



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Minnesota Democratic-Farmer-Labor Party**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="188910.33"/>	<input type="text" value="188910.33"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="741775.43"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="845039.19"/>	<input type="text" value="5539015.66"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="1586814.62"/>	<input type="text" value="5727925.99"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="817370.22"/>	<input type="text" value="4958481.59"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="769444.40"/>	<input type="text" value="769444.40"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="88179.53"/>	

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:  /  /  To:  /  /

<b>I. Receipts</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	58398.00	781480.01
(ii) Unitemized .....	62509.00	829439.24
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	120907.00	1610919.25
(b) Political Party Committees .....	0.00	28980.00
(c) Other Political Committees (such as PACs).....	143985.50	393845.70
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	264892.50	2033744.95
12. Transfers From Affiliated/Other Party Committees.....	391812.48	1812211.79
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).....	492.40	2934.43
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	3722.52	56596.66
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	171164.52	1608347.11
(b) Levin Funds (from Schedule H5) .....	12954.77	25180.72
(c) Total Transfers (add 18(a) and 18(b))..	184119.29	1633527.83
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	845039.19	5539015.66
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	660919.90	3905487.83

# DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	56692.59	649618.40
(ii) Non-Federal Share.....	173422.49	1616034.32
(b) Other Federal Operating Expenditures .....	35023.35	926974.39
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	265138.43	3192627.11
22. Transfers to Affiliated/Other Party Committees.....	18400.00	147200.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2000.00	9500.00
24. Independent Expenditures (use Schedule E) .....	25466.00	26316.00
25. Coordinated Party Expenditures (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	9125.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	250.00	9125.00
29. Other Disbursements .....	0.00	2500.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	3443.66	6693.59
(ii) "Levin" Share.....	12954.77	25180.72
(b) Federal Election Activity Paid Entirely With Federal Funds .....	489717.36	1539339.17
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	506115.79	1571213.48
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	817370.22	4958481.59
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	630992.96	3317266.55

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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) .....	264892.50	2033744.95
34. Total Contribution Refunds (from Line 28(d)) .....	250.00	9125.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	264642.50	2024619.95
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ▶	91715.94	1576592.79
37. Offsets to Operating Expenditures (from Line 15, page 3).....	492.40	2934.43
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	91223.54	1573658.36

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XN  
Transaction ID :

The party paid for all volunteer materials with its own funds. No funds from National Party Transfers were used in association with these activities. Disbursements itemized on Schedule B, line 21b relate to individuals that are paid 100% federal but not currently involved in federal election activity. Disbursements itemized on Schedule H4, Line 21a relate to individuals who spend more than 0% but less than 25% in a given month on any federal activity. Disbursements itemized on Schedule B, line 30 relate to individuals who spend more than 25% on federal election activity. All related expenses are apportioned accordingly.

Form/Schedule:  
Transaction ID:

**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 7 OF 229
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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. Jerome Adler**  
Full Name (Last, First, Middle Initial)

Mailing Address 1730 Graham Ave

City Saint Paul State MN Zip Code 55116-3090

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
10 / 10 / 2014  
**Transaction ID : C10090488**

Amount of Each Receipt this Period  
18.00

**B. Kevin Armstrong**  
Full Name (Last, First, Middle Initial)

Mailing Address 506 River St

City Minneapolis State MN Zip Code 55401-2542

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

Name of Employer DST Brokerage Solutions, LLC Occupation General Counsel

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 575.00

Date of Receipt  
10 / 03 / 2014  
**Transaction ID : C10079411**

Amount of Each Receipt this Period  
75.00

**C. Roger Aus**  
Full Name (Last, First, Middle Initial)

Mailing Address 7000 Park Ave

City Richfield State MN Zip Code 55423-3259

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt  
10 / 07 / 2014  
**Transaction ID : C10088030**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 193.00

**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 OF 229  
(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**

Full Name (Last, First, Middle Initial)  
**A. Ross Bennett**

Mailing Address 9144 Glen Edin Ln

City State Zip Code  
 Brooklyn Park MN 55443-1708

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

Name of Employer Occupation  
 Bennett & Murray & Assoc Attorney

Receipt For: 2014  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1125.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 14 / 2014

**Transaction ID : C10091846**

Amount of Each Receipt this Period  
 1000.00

Full Name (Last, First, Middle Initial)  
**B. Kjell Bergh**

Mailing Address 5428 Lyndale Ave S

City State Zip Code  
 Minneapolis MN 55082

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

Name of Employer Occupation  
 Borton Volvo, Inc. Owner

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 03 / 2014

**Transaction ID : C10089720**

Amount of Each Receipt this Period  
 5000.00

Full Name (Last, First, Middle Initial)  
**c. Gerald Berglin**

Mailing Address 3424 46th Ave S

City State Zip Code  
 Minneapolis MN 55406-2931

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

Name of Employer Occupation  
 Nursing Home Administrator

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : C10094604**

Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6250.00

**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 9 OF 229
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<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**

Full Name (Last, First, Middle Initial)  
**A. Mark Bisignani**

Mailing Address 3137 James Ave S

City State Zip Code  
Minneapolis MN 55408-2519

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

Name of Employer Occupation  
MROPA Physican

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 13 / 2014  
**Transaction ID : C10091444**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. Dave Brown**

Mailing Address 1040 64th Ave NE

City State Zip Code  
Fridley MN 55432-5138

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

Name of Employer Occupation  
BLET-TRC Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 15 / 2014  
**Transaction ID : C10093445**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**C. John Bryson**

Mailing Address 215 10th Ave S Unit 208

City State Zip Code  
Minneapolis MN 55415-1749

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

Name of Employer Occupation  
University of Minnesota Professor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 02 / 2014  
**Transaction ID : C10079084**

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	600.00
<b>TOTAL</b> 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 OF 229
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<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**

Full Name (Last, First, Middle Initial)  
**A. Marcia Carsey**

Mailing Address c/o Capell Rudolph  
11601 Wilshire Blvd #1840

City Los Angeles State CA Zip Code 90025

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

Name of Employer Casey Warner Occupation Producer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
15000.00

Date of Receipt  
10 / 15 / 2014  
**Transaction ID : C10100364**

Amount of Each Receipt this Period  
5000.00

Over the limit. Transfer to state account on Schedule B, Line 22, Page 85.

Full Name (Last, First, Middle Initial)  
**B. Teresa Cerling**

Mailing Address 20103 County 8

City Wykoff State MN Zip Code 55990-2150

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

Name of Employer Chatfield Brass Band, Inc Occupation Library Manager

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
10 / 07 / 2014  
**Transaction ID : C10088188**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**C. George Clark**

Mailing Address 403 S Boundary Ave

City Proctor State MN Zip Code 55810-2424

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
10 / 09 / 2014  
**Transaction ID : C10090350**

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5150.00

**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 11 OF 229
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<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**

Full Name (Last, First, Middle Initial)  
**A. Jeff Clark**

Mailing Address 1723 140th Ave NE

City Ham Lake State MN Zip Code 55304-7605

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

Name of Employer PTC Occupation Software Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 05 / 2014**

**Transaction ID : C10083137**

Amount of Each Receipt this Period  
**350.00**

Full Name (Last, First, Middle Initial)  
**B. Kelly Coleman**

Mailing Address 13301 Maple Knoll Way Apt 414

City Maple Grove State MN Zip Code 55369-5018

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

Name of Employer Medtronic Occupation Scientist

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 06 / 2014**

**Transaction ID : C10087519**

Amount of Each Receipt this Period  
**250.00**

Full Name (Last, First, Middle Initial)  
**C. Jim Danielson**

Mailing Address 924 Belsly Blvd

City Moorhead State MN Zip Code 56560-5011

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 09 / 2014**

**Transaction ID : C10090246**

Amount of Each Receipt this Period  
**25.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>310.00</b>
<b>TOTAL</b> 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 OF 229  
(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**

