Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Recount

SUBTOTAL of Disbursements This Page (optional) ▶	253630.25
TOTAL This Period (last page this line number only) ▶	463278.15

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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A.

Full Name (Last, First, Middle Initial)
Brunswick Zone

Mailing Address 7545 Brooklyn Blvd

City State Zip Code
Brooklyn Park MN 55443

Purpose of Disbursement
FEA/GOTV Bowling Party

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D281549
Date of Disbursement

/ /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)
Worldcall Internet Inc

Mailing Address 1250 S Capital of Texas Hwy
Building #2 #235

City State Zip Code
Austin TX 78746

Purpose of Disbursement
FEA Voice Mail & Phone Service

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D281566
Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ►

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

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Avenet LLC	Nature of Debt (Purpose): Web Page Programming
Mailing Address 400 Sibley St Ste 560	
City Saint Paul State MN ZIP Code 55101-3170	

Outstanding Balance Beginning This Period 2695.00	Transaction ID: D27969	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2695.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Avenet LLC	Nature of Debt (Purpose): Web Page Programming
Mailing Address 400 Sibley St Ste 560	
City Saint Paul State MN ZIP Code 55101-3170	

Outstanding Balance Beginning This Period 586.50	Transaction ID: D219861	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 586.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Best Western Inn Thief River Falls	Nature of Debt (Purpose): Travel Expenses
Mailing Address 1060 Highway 32 South	
City Thief River Falls State MN ZIP Code 56701	

Outstanding Balance Beginning This Period 86.25	Transaction ID: D219896	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 86.25

1) SUBTOTALS This Period This Page (optional).....	▶	3367.75
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Coates Plaza Hotel			Nature of Debt (Purpose): Staff Lodging
Mailing Address 502 Chestnut St			
City Virginia	State MN	ZIP Code 55792-2532	

Outstanding Balance Beginning This Period <input type="text" value="1697.15"/>		Transaction ID: D27723	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1697.15"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Convio			Nature of Debt (Purpose): Web Page Data Hosting
Mailing Address PO Box 671445			
City Dallas	State TX	ZIP Code 75267-1445	

Outstanding Balance Beginning This Period <input type="text" value="1700.00"/>		Transaction ID: D27461	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1700.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Convio			Nature of Debt (Purpose): Web Page Data Host
Mailing Address PO Box 671445			
City Dallas	State TX	ZIP Code 75267-1445	

Outstanding Balance Beginning This Period <input type="text" value="825.00"/>		Transaction ID: D219888	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="825.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="4222.15"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Dell Computers			Nature of Debt (Purpose): Computer Equipments
Mailing Address PO Box 9020			
City Des Moines	State IA	ZIP Code 50368-9020	

Outstanding Balance Beginning This Period <input type="text" value="1529.14"/>		Transaction ID: D21467	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1529.14"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Expedite			Nature of Debt (Purpose): Party Fundraising Mail
Mailing Address 3770 Dunlap St N			
City Arden Hills	State MN	ZIP Code 55112-6907	

Outstanding Balance Beginning This Period <input type="text" value="2053.46"/>		Transaction ID: D27286	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2053.46"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Expedite			Nature of Debt (Purpose): Direct Mail Fundraising
Mailing Address 3770 Dunlap St N			
City Arden Hills	State MN	ZIP Code 55112-6907	

Outstanding Balance Beginning This Period <input type="text" value="742.71"/>		Transaction ID: D27715	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="742.71"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="4325.31"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Expedite			Nature of Debt (Purpose): Direct Mail Fundraising
Mailing Address 3770 Dunlap St N			
City Arden Hills	State MN	ZIP Code 55112-6907	

Outstanding Balance Beginning This Period <input type="text" value="2157.84"/>		Transaction ID: D27833	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2157.84"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Expedite			Nature of Debt (Purpose): Direct Mail Fundraising
Mailing Address 3770 Dunlap St N			
City Arden Hills	State MN	ZIP Code 55112-6907	