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

Mailing Address 2440 S Milwaukee St

City State Zip Code  
 Denver CO 80210-5514

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

Name of Employer Occupation  
 Osborn Medical Management

Receipt For: 2014  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 12 / 2014

**Transaction ID : C10091193**

Amount of Each Receipt this Period  
 250.00

Full Name (Last, First, Middle Initial)  
**B. Polly Dedrick**

Mailing Address 605 Kingston Ave

City State Zip Code  
 Maplewood MN 55117-2524

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

Name of Employer Occupation  
 Self Musician

Receipt For: 2014  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 850.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 07 / 2014

**Transaction ID : C10088713**

Amount of Each Receipt this Period  
 100.00

Full Name (Last, First, Middle Initial)  
**C. Ronald DeHarpporte**

Mailing Address 7021 Weston Cir

City State Zip Code  
 Minneapolis MN 55439-1954

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

Name of Employer Occupation  
 Retired Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 03 / 2014

**Transaction ID : C10089724**

Amount of Each Receipt this Period  
 5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5350.00

**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 13 OF 229
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial)  
**A. Russel Engleson**

Mailing Address 5987 24th St NE

City Willmar State MN Zip Code 56201-9188

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **690.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 06 / 2014  
**Transaction ID : C10088172**

Amount of Each Receipt this Period  
**100.00**

Full Name (Last, First, Middle Initial)  
**B. Elizabeth Erhart**

Mailing Address 4740 154th Ln NW

City Ramsey State MN Zip Code 55303-4286

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

Name of Employer Erhart Legal LLC Occupation Office Manger

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 13 / 2014  
**Transaction ID : C10093391**

Amount of Each Receipt this Period  
**200.00**

Full Name (Last, First, Middle Initial)  
**C. Joe Foss**

Mailing Address 359 66th Ave NE

City Fridley State MN Zip Code 55432-4402

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

Name of Employer Anoka Hennepin ISD 11 Occupation Teacher

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : C10094639**

Amount of Each Receipt this Period  
**30.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>330.00</b>
<b>TOTAL</b> 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 OF 229  
(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**

Full Name (Last, First, Middle Initial)  
**A. Amy Fowler**

Mailing Address 164 Mt View Rd

City Rhinebeck State NY Zip Code 12572

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

Name of Employer Self-Employed Occupation Farmer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 03 / 2014  
**Transaction ID : C10089782**

Amount of Each Receipt this Period  
 10000.00

Full Name (Last, First, Middle Initial)  
**B. Morgan Fowler**

Mailing Address 164 Mt View Rd

City Rhinebeck State NY Zip Code 12572

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

Name of Employer Global Crop Diversity Trust Occupation Executive Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 03 / 2014  
**Transaction ID : C10089785**

Amount of Each Receipt this Period  
 10000.00

Full Name (Last, First, Middle Initial)  
**C. Carol Freeman**

Mailing Address 3237 Lyndale Ave S

City Minneapolis State MN Zip Code 55408-3786

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2845.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 13 / 2014  
**Transaction ID : C10093311**

Amount of Each Receipt this Period  
 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 20020.00

**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 15 OF 229  
(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**

Full Name (Last, First, Middle Initial)  
**A. Jacob Frey**

Mailing Address 316 E Hennepin Ave Ste 300

City State Zip Code  
 Minneapolis MN 55414-1072

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

Name of Employer Occupation  
 City of Minneapolis City Council

Receipt For: 2014  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 13 / 2014  
**Transaction ID : C10091449**

Amount of Each Receipt this Period  
 100.00

Full Name (Last, First, Middle Initial)  
**B. Barbara Gilbertson**

Mailing Address 4059 Beaver Dam Rd

City State Zip Code  
 Eagan MN 55122-2100

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

Name of Employer Occupation  
 Self Writer

Receipt For: 2014  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 07 / 2014  
**Transaction ID : C10088622**

Amount of Each Receipt this Period  
 250.00

Full Name (Last, First, Middle Initial)  
**C. Jules Goldstein**

Mailing Address 4730 Park Commons Dr Unit 318

City State Zip Code  
 St Louis Park MN 55416-5217

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

Name of Employer Occupation  
 Retired Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 235.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 13 / 2014  
**Transaction ID : C10093347**

Amount of Each Receipt this Period  
 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 360.00

**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 16 OF 229
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<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. Eileen Gorrell**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1313 Carlson Lake Ln  
City Eagan State MN Zip Code 55123-1718  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ **800.00**

Date of Receipt  
**10 / 07 / 2014**  
**Transaction ID : C10088183**  
Amount of Each Receipt this Period  
**100.00**

**B. Eileen Gorrell**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1313 Carlson Lake Ln  
City Eagan State MN Zip Code 55123-1718  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ **800.00**

Date of Receipt  
**10 / 10 / 2014**  
**Transaction ID : C10090611**  
Amount of Each Receipt this Period  
**100.00**

**C. H Theodore Grindal**  
Full Name (Last, First, Middle Initial)  
Mailing Address 514 River St  
City Minneapolis State MN Zip Code 55401-2542  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Lockridge Grindal Nauen P.L.L.P Occupation Attorney  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt  
**10 / 03 / 2014**  
**Transaction ID : C10089725**  
Amount of Each Receipt this Period  
**1000.00**

**SUBTOTAL** of Receipts This Page (optional)..... **1200.00**  
**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 17 OF 229
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<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**

Full Name (Last, First, Middle Initial)  
**A. Jacob Grippen**

Mailing Address 1114 W Broadway St  
Apt 4

City Winona State MN Zip Code 55987-5177

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

Name of Employer Unemployed Occupation Unemployed

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1045.00

Date of Receipt  
10 / 13 / 2014  
**Transaction ID : C10091432**

Amount of Each Receipt this Period  
20.00

Full Name (Last, First, Middle Initial)  
**B. James Gust**

Mailing Address 8288 Red Rock Rd

City Eden Prairie State MN Zip Code 55347-1422

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
235.00

Date of Receipt  
10 / 09 / 2014  
**Transaction ID : C10090294**

Amount of Each Receipt this Period  
35.00

Full Name (Last, First, Middle Initial)  
**c. Arline Hagen**

Mailing Address 1527 County Road B E

City Maplewood State MN Zip Code 55109-3503

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
10 / 06 / 2014  
**Transaction ID : C10088152**

Amount of Each Receipt this Period  
75.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 130.00

**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 18 OF 229
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Laura Handler**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4557 Ches Mar Dr  
 City Eagan State MN Zip Code 55123  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation Musician  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 13 / 2014  
**Transaction ID : C10091321**  
 Amount of Each Receipt this Period  
 25.00

**B. Diane Hellie**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4015 Katie Ln NW  
 City Rochester State MN Zip Code 55901-1368  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 13 / 2014  
**Transaction ID : C10093359**  
 Amount of Each Receipt this Period  
 25.00

**C. Richard Hendrickson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 50 Melbourne Ave SE  
 City Minneapolis State MN Zip Code 55414-3514  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : C10092841**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<b>TOTAL</b> 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 19 OF 229
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Elayne Hengler**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 97  
 City Hanover State MN Zip Code 55341-0097  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **350.00**

Date of Receipt  
 10 / 02 / 2014  
**Transaction ID : C10079068**  
 Amount of Each Receipt this Period  
**75.00**

**B. Elayne Hengler**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 97  
 City Hanover State MN Zip Code 55341-0097  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **350.00**

Date of Receipt  
 10 / 15 / 2014  
**Transaction ID : C10094663**  
 Amount of Each Receipt this Period  
**50.00**

**C. Russell Hess**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 440 5th St SW  
 City Plainview State MN Zip Code 55964-1147  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Laborer's District Council of MN and N Occupation Political Coordinator  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **240.00**

Date of Receipt  
 10 / 13 / 2014  
**Transaction ID : C10093334**  
 Amount of Each Receipt this Period  
**100.00**

**SUBTOTAL** of Receipts This Page (optional)..... **225.00**  
**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 20 OF 229
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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. J Michael Hirsch**  
Full Name (Last, First, Middle Initial)

Mailing Address 516 4th Ave SE

City State Zip Code  
Minneapolis MN 55414-1612

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
490.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 14 / 2014

**Transaction ID : C10091683**

Amount of Each Receipt this Period  
20.00

**B. Wayne Hoeschen**  
Full Name (Last, First, Middle Initial)

Mailing Address 4465 Harbor Place Dr

City State Zip Code  
Shoreview MN 55126-1938

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 07 / 2014

**Transaction ID : C10088702**

Amount of Each Receipt this Period  
250.00

**C. Paul Hoffinger**  
Full Name (Last, First, Middle Initial)

Mailing Address 4409 Cinnamon Ridge Cir

City State Zip Code  
Eagan MN 55122-2393

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
395.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 08 / 2014

**Transaction ID : C10088862**

Amount of Each Receipt this Period  
35.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	305.00
<b>TOTAL</b> 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 OF 229  
(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**

Full Name (Last, First, Middle Initial)  
**A. Debra Hoffman**  
 Mailing Address 16208 Baywood Ln  
 City State Zip Code  
 Eden Prairie MN 55346-2412  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Dr. Peggy Baker Office Worker  
 Receipt For: 2014  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 335.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 07 / 2014  
**Transaction ID : C10088760**  
 Amount of Each Receipt this Period  
 35.00

Full Name (Last, First, Middle Initial)  
**B. William Hosfield**  
 Mailing Address 7100 Metro Blvd  
 Unit 109  
 City State Zip Code  
 Edina MN 55439-2105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Self Physician  
 Receipt For: 2012  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 06 / 2014  
**Transaction ID : C10086701**  
 Amount of Each Receipt this Period  
 50.00

Full Name (Last, First, Middle Initial)  
**C. Cindy Houser**  
 Mailing Address 1514 Franklin Ln  
 City State Zip Code  
 Anoka MN 55303-2140  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 MNSCU Instructor  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 440.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 13 / 2014  
**Transaction ID : C10093316**  
 Amount of Each Receipt this Period  
 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 105.00  
**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 22 OF 229
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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. Robert Hunter**  
Full Name (Last, First, Middle Initial)

Mailing Address 405 7th St SE

City Waseca State MN Zip Code 56093-3445

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
10 / 07 / 2014  
Transaction ID : C10088026

Amount of Each Receipt this Period  
50.00

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

Mailing Address 6815 Cardinal Cove Dr

City Mound State MN Zip Code 55364-9535

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
10 / 07 / 2014  
Transaction ID : C10088251

Amount of Each Receipt this Period  
25.00

**C. Mark Jaworski**  
Full Name (Last, First, Middle Initial)

Mailing Address 4156 Cleveland St NE

City Columbia Heights State MN Zip Code 55421-3348

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 305.00

Date of Receipt  
10 / 11 / 2014  
Transaction ID : C10091042

Amount of Each Receipt this Period  
30.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 105.00

**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 23 OF 229
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<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. Kent Jeppesen**  
Full Name (Last, First, Middle Initial)

Mailing Address 6255 Oakgreen Ave S

City State Zip Code  
Hastings MN 55033-9153

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

Name of Employer Occupation  
DLI Truck Driver

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 06 / 2014

**Transaction ID : C10088178**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 115 75th Ave N

City State Zip Code  
Brooklyn Park MN 55444-2574

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 08 / 2014

**Transaction ID : C10089723**

Amount of Each Receipt this Period  
250.00

**C. Anne Jones**  
Full Name (Last, First, Middle Initial)

Mailing Address 3441 47th Ave S

City State Zip Code  
Minneapolis MN 55406-2983

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

Name of Employer Occupation  
Minnesota Department of Health Registered Nurse

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 02 / 2014

**Transaction ID : C10079044**

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 500.00

**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 24 OF 229
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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. Anne Jones**  
Full Name (Last, First, Middle Initial)

Mailing Address 3441 47th Ave S

City Minneapolis State MN Zip Code 55406-2983

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

Name of Employer Minnesota Department of Health Occupation Registered Nurse

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
10 / 07 / 2014  
**Transaction ID : C1008850**

Amount of Each Receipt this Period  
350.00

**B. Kathleen Jones**  
Full Name (Last, First, Middle Initial)

Mailing Address 469 Ferndale Woods Rd

City Wayzata State MN Zip Code 55391-1542

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

Name of Employer None Occupation None

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
10 / 07 / 2014  
**Transaction ID : C10087571**

Amount of Each Receipt this Period  
100.00

**C. Donald Kahn**  
Full Name (Last, First, Middle Initial)

Mailing Address 115 Island Ave W

City Minneapolis State MN Zip Code 55401-1509

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
10 / 15 / 2014  
**Transaction ID : C10094583**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 235.00

**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 25 OF 229
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<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. Garrison Keillor**  
Full Name (Last, First, Middle Initial)  
Mailing Address 294 Summit Ave  
City Saint Paul State MN Zip Code 55102-2121  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Writer  
Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 3000.00

Date of Receipt  
10 / 07 / 2014  
**Transaction ID : C10088187**  
Amount of Each Receipt this Period  
1000.00

**B. Sue Kraft**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 243  
City Mahnomen State MN Zip Code 56557-0243  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-Employed Occupation Journalism  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
10 / 15 / 2014  
**Transaction ID : C10094488**  
Amount of Each Receipt this Period  
150.00

**C. Patricia Kubly**  
Full Name (Last, First, Middle Initial)  
Mailing Address 125 Aadland Cir  
City Granite Falls State MN Zip Code 56241-1833  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
10 / 13 / 2014  
**Transaction ID : C10091297**  
Amount of Each Receipt this Period  
20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1170.00  
**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 26 OF 229  
(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**

Full Name (Last, First, Middle Initial)  
**A. Nancy Larson**

Mailing Address 21950 Cсах 4

City Dassel                      State MN                      Zip Code 55325-3641

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

Name of Employer Dassel Lakeside Home                      Occupation Lobbyist

Receipt For: 2014  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 585.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : C10090861**

Amount of Each Receipt this Period  
 35.00

Full Name (Last, First, Middle Initial)  
**B. John Lesch**

Mailing Address 1201 Como Blvd W

City Saint Paul                      State MN                      Zip Code 55103-1025

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

Name of Employer State of Minnesota                      Occupation Legislator

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 13 / 2014  
**Transaction ID : C10092967**

Amount of Each Receipt this Period  
 1000.00

Full Name (Last, First, Middle Initial)  
**C. Alice Lesney**

Mailing Address 2180 62nd St E

City Inver Grove Heights                      State MN                      Zip Code 55077-2162

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

Name of Employer City of Inver Grove Heights                      Occupation Swimming Instructor

Receipt For: 2014  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 08 / 2014  
**Transaction ID : C10089746**

Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1285.00

**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 27 OF 229
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<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. Dan Levin**  
Full Name (Last, First, Middle Initial)  
Mailing Address 23 Pleasant View Trl  
City North Mankato State MN Zip Code 56003-2442  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Daniel Andrew Henschel Levin Occupation Consultant  
Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ **575.00**

Date of Receipt  
**10 / 02 / 2014**  
Transaction ID : **C10078954**  
Amount of Each Receipt this Period  
**75.00**

**B. Janet Liliemark**  
Full Name (Last, First, Middle Initial)  
Mailing Address 9994 Fillmore St NE  
City Blaine State MN Zip Code 55434-3550  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Stinson Leonard Street LLP Occupation Legal Administrative Assistant  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ **350.00**

Date of Receipt  
**10 / 13 / 2014**  
Transaction ID : **C10093363**  
Amount of Each Receipt this Period  
**50.00**