Outstanding Balance Beginning This Period <input type="text" value="2438.72"/>		Transaction ID: D27970	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2438.72"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Expedite			Nature of Debt (Purpose): Party Fundraising Mail
Mailing Address 3770 Dunlap St N			
City Arden Hills	State MN	ZIP Code 55112-6907	

Outstanding Balance Beginning This Period <input type="text" value="3278.42"/>		Transaction ID: D219889	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="3278.42"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="7874.98"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Global Financial Services	Nature of Debt (Purpose): Mail Equipment Lease
Mailing Address PO Box 856460	
City State ZIP Code Louisville KY 40285-6460	

Outstanding Balance Beginning This Period 2160.34	Transaction ID: D27840	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2160.34

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Honsa-Binder Printing	Nature of Debt (Purpose): Direct Mail Fundraising & Receipt Forms
Mailing Address 320 Spruce St	
City State ZIP Code Saint Paul MN 55101-2445	

Outstanding Balance Beginning This Period 1187.74	Transaction ID: D27462	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1187.74

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Honsa-Binder Printing	Nature of Debt (Purpose): Direct Mail Fundraising
Mailing Address 320 Spruce St	
City State ZIP Code Saint Paul MN 55101-2445	

Outstanding Balance Beginning This Period 1153.16	Transaction ID: D27713	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1153.16

1) SUBTOTALS This Period This Page (optional).....	4501.24
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Honsa-Binder Printing			Nature of Debt (Purpose): Direct Mail Fundraising Supplies
Mailing Address 320 Spruce St			
City Saint Paul	State MN	ZIP Code 55101-2445	

Outstanding Balance Beginning This Period <input type="text" value="400.48"/>		Transaction ID: D27965	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="400.48"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Honsa-Binder Printing			Nature of Debt (Purpose): Direct Mail Fundraising
Mailing Address 320 Spruce St			
City Saint Paul	State MN	ZIP Code 55101-2445	

Outstanding Balance Beginning This Period <input type="text" value="4319.11"/>		Transaction ID: D28191	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="4319.11"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Honsa-Binder Printing			Nature of Debt (Purpose): Party Direct Mail Fundraising
Mailing Address 320 Spruce St			
City Saint Paul	State MN	ZIP Code 55101-2445	

Outstanding Balance Beginning This Period <input type="text" value="7192.12"/>		Transaction ID: D219890	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="7192.12"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="11911.71"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Inter Tel Technologies			Nature of Debt (Purpose): Phone System Programming
Mailing Address PO Box 29653			
City Phoenix	State AZ	ZIP Code 85038-9653	

Outstanding Balance Beginning This Period <input type="text" value="337.50"/>		Transaction ID: D27837	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="337.50"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Metro Sales			Nature of Debt (Purpose): Copier Machine Maintenance
Mailing Address 1620 E 78th St			
City Minneapolis	State MN	ZIP Code 55423-4645	

Outstanding Balance Beginning This Period <input type="text" value="592.85"/>		Transaction ID: D219892	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="592.85"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Minneapolis Club			Nature of Debt (Purpose): Meeting Lunches
Mailing Address 729 2nd Ave S			
City Minneapolis	State MN	ZIP Code 55402-2463	

Outstanding Balance Beginning This Period <input type="text" value="751.22"/>		Transaction ID: D27603	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="751.22"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="1681.57"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Minneapolis Club			Nature of Debt (Purpose): Meeting Lunch
Mailing Address 729 2nd Ave S			
City Minneapolis	State MN	ZIP Code 55402-2463	

Outstanding Balance Beginning This Period		Transaction ID: D27839	
671.59			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	671.59	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Office Depot			Nature of Debt (Purpose): Office Supplies
Mailing Address PO Box 633211			
City Cincinnati	State OH	ZIP Code 45263-3211	