**C. Aaron Lofgren**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1309 Fraser Dr  
City Grand Rapids State MN Zip Code 55744-4130  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Nashwauk Luth. Church Occupation Pastor  
Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
**10 / 08 / 2014**  
Transaction ID : **C10088916**  
Amount of Each Receipt this Period  
**100.00**

**SUBTOTAL** of Receipts This Page (optional)..... **225.00**  
**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 28 OF 229
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Ann Lowry</b>		Date of Receipt
Mailing Address 3985 Plymouth Rd		<input type="text" value="10"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>
City	State	Zip Code
Minnetonka	MN	55305-5003
FEC ID number of contributing federal political committee.		<b>Transaction ID : C10082195</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	
Colon and Rectal Surgery Associates	Office Employee	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Robert Mackey</b>		Date of Receipt
Mailing Address 2043 Vienna Ln		<input type="text" value="10"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>
City	State	Zip Code
Eagan	MN	55122-2329
FEC ID number of contributing federal political committee.		<b>Transaction ID : C10092179</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="500.00"/>
Name of Employer	Occupation	
Retired	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="885.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Diane Malfeld</b>		Date of Receipt
Mailing Address 84 N Mississippi Rv Blvd		<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City	State	Zip Code
St. Paul	MN	55104-5613
FEC ID number of contributing federal political committee.		<b>Transaction ID : C10090653</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	
Retired	Retired	
Receipt For: 2014	Aggregate Year-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="750.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<input type="text" value="1000.00"/>
<b>TOTAL</b> This Period (last page this line number only).....	<input type="text" value=""/>

**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 29 OF 229
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<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. Kevin Maroney**  
Full Name (Last, First, Middle Initial)

Mailing Address 5052 Norman Dr

City Minnetonka	State MN	Zip Code 55345-4636
--------------------	-------------	------------------------

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

Name of Employer United Healthcare	Occupation Attorney
---------------------------------------	------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	13	/	2014

**Transaction ID : C10091491**

Amount of Each Receipt this Period  

75.00
-------

**B. Martin McGraw**  
Full Name (Last, First, Middle Initial)

Mailing Address 24114 726th Ave

City Dassel	State MN	Zip Code 55325-3497
----------------	-------------	------------------------

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

Name of Employer AME Community Services, inc.	Occupation CEO
--	-------------------

Receipt For: 2014  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	07	/	2014

**Transaction ID : C10088803**

Amount of Each Receipt this Period  

100.00
--------

**C. Mary Ann McGuire**  
Full Name (Last, First, Middle Initial)

Mailing Address 5017 Sheridan Ave S

City Minneapolis	State MN	Zip Code 55410-2212
---------------------	-------------	------------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2014

**Transaction ID : C10094573**

Amount of Each Receipt this Period  

100.00
--------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>275.00</b>
<b>TOTAL</b> 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 30 OF 229
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<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. Mary McKelvey**  
Full Name (Last, First, Middle Initial)

Mailing Address 2601 W 52nd St

City Minneapolis State MN Zip Code 55410-2231

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

Name of Employer St. Luke's Episcopal Church Occupation Children's Minister

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 07 / 2014  
**Transaction ID : C10088022**

Amount of Each Receipt this Period 250.00

**B. LaDonna Meinecke**  
Full Name (Last, First, Middle Initial)

Mailing Address 21310 Oakdale Dr

City Rogers State MN Zip Code 55374-8907

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

Name of Employer Healthpartners Occupation Psychotherapist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 13 / 2014  
**Transaction ID : C10092942**

Amount of Each Receipt this Period 25.00

**C. Frank Miller**  
Full Name (Last, First, Middle Initial)

Mailing Address 979 18th Ave SE

City Minneapolis State MN Zip Code 55414-2547

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 07 / 2014  
**Transaction ID : C10088084**

Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 325.00

**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 31 OF 229
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<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**

Full Name (Last, First, Middle Initial)  
**A. Tara Mulloy**

Mailing Address 1330 Edgcombe Rd

City Saint Paul State MN Zip Code 55116-1780

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

Name of Employer Self Occupation Lobbyist

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 08 / 2014**

**Transaction ID : C10089734**

Amount of Each Receipt this Period  
**400.00**

Full Name (Last, First, Middle Initial)  
**B. Elin Ohlsson**

Mailing Address 5740 France Ave S

City Edina State MN Zip Code 55410-2354

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

Name of Employer Care Planners Inc Occupation Business Owner

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 06 / 2014**

**Transaction ID : C10087032**

Amount of Each Receipt this Period  
**500.00**

Full Name (Last, First, Middle Initial)  
**C. Catherine Olson**

Mailing Address 3415 Warner Ln

City Minnetrista State MN Zip Code 55364-9264

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

Name of Employer Boston Scientific Occupation Program Director

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 04 / 2014**

**Transaction ID : C10082493**

Amount of Each Receipt this Period  
**150.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1050.00</b>
<b>TOTAL</b> 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 32 OF 229
<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. Randy Pearson**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 253  
City Taylors Falls State MN Zip Code 55084-0253  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 07 / 2014  
**Transaction ID : C10088099**  
Amount of Each Receipt this Period  
250.00

**B. Alan Perish**  
Full Name (Last, First, Middle Initial)  
Mailing Address 26092 County 14  
City Browerville State MN Zip Code 56438-4981  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Farmer  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 2550.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 13 / 2014  
**Transaction ID : C10093382**  
Amount of Each Receipt this Period  
100.00

**C. Mary Pohl**  
Full Name (Last, First, Middle Initial)  
Mailing Address 12709 Heather St NW  
City Coon Rapids State MN Zip Code 55448-1274  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Physician  
Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 08 / 2014  
**Transaction ID : C10089444**  
Amount of Each Receipt this Period  
150.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 500.00  
**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 33 OF 229
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<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**

Full Name (Last, First, Middle Initial) <b>A. Thomas Post</b>		Date of Receipt
Mailing Address 2162 Lakebrook Dr		<input type="text" value="10"/> / <input type="text" value="07"/> / <input type="text" value="2014"/>
City State Zip Code New Brighton MN 55112-5101		<b>Transaction ID : C10088209</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="500.00"/>
Name of Employer U of MN	Occupation Professor	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Daniel Poznanovic</b>		Date of Receipt
Mailing Address 11649 Arnold Palmer Dr		<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City State Zip Code Blaine MN 55449-5498		<b>Transaction ID : C10090609</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Name of Employer Cray Inc.	Occupation Dir Engineering	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Rosa Reyes</b>		Date of Receipt
Mailing Address 260 Westview Dr Apt 104		<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City State Zip Code Saint Paul MN 55118-4516		<b>Transaction ID : C10090645</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="10.00"/>
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="865.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="760.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 34 OF 229
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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. Nancy Rice**  
Full Name (Last, First, Middle Initial)

Mailing Address 2217 Halcyon Ln

City Vienna State VA Zip Code 22181

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

Name of Employer Self Occupation Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 03 / 2014

**Transaction ID : C10090970**

Amount of Each Receipt this Period  
 5000.00

**B. Denis Richardson**  
Full Name (Last, First, Middle Initial)

Mailing Address 3417 25th St S

City Moorhead State MN Zip Code 56560-5301

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : C10094582**

Amount of Each Receipt this Period  
 100.00

**C. David Robinson**  
Full Name (Last, First, Middle Initial)

Mailing Address 1796 Beechwood Ave

City Saint Paul State MN Zip Code 55116-2412

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 07 / 2014

**Transaction ID : C10088137**

Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5600.00

**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 35 OF 229
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<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**

Full Name (Last, First, Middle Initial) <b>A. Beth Roering</b>		Date of Receipt MM / DD / YYYY 10 / 07 / 2014
Mailing Address 1201 Yale Pl Apt 402		<b>Transaction ID : C10088064</b>
City Minneapolis	State MN	Zip Code 55403-1955
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. Jesse Ross</b>		Date of Receipt MM / DD / YYYY 10 / 03 / 2014
Mailing Address 4135 Washburn Ave N		<b>Transaction ID : C10079506</b>
City Minneapolis	State MN	Zip Code 55412
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
Name of Employer Sevnthsin	Occupation Web Developer	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>C. Elaine Rothman</b>		Date of Receipt MM / DD / YYYY 10 / 07 / 2014
Mailing Address 5305 Beachside Dr		<b>Transaction ID : C10087570</b>
City Minnetonka	State MN	Zip Code 55343-8927
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 395.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	570.00
<b>TOTAL</b> 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 36 OF 229  
(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**

Full Name (Last, First, Middle Initial)  
**A. Laurie Simon**

Mailing Address 1060 Dennis St S

City State Zip Code  
 Maplewood MN 55119-3571

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

Name of Employer Occupation  
 Retired Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : C10094636**

Amount of Each Receipt this Period  
 25.00

Full Name (Last, First, Middle Initial)  
**B. Janice Skogstrom**

Mailing Address 1310 W 53rd St

City State Zip Code  
 Minneapolis MN 55419-1106

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

Name of Employer Occupation  
 Retired Retired

Receipt For: 2014  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 13 / 2014

**Transaction ID : C10091440**

Amount of Each Receipt this Period  
 100.00

Full Name (Last, First, Middle Initial)  
**C. David Smith**

Mailing Address 13756 Riverview Dr NW

City State Zip Code  
 Elk River MN 55330-1624

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

Name of Employer Occupation  
 Retired Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : C10094656**

Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 175.00

**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 38 OF 229
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. James Stensvold**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2210 Bonnie Ln  
 City Saint Paul State MN Zip Code 55119-5669  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 01 / 2014  
**Transaction ID : C10077967**  
 Amount of Each Receipt this Period  
**250.00**

**B. William Stokke**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 241 Eastwood Ct  
 City Chanhassen State MN Zip Code 55317-8683  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Holdahl Inc Occupation VP  
 Receipt For: 2014  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 07 / 2014  
**Transaction ID : C10088581**  
 Amount of Each Receipt this Period  
**250.00**

**C. Laura Stone- Jeraj**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 132 Demont Ave E Apt 137  
 City Little Canada State MN Zip Code 55117-1551  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Employed Occupation Attorney  
 Receipt For: 2014  Primary  General  Other (specify)   
 Aggregate Year-to-Date **210.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 07 / 2014  
**Transaction ID : C10088584**  
 Amount of Each Receipt this Period  
**50.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>550.00</b>
<b>TOTAL</b> 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 39 OF 229
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<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**

Full Name (Last, First, Middle Initial) <b>A. Laura Stone- Jeraj</b>		Date of Receipt 10 / 14 / 2014 <b>Transaction ID : C10091976</b>
Mailing Address 132 Demont Ave E Apt 137		Amount of Each Receipt this Period 250.00
City Little Canada	State MN	Zip Code 55117-1551
FEC ID number of contributing federal political committee. C		
Name of Employer Self Employed	Occupation Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) <b>B. Dolores Voorhees</b>		Date of Receipt 10 / 14 / 2014 <b>Transaction ID : C10091681</b>
Mailing Address 2365 Lake George Dr NW		Amount of Each Receipt this Period 10.00
City Cedar	State MN	Zip Code 55011-4216
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 470.00	

Full Name (Last, First, Middle Initial) <b>C. Maxine Wallin</b>		Date of Receipt 10 / 07 / 2014 <b>Transaction ID : C10088400</b>
Mailing Address 7022 Tupa Cir		Amount of Each Receipt this Period 250.00
City Edina	State MN	Zip Code 55439-1640
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	285.00
<b>TOTAL</b> 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 40 OF 229
<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. Darrell (Ms.) Weaver**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 725 4th Ave NW  
 City Plainview State MN Zip Code 55964  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ABA Water Systems Inc Occupation Owner and Officer  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 08 / 2014  
**Transaction ID : C10089449**  
 Amount of Each Receipt this Period  
 10.00

**B. John Wells**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3680 Knoll Ridge Dr  
 City Eagan State MN Zip Code 55122-1130  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation Consultant  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5125.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 09 / 2014  
**Transaction ID : C10090299**  
 Amount of Each Receipt this Period  
 600.00

**C. John Wells**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3680 Knoll Ridge Dr  
 City Eagan State MN Zip Code 55122-1130  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation Consultant  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5125.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 13 / 2014  
**Transaction ID : C10091463**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	660.00
<b>TOTAL</b> 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 41 OF 229
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<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. Daniel Winter**  
Full Name (Last, First, Middle Initial)

Mailing Address 354 Dunbar Knls

City Mahtomedi	State MN	Zip Code 55115-2820
-------------------	-------------	------------------------

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

Name of Employer Seven Corners Printing	Occupation President and Owner
--	-----------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1250.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	13	/	2014

**Transaction ID : C10091514**

Amount of Each Receipt this Period  

500.00
--------

**B. Brian Woolsey**  
Full Name (Last, First, Middle Initial)

Mailing Address 1316 Tyrol Trl

City Golden Valley	State MN	Zip Code 55416-3509
-----------------------	-------------	------------------------

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

Name of Employer Cassidy Turley	Occupation Attorney
------------------------------------	------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	13	/	2014

**Transaction ID : C10091418**

Amount of Each Receipt this Period  

300.00
--------

**C. Nina Rothschild Utne**  
Full Name (Last, First, Middle Initial)

Mailing Address 4025 Linden Hills Blvd

City Minneapolis	State MN	Zip Code 55410
---------------------	-------------	-------------------

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

Name of Employer Self	Occupation Writer and Investor
--------------------------	-----------------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2014

**Transaction ID : C10101979A**

Amount of Each Receipt this Period  

250.00
--------

\* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1050.00</b>
<b>TOTAL</b> 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 42 OF 229  
(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**

Full Name (Last, First, Middle Initial)  
**A. ACTBLUE**  
 Mailing Address PO Box 382110  
 City State Zip Code  
 Cambridge MA 02238-2110  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer Occupation  
 Conduit total listed in Agg. field  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 492.50

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 03 / 2014  
**Transaction ID : C10101979AB**  
 Amount of Each Receipt this Period  
 250.00  
**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)  
**B.**  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)  
**C.**  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	58398.00

**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 43 OF 229
<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**

Full Name (Last, First, Middle Initial) <b>A. Al Franken for Senate 2014</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 15 / 2014
Mailing Address PO Box 583144		<b>Transaction ID : C10093471</b>
City Minneapolis	State MN	Zip Code 55458-3144
FEC ID number of contributing federal political committee. C C00480384		Amount of Each Receipt this Period 100000.00
Name of Employer	Occupation	Excess Funds Transfer
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100300.00	

Full Name (Last, First, Middle Initial) <b>B. Capitol Leadership Pac</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 15 / 2014
Mailing Address PO Box 14467		<b>Transaction ID : C10093487</b>
City Saint Paul	State MN	Zip Code 55114-0467
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Misdeposit. Transferred to state account. See Schedule B, Line 22, Page 87.
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Dakota Prairie PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 08 / 2014
Mailing Address 600 PENNSYLVANIA AVE SE STE 210		<b>Transaction ID : C10089771</b>
City WASHINGTON	State DC	Zip Code 20003
FEC ID number of contributing federal political committee. C C00536607		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	106000.00
<b>TOTAL</b> 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 44 OF 229
<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**

Full Name (Last, First, Middle Initial)  
**A. Friends For Perske**

Mailing Address 509 NORTH 10TH STREET

City SARTELL	State MN	Zip Code 56377
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00555029