Outstanding Balance Beginning This Period		Transaction ID: D27729	
637.30			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	637.30	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Pitney Bowes Purchase Power			Nature of Debt (Purpose): Office Postage
Mailing Address PO Box 85390			
City Louisville	State KY	ZIP Code 40285-5390	

Outstanding Balance Beginning This Period		Transaction ID: D219894	
10822.30			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	10822.30	

1) SUBTOTALS This Period This Page (optional).....	▶	12131.19
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Pitney Bowes Purchase Power			Nature of Debt (Purpose): Office Postage
Mailing Address PO Box 85390			
City Louisville	State KY	ZIP Code 40285-5390	

Outstanding Balance Beginning This Period 2750.36		Transaction ID: D27290	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2750.36	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Pitney Bowes Purchase Power			Nature of Debt (Purpose): Office Postage
Mailing Address PO Box 85390			
City Louisville	State KY	ZIP Code 40285-5390	

Outstanding Balance Beginning This Period 1385.42		Transaction ID: D27600	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1385.42	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Pitney Bowes Purchase Power			Nature of Debt (Purpose): Office Postage
Mailing Address PO Box 85390			
City Louisville	State KY	ZIP Code 40285-5390	

Outstanding Balance Beginning This Period 1278.24		Transaction ID: D27841	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1278.24	

1) SUBTOTALS This Period This Page (optional).....	5414.02
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Solution Builders			Nature of Debt (Purpose): Computer Equipment
Mailing Address 7800 Metro Pkwy Ste 300			
City	State	ZIP Code	
Bloomington	MN	55425-1509	

Outstanding Balance Beginning This Period		Transaction ID: D27467	
934.59			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	934.59	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Tech Depot			Nature of Debt (Purpose): Computer Equipment
Mailing Address PO Box 33074			
City	State	ZIP Code	
Hartford	CT	06150-3074	

Outstanding Balance Beginning This Period		Transaction ID: D28198	
1784.33			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	1784.33	

1) SUBTOTALS This Period This Page (optional).....	2718.92
2) TOTALS This Period (last page this line number only).....	58148.84
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	58148.84

SCHEDULE H2 (FEC Form 3X)

ALLOCATION RATIOS

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.

Methods of allocation :

- I. FUNDRAISING activities are allocated using the 'funds received method' where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity.
For PACs Only : Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

ACTIVITY OR EVENT IDENTIFIER

HHH DINNER 4-21-07

ACTIVITY IS:

- Fundraising Direct Candidate Support

CHECK IF THE RATIO IS:

- New Revised Same as Previously Reported

FEDERAL %

39.00 %

NONFEDERAL %

61.00 %

Transaction ID:
R805

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Minnesota Democratic-Farmer-Labor Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Non Federal Portion of Admin	M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 0 9	-2696.48

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	-2696.48
Transaction ID: T2048	
ii) Generic Voter Drive	
Transaction ID:	
iii) Exempt Activities	
Transaction ID:	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	Transaction ID:
b) _____	Transaction ID:
c) Total Amount Transferred for Direct Fundraising	
v) Direct Candidate Support (List of Activity or Event Identifier)	
a) _____	Transaction ID:
b) _____	Transaction ID:
c) Total Amount Transferred For Direct Candidate Support	
vi) Public Communications Referring Only to Party (Made by PAC)	
	Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Minnesota Democratic-Farmer-Labor Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Non Federal Portion of Admin	M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 0 9	-3110.64

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	-3110.64	Transaction ID: T2050
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Minnesota Democratic-Farmer-Labor Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Non Federal Portion of Admin	M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 0 9	-500.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	-500.00	Transaction ID: T2051
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Minnesota Democratic-Farmer-Labor Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Non Federal Portion of Admin	M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 9	4953.50