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5743.50

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	07	/	2014

**Transaction ID : C10089722**

Amount of Each Receipt this Period  
1793.50

Excess Funds Transfer

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

Mailing Address PO Box 6072

City Minneapolis	State MN	Zip Code 55406-0072
---------------------	-------------	------------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
86903.85

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2014

**Transaction ID : C10094483**

Amount of Each Receipt this Period  
5000.00

Excess Funds Transfer

Full Name (Last, First, Middle Initial)  
**C. NEA FUND FOR CHILDREN AND PUBLIC EDUCATION**

Mailing Address 1201 16th St NW  
Ste 420

City Washington	State DC	Zip Code 20036-3201
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00003251

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	03	/	2014

**Transaction ID : C10090973**

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	11793.50
<b>TOTAL</b> 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 45 OF 229
<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**

Full Name (Last, First, Middle Initial) <b>A. Obermueller for Congress</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 03 / 2014 <b>Transaction ID : C10090990</b>
Mailing Address 3874 Danbury Trl		Amount of Each Receipt this Period 5000.00
City Eagan	State MN	Zip Code 55123-1550
FEC ID number of contributing federal political committee. C C00518811		Excess Funds Transfer
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 29795.20	

Full Name (Last, First, Middle Initial) <b>B. Obermueller for Congress</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 03 / 2014 <b>Transaction ID : C10090992</b>
Mailing Address 3874 Danbury Trl		Amount of Each Receipt this Period 3000.00
City Eagan	State MN	Zip Code 55123-1550
FEC ID number of contributing federal political committee. C C00518811		Excess Funds Transfer
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 29795.20	

Full Name (Last, First, Middle Initial) <b>C. Obermueller for Congress</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 07 / 2014 <b>Transaction ID : C10089721</b>
Mailing Address 3874 Danbury Trl		Amount of Each Receipt this Period 4192.00
City Eagan	State MN	Zip Code 55123-1550
FEC ID number of contributing federal political committee. C C00518811		Excess Funds Transfer
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 29795.20	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	12192.00
<b>TOTAL</b> 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 46 OF 229
<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. OCEANS PAC**  
Full Name (Last, First, Middle Initial)  
Mailing Address 700 13TH STREET, NW  
SUITE 600  
City WASHINGTON State DC Zip Code 20005  
FEC ID number of contributing federal political committee. **C** C00431601  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
10 / 03 / 2014  
**Transaction ID : C10090972**  
Amount of Each Receipt this Period  
5000.00

**B. PEAK PAC**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 48004  
City DENVER State CO Zip Code 80204  
FEC ID number of contributing federal political committee. **C** C00420919  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
10 / 08 / 2014  
**Transaction ID : C10089776**  
Amount of Each Receipt this Period  
5000.00

**C. Pipe Fitters Local 539**  
Full Name (Last, First, Middle Initial)  
Mailing Address 312 Central Ave SE  
Ste 408  
City Minneapolis State MN Zip Code 55414-1096  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
10 / 07 / 2014  
**Transaction ID : C10089788**  
Amount of Each Receipt this Period  
1500.00  
Misdisposed. Transferred to state account. See Schedule B, Line 22, Page 85.

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	11500.00
<b>TOTAL</b> 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 47 OF 229  
(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. TTX PAC**  
Full Name (Last, First, Middle Initial)  
Mailing Address 101 N WACKER DRIVE  
City CHICAGO State IL Zip Code 60606  
FEC ID number of contributing federal political committee. **C** C00138974  
Name of Employer Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 03 / 2014  
**Transaction ID : C10089726**  
Amount of Each Receipt this Period  
2500.00

**B.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
Amount of Each Receipt this Period

**C.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	143985.50

**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 48 OF 229
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. 1st Congressional District DFL**

Full Name (Last, First, Middle Initial)  
Mailing Address 420 3rd Ave NE

City Sleepy Eye State MN Zip Code 55932-5281

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
7000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 09 / 2014

**Transaction ID : C10090948**

Amount of Each Receipt this Period  
7000.00

Permissible Funds. Over the limit. Transferred to state account on Schedule B, Line 22, Page 86.

**B. 3rd Senate District DFL**

Full Name (Last, First, Middle Initial)  
Mailing Address 489 Swanson Road

City Two Harbors State MN Zip Code 55616

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : C10094487**

Amount of Each Receipt this Period  
1000.00

Permissible Funds

**c. 5th Congressional District DFL**

Full Name (Last, First, Middle Initial)  
Mailing Address 4309 30th Ave S

City Minneapolis State MN Zip Code 55406

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 09 / 2014

**Transaction ID : C10090951**

Amount of Each Receipt this Period  
2500.00

Permissible Funds. Over the limit. Transfer to state account on Schedule B, Line 22, Page 86.

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10500.00
<b>TOTAL</b> 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 49 OF 229
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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**

Full Name (Last, First, Middle Initial)  
**A. Alan Braun**

Mailing Address 4231 Woodland Trl

City State Zip Code  
Minneapolis MN 55422-4281

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

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2014

Transaction ID : **C10091002**

Amount of Each Receipt this Period  
3500.00

**[MEMO ITEM]**  
\* Minnesota Victory 2014

Full Name (Last, First, Middle Initial)  
**B. Cass County DFL**

Mailing Address 2653 23rd Ave SW

City State Zip Code  
Pine River MN 56474-4003

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 09 / 2014

Transaction ID : **C10090959**

Amount of Each Receipt this Period  
500.00

Permissible Funds

Full Name (Last, First, Middle Initial)  
**C. Clay County DFL**

Mailing Address 1911 10th Ave N

City State Zip Code  
Moorhead MN 56560-1811

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2014

Transaction ID : **C10094486**

Amount of Each Receipt this Period  
500.00

Permissible Funds

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> 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 50 OF 229
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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**

Full Name (Last, First, Middle Initial)  
**A. Democratic Congressional Campaign Committee**

Mailing Address 430 S Capitol St SE FI 2

City Washington	State DC	Zip Code 20003-4024
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
851083.85

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	02	/	2014

**Transaction ID : C10100837**

Amount of Each Receipt this Period  
750.00

Full Name (Last, First, Middle Initial)  
**B. Democratic Congressional Campaign Committee**

Mailing Address 430 S Capitol St SE FI 2

City Washington	State DC	Zip Code 20003-4024
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
851083.85

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	09	/	2014

**Transaction ID : C10101088**

Amount of Each Receipt this Period  
171685.00

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

Mailing Address 430 S Capitol St SE

City Washington	State DC	Zip Code 20003-4024
--------------------	-------------	------------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
103980.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	13	/	2014

**Transaction ID : C10101086**

Amount of Each Receipt this Period  
30000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	202435.00
<b>TOTAL</b> 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 51 OF 229
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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**

Full Name (Last, First, Middle Initial) <b>A. Democratic State Central Comm of Louisiana</b>		Date of Receipt
Mailing Address 701 Government St		<input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2014"/>
City State Zip Code Baton Rouge LA 70802-6028		<b>Transaction ID : C10093462</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00071365"/>		Amount of Each Receipt this Period <input type="text" value="75000.00"/>
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="200000.00"/>	

Full Name (Last, First, Middle Initial) <b>B. DFL Senate Caucus</b>		Date of Receipt
Mailing Address PO Box 65337		<input type="text" value="10"/> / <input type="text" value="08"/> / <input type="text" value="2014"/>
City State Zip Code Saint Paul MN 55165-0337		<b>Transaction ID : C10089777</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00380352"/>		Amount of Each Receipt this Period <input type="text" value="3000.00"/>
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="31525.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Dollars for Democrats</b>		Date of Receipt
Mailing Address 430 S Capitol St SE		<input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2014"/>
City State Zip Code Washington DC 20003-4024		<b>Transaction ID : C10093476</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00073791"/>		Amount of Each Receipt this Period <input type="text" value="30000.00"/>
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="48000.00"/>	Dollars for Democrats

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="108000.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 52 OF 229
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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**

Full Name (Last, First, Middle Initial)  
**A. Drake Bank State**

Mailing Address 60 Plato Blvd E

City State Zip Code  
Saint Paul MN 55107-1820

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 11 / 2014  
**Transaction ID : C10101581**

Amount of Each Receipt this Period  
500.00

Moved back Julie Steiner's original contribution. See note.