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative		4953.50	Transaction ID: T2062
ii) Generic Voter Drive			Transaction ID:
iii) Exempt Activities			Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)			
a) _____			Transaction ID:
b) _____			Transaction ID:
c) Total Amount Transferred for Direct Fundraising			
v) Direct Candidate Support (List of Activity or Event Identifier)			
a) _____			Transaction ID:
b) _____			Transaction ID:
c) Total Amount Transferred For Direct Candidate Support			
vi) Public Communications Referring Only to Party (Made by PAC)			Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Minnesota Democratic-Farmer-Labor Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Non Federal Portion of Admin	M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 9	5313.50

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	5313.50	Transaction ID: T2063
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Minnesota Democratic-Farmer-Labor Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Non Federal Portion of Admin	M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 9	5000.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	5000.00	Transaction ID: T2064
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		
		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Minnesota Democratic-Farmer-Labor Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Non Federal Portion of Admin	M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 9	4000.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	4000.00	Transaction ID: T2073
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		
		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Minnesota Democratic-Farmer-Labor Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Non Federal Portion of Admin	M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 9	2966.38

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	2966.38	Transaction ID: T2074
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Minnesota Democratic-Farmer-Labor Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Non Federal Portion of Admin	M M / D D / Y Y Y Y 0 4 / 2 9 / 2 0 0 9	1600.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	1600.00	Transaction ID: T2075
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Minnesota Democratic-Farmer-Labor Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Non Federal Portion of Admin	M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 9	2871.18

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	2871.18	Transaction ID: T2084
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Minnesota Democratic-Farmer-Labor Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
State Share of Fundraising	M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 9	26000.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative		0.00	Transaction ID: T2089
ii) Generic Voter Drive			Transaction ID:
iii) Exempt Activities			Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)			
a) 207F Humphrey Day Dinner	26000.00		Transaction ID: T2090
b) _____			Transaction ID:
c) Total Amount Transferred for Direct Fundraising		26000.00	
v) Direct Candidate Support (List of Activity or Event Identifier)			
a) _____			Transaction ID:
b) _____			Transaction ID:
c) Total Amount Transferred For Direct Candidate Support			
vi) Public Communications Referring Only to Party (Made by PAC)			Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	20397.44
TOTAL This Period (Generic Voter Drive)	0.00
TOTAL This Period (Exempt Activities)	0.00
TOTAL This Period (Direct Fundraising)	26000.00
TOTAL This Period (Direct Candidate Support)	0.00
TOTAL This Period (Public Communications Referring Only to Party)	0.00
TOTAL This Period (Total Amount Transferred)	46397.44

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) Array Financial Services			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 9449 Science Center Dr			Allocated Activity or Event Year-To-Date 123482.16	
City New Hope	State MN	Zip Code 55428-3623	Date M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 9 Transaction ID: D281552	
Purpose of Disbursement: Directors abd Officers Insurance				
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
155.55		881.45		1037.00

B. Full Name (Last, First, Middle Initial) Array Financial Services			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 9449 Science Center Dr			Allocated Activity or Event Year-To-Date 123482.16	
City New Hope	State MN	Zip Code 55428-3623	Date M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 9 Transaction ID: D281586	
Purpose of Disbursement: General Liability Insurance				
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
506.65		2871.03		3377.68

C. Full Name (Last, First, Middle Initial) Aspen Waste Systems			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2951 Weeks Ave SE			Allocated Activity or Event Year-To-Date 123482.16	
City Minneapolis	State MN	Zip Code 55414-2833	Date M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 9 Transaction ID: D281576	
Purpose of Disbursement: Trash & Recycling				
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.59		94.01		110.60

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
678.79		3846.49		4525.28

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) Atomic			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 615 N. 3rd Street			Allocated Activity or Event Year-To-Date 123482.16		
City Minneapolis	State MN	Zip Code 55101	Date MM / DD / YYYY 04 / 02 / 2009		
Purpose of Disbursement: Phones			Transaction ID: D281567		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
107.07		606.68		713.75

B. Full Name (Last, First, Middle Initial) City of Saint Paul			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 350 St Peter St #300			Allocated Activity or Event Year-To-Date 123482.16		
City Saint Paul	State MN	Zip Code 55102	Date MM / DD / YYYY 04 / 12 / 2009		
Purpose of Disbursement: Alarm Fee			Transaction ID: D281577		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.25		29.75		35.00