Full Name (Last, First, Middle Initial)  
**B. Jay Eisenhofer**

Mailing Address 485 Lexington Ave, Fl 29

City State Zip Code  
New York NY 10017

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

Name of Employer Occupation  
Gant & Eisenhofer Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2014  
**Transaction ID : C10091362**

Amount of Each Receipt this Period  
10000.00

**[MEMO ITEM]**  
\* Minnesota Senate Victory 2014

Full Name (Last, First, Middle Initial)  
**C. Faribault County DFL**

Mailing Address 312 W 5th St

City State Zip Code  
Blue Earth MN 56013

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
720.06

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 15 / 2014  
**Transaction ID : C10094500**

Amount of Each Receipt this Period  
720.06

Permissible Funds

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1220.06
<b>TOTAL</b> This Period (last page this line number only).....▶	

: 97 `A`G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A`N5H`CB

Form/Schedule: SA12

Transaction ID : C10101581

Julie Steiner had the same contribution entered twice. Once on 9/8/2014 for \$5,000.00 and 10/5/2014 for \$5,000.00. When the second \$5000.00 was entered it appeared that Ms Steiner was over the limit by \$500.00. After reconciling the bank accounts for this reporting period it determined that the \$5000.00 was entered twice and was the same contribution as given on 9/8/2014. Therefore she was not over the limit by \$500.00 and the contribution was moved back to the federal account. It should be noted that the transfer from the federal account to the state account and the then back to the federal account all happened within 24 hours.

Form/Schedule:

Transaction ID:

**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 54 OF 229
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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**

Full Name (Last, First, Middle Initial) <b>A. Fillmore County DFL</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 09 / 2014 <b>Transaction ID : C10090966</b>
Mailing Address 337 5th Ave SE		Amount of Each Receipt this Period 200.00
City Harmony	State MN	Zip Code 55939
FEC ID number of contributing federal political committee. C	Name of Employer Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	
		Permissible Funds

Full Name (Last, First, Middle Initial) <b>B. Franken Udall Victory Fund</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 <b>Transaction ID : C10091366</b>
Mailing Address PO Box 583144		Amount of Each Receipt this Period 282.11
City Minneapolis	State MN	Zip Code 55458
FEC ID number of contributing federal political committee. C C00564708	Name of Employer Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 6222.11	
		Franken Udall Victory 2014

Full Name (Last, First, Middle Initial) <b>c. Mark Giorgini</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 19 / 2014 <b>Transaction ID : C10091354</b>
Mailing Address 1321 Cherokee Ave		Amount of Each Receipt this Period 500.00
City Saint Paul	State MN	Zip Code 55118-2005
FEC ID number of contributing federal political committee. C	Name of Employer Occupation China HR Insight Ltd Human Resources Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
		<b>[MEMO ITEM]</b> * Minnesota Senate Victory 2014

<b>SUBTOTAL</b> of Receipts This Page (optional).....	482.11
<b>TOTAL</b> 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 55 OF 229
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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**

Full Name (Last, First, Middle Initial) <b>A. Hennepin County DFL</b>		Date of Receipt
Mailing Address 4309 30th Ave S		<input type="text" value="10"/> / <input type="text" value="09"/> / <input type="text" value="2014"/>
City	State	<b>Transaction ID : C10090968</b>
Minneapolis	MN	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="250.00"/>
Name of Employer	Occupation	Permissible Funds
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Itasca County DFL</b>		Date of Receipt
Mailing Address 809 NE 4th St		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2014"/>
City	State	<b>Transaction ID : C10094497</b>
Grand Rapids	MN	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="100.00"/>
Name of Employer	Occupation	Permissible Funds
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="100.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. R Wynn Kearney</b>		Date of Receipt
Mailing Address 133 Ironwood Ct		<input type="text" value="08"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City	State	<b>Transaction ID : C10091001</b>
Mankato	MN	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="1000.00"/>
Name of Employer	Occupation	<b>[MEMO ITEM]</b>
Retired	Retired	* Minnesota Victory 2014
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1100.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="350.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 56 OF 229
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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**

Full Name (Last, First, Middle Initial)  
**A. Adam Levin**

Mailing Address 16 Jay Street, Unit 6

City State Zip Code  
Minneapolis MN 55401

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

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 16 / 2014

Transaction ID : **C10091361**

Amount of Each Receipt this Period  
5000.00

**[MEMO ITEM]**  
\* Minnesota Senate Victory 2014

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

Mailing Address 260 E Chestnut St  
Apt 4302

City State Zip Code  
Chicago IL 60611-2474

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

Name of Employer Occupation  
Brandenburg Industrial Service Company Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2014

Transaction ID : **C10091363**

Amount of Each Receipt this Period  
10000.00

**[MEMO ITEM]**  
\* Minnesota Senate Victory 2014

Full Name (Last, First, Middle Initial)  
**C. Lyon County DFL**

Mailing Address 2092 CRD 10

City State Zip Code  
Cottonwood MN 56229

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 09 / 2014

Transaction ID : **C10090957**

Amount of Each Receipt this Period  
450.00

Permissible Funds

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 450.00

**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 57 OF 229
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. Amy Mulvahill**  
Full Name (Last, First, Middle Initial)  
Mailing Address 76 Groveland Ter  
City Minneapolis State MN Zip Code 55403-1103  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Minnesota Gastroenterology PA Occupation Physician  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **1000.00**

Date of Receipt **09 / 16 / 2014**  
**Transaction ID : C10091355**  
Amount of Each Receipt this Period **1000.00**  
**[MEMO ITEM]**  
\* Minnesota Senate Victory 2014

**B. Otter Tail County DFL**  
Full Name (Last, First, Middle Initial)  
Mailing Address 111 Shores Rd  
City Ottertail State MN Zip Code 56571  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **500.00**

Date of Receipt **10 / 09 / 2014**  
**Transaction ID : C10090964**  
Amount of Each Receipt this Period **500.00**  
Permissible Funds

**C. Polk County DFL**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 27  
City Erskine State MN Zip Code 56535  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **500.00**

Date of Receipt **10 / 09 / 2014**  
**Transaction ID : C10090960**  
Amount of Each Receipt this Period **500.00**  
Permissible Funds

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1000.00</b>
<b>TOTAL</b> 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 58 OF 229
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. Judi Poulson**  
Full Name (Last, First, Middle Initial)

Mailing Address 1881 Knollwood Dr

City Fairmont	State MN	Zip Code 56031
------------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	22	/	2014

**Transaction ID : C10090997**

Amount of Each Receipt this Period  
5000.00

**[MEMO ITEM]**  
\* Minnesota Victory 2014

**B. LeRoy Poulson**  
Full Name (Last, First, Middle Initial)

Mailing Address 1881 Knollwood Dr

City Fairmont	State MN	Zip Code 56031
------------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3650.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	22	/	2014

**Transaction ID : C10090998**

Amount of Each Receipt this Period  
3650.00

**[MEMO ITEM]**  
\* Minnesota Victory 2014

**C. Rebecca Rand**  
Full Name (Last, First, Middle Initial)

Mailing Address 1612 Morningside Dr

City Stillwater	State MN	Zip Code 55082-6110
--------------------	-------------	------------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
8500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	03	/	2014

**Transaction ID : C10090999**

Amount of Each Receipt this Period  
2500.00

**[MEMO ITEM]**  
\* Minnesota Victory 2014

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> 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 59 OF 229
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. Senate District 22**  
Full Name (Last, First, Middle Initial)  
Mailing Address 39574 160th  
City Brewster State MN Zip Code 56119  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 09 / 2014  
**Transaction ID : C10090965**  
Amount of Each Receipt this Period 800.00  
Permissible Funds