C. Full Name (Last, First, Middle Initial) Claude M Anderson Electric			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1551 Payne Ave			Allocated Activity or Event Year-To-Date 123482.16		
City Saint Paul	State MN	Zip Code 55130	Date MM / DD / YYYY 04 / 12 / 2009		
Purpose of Disbursement: Electric Repair			Transaction ID: D281578		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.70		83.30		98.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
127.02		719.73		846.75

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) Department of Administration			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 50 Sherburne Ave			Allocated Activity or Event Year-To-Date 123482.16		
City Saint Paul	State MN	Zip Code 55155-1402	Date <input type="text" value="04"/> / <input type="text" value="12"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: Meeting Space Rental			Transaction ID: D281579		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.73		94.77		111.50

B. Full Name (Last, First, Middle Initial) Direct TV			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 60036			Allocated Activity or Event Year-To-Date 123482.16		
City Los Angeles	State CA	Zip Code 90060-0036	Date <input type="text" value="04"/> / <input type="text" value="12"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: Cable TV			Transaction ID: D281580		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
47.23		267.63		314.86

C. Full Name (Last, First, Middle Initial) GE Capital			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 31001 0273			Allocated Activity or Event Year-To-Date 123482.16		
City Pasadena	State CA	Zip Code 91110	Date <input type="text" value="04"/> / <input type="text" value="12"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: Copier Lease			Transaction ID: D281581		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
135.07		765.37		900.44

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
199.03		1127.77		1326.80

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) Hilton Hotel			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1001 Marquette Ave			Allocated Activity or Event Year-To-Date [69000.00]	
City Minneapolis	State MN	Zip Code 55403	Date <input type="text" value="04"/> / <input type="text" value="03"/> / <input type="text" value="2009"/>	
Purpose of Disbursement: HHH Dinner			Transaction ID: D281570	
Activity or Event Identifier: 207F Humphrey Day Dinner				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[3510.00]		[5490.00]		[9000.00]

B. Full Name (Last, First, Middle Initial) Hotels.com			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 10440 N Central Expy			Allocated Activity or Event Year-To-Date [123482.16]	
City Dallas	State TX	Zip Code 75231-2221	Date <input type="text" value="04"/> / <input type="text" value="23"/> / <input type="text" value="2009"/>	
Purpose of Disbursement: Room Rental			Transaction ID: D281592	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[58.94]		[333.96]		[392.90]

C. Full Name (Last, First, Middle Initial) Joe's Lawnscape			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 256 6th Ave S			Allocated Activity or Event Year-To-Date [123482.16]	
City South Saint Paul	State MN	Zip Code 55075-2339	Date <input type="text" value="04"/> / <input type="text" value="28"/> / <input type="text" value="2009"/>	
Purpose of Disbursement: Lawn Service			Transaction ID: D281593	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[218.53]		[1238.33]		[1456.86]

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[3787.47]		[7062.29]		[10849.76]

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
[]	[]	[]

Form/Schedule : **H4**

Hilton Washington 1919 Connecticut Ave NW Washington DC 20009 2 nights hotel room

Transaction ID : **D281592**

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) Pitney Bowes Purchase Power			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 85390			Allocated Activity or Event Year-To-Date 123482.16		
City	State	Zip Code	Category/ Type		
Louisville	KY	40285-5390			
Purpose of Disbursement: Office Postage			Date <input type="text" value="04"/> / <input type="text" value="10"/> / <input type="text" value="2009"/>		
Activity or Event Identifier: Administrative			Transaction ID: D281573		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
465.57		2638.23		3103.80

B. Full Name (Last, First, Middle Initial) Solution Builders			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 7800 Metro Pkwy Ste 300			Allocated Activity or Event Year-To-Date 123482.16		
City	State	Zip Code	Category/ Type		
Bloomington	MN	55425-1509			
Purpose of Disbursement: Computer Support			Date <input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>		
Activity or Event Identifier: Administrative			Transaction ID: D281588		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
450.00		2550.00		3000.00

C. Full Name (Last, First, Middle Initial) Special School District No 1			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 807 Northeast Broadway			Allocated Activity or Event Year-To-Date 123482.16		
City	State	Zip Code	Category/ Type		
Minneapolis	MN	55413			
Purpose of Disbursement: Meeting Room Rent			Date <input type="text" value="04"/> / <input type="text" value="12"/> / <input type="text" value="2009"/>		
Activity or Event Identifier: Administrative			Transaction ID: D281582		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
57.75		327.25		385.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
973.32		5515.48		6488.80

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial)
SPRWS
Mailing Address
1900 Rice St
City State Zip Code
Saint Paul MN 55113-6810
Purpose of Disbursement:
Water Service
Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
123482.16
Date 04 / 12 / 2009
Transaction ID: D281574

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.99		45.29		53.28

B. Full Name (Last, First, Middle Initial)
UPS
Mailing Address
PO Box 505820
City State Zip Code
The Lakes NV 88905-5820
Purpose of Disbursement:
Shipping
Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
123482.16
Date 04 / 12 / 2009
Transaction ID: D281583

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.99		50.97		59.96

C. Full Name (Last, First, Middle Initial)
US Bank
Mailing Address
5th and Robert St
City State Zip Code
Saint Paul MN 55101
Purpose of Disbursement:
Mortgage
Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
123482.16
Date 04 / 15 / 2009
Transaction ID: D281587

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
779.35		4416.38		5195.73

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
796.33		4512.64		5308.97

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) US Bank			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 5th and Robert St			Allocated Activity or Event Year-To-Date 123482.16		
City Saint Paul	State MN	Zip Code 55101	Date <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 4 / 2 1 / 2 0 0 9		
Purpose of Disbursement: Bank Charges			Transaction ID: D281590		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.62		31.88		37.50

B. Full Name (Last, First, Middle Initial) US Bank			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 5th and Robert St			Allocated Activity or Event Year-To-Date 123482.16		
City Saint Paul	State MN	Zip Code 55101	Date <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 4 / 2 2 / 2 0 0 9		
Purpose of Disbursement: Bank Charges			Transaction ID: D281591		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.62		31.88		37.50

C. Full Name (Last, First, Middle Initial) Verizon Wireless			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 25505			Allocated Activity or Event Year-To-Date 123482.16		
City Lehigh Valley	State PA	Zip Code 18002-5505	Date <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 4 / 1 2 / 2 0 0 9		
Purpose of Disbursement: Cell Phones			Transaction ID: D281584		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
443.79		2514.79		2958.58

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
455.03		2578.55		3033.58

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) Vonage			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2147 Route 27			Allocated Activity or Event Year-To-Date 123482.16	
City State Zip Code Edison NJ 08817	Category/ Type		Date M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 9	
Purpose of Disbursement: Phone Service			Transaction ID: D281589	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
593.25		3361.80		3955.05

B. Full Name (Last, First, Middle Initial) Xcel Energy			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 414 Nicollet Mall			Allocated Activity or Event Year-To-Date 123482.16	
City State Zip Code Minneapolis MN 55401-1927	Category/ Type		Date M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 9	
Purpose of Disbursement: Utilities			Transaction ID: D281585	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
263.12		1491.03		1754.15

C. Full Name (Last, First, Middle Initial) XO Communications			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 828618			Allocated Activity or Event Year-To-Date 123482.16	
City State Zip Code Philadelphia PA 19182-0001	Category/ Type		Date M M / D D / Y Y Y Y 0 4 / 0 3 / 2 0 0 9	
Purpose of Disbursement: Phone Service			Transaction ID: D281569	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
142.95		810.05		953.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
999.32		5662.88		6662.20

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
8016.31		31025.83		39042.14