**B. Senate District 26 DFL**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 9044  
City Rochester State MN Zip Code 55904  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 15 / 2014  
**Transaction ID : C10094495**  
Amount of Each Receipt this Period 1000.00  
Permissible Funds

**C. Senate District 27**  
Full Name (Last, First, Middle Initial)  
Mailing Address 200 19th St NW  
City Austin State MN Zip Code 55912-4652  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 09 / 2014  
**Transaction ID : C10090956**  
Amount of Each Receipt this Period 1000.00  
Permissible Funds

**SUBTOTAL** of Receipts This Page (optional).....▶ 2800.00  
**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 60 OF 229
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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**

Full Name (Last, First, Middle Initial) <b>A. Senate District 31 DFL-New</b>		Date of Receipt
Mailing Address 1121 177th Ln NE		<input type="text" value="10"/> / <input type="text" value="09"/> / <input type="text" value="2014"/>
City	State	Zip Code
Ham Lake	MN	55304
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="500.00"/>	
		Transaction ID : <b>C10090961</b>
		Amount of Each Receipt this Period
		<input type="text" value="500.00"/>
		Permissible Funds

Full Name (Last, First, Middle Initial) <b>B. Senate District 37 DFL</b>		Date of Receipt
Mailing Address 1625 121st Ave NE		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2014"/>
City	State	Zip Code
Minneapolis	MN	55449
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="500.00"/>	
		Transaction ID : <b>C10094496</b>
		Amount of Each Receipt this Period
		<input type="text" value="500.00"/>
		Permissible Funds

Full Name (Last, First, Middle Initial) <b>C. Senate District 5 DFL</b>		Date of Receipt
Mailing Address 2990 Fraser St		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2014"/>
City	State	Zip Code
Grand Rapids	MN	55744-4508
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="500.00"/>	
		Transaction ID : <b>C10094498</b>
		Amount of Each Receipt this Period
		<input type="text" value="500.00"/>
		Permissible Funds

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1500.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 61 OF 229
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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**

Full Name (Last, First, Middle Initial) <b>A. Senate District 52 DFL</b>		Date of Receipt
Mailing Address 5470 Blackberry Trl #319		<input type="text" value="10"/> / <input type="text" value="09"/> / <input type="text" value="2014"/>
City State Zip Code Inver Grove Heights MN 55076		<b>Transaction ID : C10100379</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="1000.00"/>
Name of Employer	Occupation	Permissible Funds
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Senate District 53 DFL</b>		Date of Receipt
Mailing Address 5988 Bayberry Dr		<input type="text" value="10"/> / <input type="text" value="09"/> / <input type="text" value="2014"/>
City State Zip Code Saint Paul MN 55110		<b>Transaction ID : C10090962</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="1000.00"/>
Name of Employer	Occupation	Permissible Funds
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Senate District 55</b>		Date of Receipt
Mailing Address 713 Bradbury Cir		<input type="text" value="10"/> / <input type="text" value="09"/> / <input type="text" value="2014"/>
City State Zip Code Jordan MN 55352		<b>Transaction ID : C10090967</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Name of Employer	Occupation	Permissible Funds
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="2250.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 62 OF 229
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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**

Full Name (Last, First, Middle Initial) <b>A. Senate District 57 DFL</b>		Date of Receipt
Mailing Address PO Box 241355		<input type="text" value="10"/> / <input type="text" value="09"/> / <input type="text" value="2014"/>
City	State	Zip Code
Saint Paul	MN	55124
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C10090954</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	Permissible Funds
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="100.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Senate District 60 DFL</b>		Date of Receipt
Mailing Address PO Box 18597		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2014"/>
City	State	Zip Code
Minneapolis	MN	55418
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C10094499</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	Permissible Funds
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="500.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Senate District 61 DFL</b>		Date of Receipt
Mailing Address 5940 Upton Ave S		<input type="text" value="10"/> / <input type="text" value="09"/> / <input type="text" value="2014"/>
City	State	Zip Code
Minneapolis	MN	55410
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C10090958</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	Permissible Funds
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1000.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1600.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 63 OF 229
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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**

Full Name (Last, First, Middle Initial) <b>A. Senate District 64 DFL</b>		Date of Receipt
Mailing Address PO Box 4154		<input type="text" value="10"/> / <input type="text" value="09"/> / <input type="text" value="2014"/>
City	State	Zip Code
Saint Paul	MN	55104
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C10090950</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="2000.00"/>
		Permissible Funds. Over the limit. Transfer to state account on Schedule B, Line 22, Page 86.

Full Name (Last, First, Middle Initial) <b>B. Senate District 66 DFL</b>		Date of Receipt
Mailing Address 1104 Idaho Ave		<input type="text" value="10"/> / <input type="text" value="09"/> / <input type="text" value="2014"/>
City	State	Zip Code
Saint Paul	MN	55108
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C10090947</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="2000.00"/>
		Permissible Funds. Over the limit. Transfer to state account on Schedule B, Line 22, Page 85.

Full Name (Last, First, Middle Initial) <b>C. State Party Victory Fund -Unitemized</b>		Date of Receipt
Mailing Address 430 S Capitol St SE		<input type="text" value="10"/> / <input type="text" value="06"/> / <input type="text" value="2014"/>
City	State	Zip Code
Washington	DC	20003-4024
FEC ID number of contributing federal political committee.	<input type="text" value="C C00010603"/>	<b>Transaction ID : C10090988</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="10625.31"/>
		State Party Victory Fund

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="14625.31"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 64 OF 229
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. Wabasha County DFL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 52823 305th Ave  
 City Elgin State MN Zip Code 55932  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 07 / 2014  
**Transaction ID : C10089791**  
 Amount of Each Receipt this Period  
 200.00  
 Permissible Funds

**B. H William Walter**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5229 Morgan Ave S  
 City Minneapolis State MN Zip Code 55419-1026  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Heartland Realty Real Estate Investor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 20 / 2014  
**Transaction ID : C10091000**  
 Amount of Each Receipt this Period  
 2500.00  
**[MEMO ITEM]**  
 \* Minnesota Victory 2014

**C. Daniel Weissman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 110 Riverside Dr Apt 11F  
 City New York State NY Zip Code 10024-3733  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 N/A None  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 05 / 2014  
**Transaction ID : C10101645**  
 Amount of Each Receipt this Period  
 2600.00  
**[MEMO ITEM]**  
 \* Minnesota Senate Victory 2014

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	200.00
<b>TOTAL</b> 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 65 OF 229
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. Winona County DFL**  
Full Name (Last, First, Middle Initial)  
Mailing Address 685 W 5th St  
City Winona State MN Zip Code 55987-5333  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1900.00

Date of Receipt 10 / 09 / 2014  
**Transaction ID : C10090952**  
Amount of Each Receipt this Period 1900.00  
Permissible Funds. Over the limit. Transfer to state account on Schedule B, Line 22, Page 87.

**B. Sarah Winton**  
Full Name (Last, First, Middle Initial)  
Mailing Address 117 Portland Ave Apt 601  
City Minneapolis State MN Zip Code 55401-2587  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Retired Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 22 / 2014  
**Transaction ID : C10091359**  
Amount of Each Receipt this Period 1000.00  
**[MEMO ITEM]**  
\* Minnesota Senate Victory 2014

**C. Minnesota Senate Victory 2014**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 583144  
City Minneapolis State MN Zip Code 55458  
FEC ID number of contributing federal political committee. **C** C00519884  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 368365.00

Date of Receipt 10 / 10 / 2014  
**Transaction ID : C10091351**  
Amount of Each Receipt this Period 25000.00  
Minnesota Senate Victory 2014

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	26900.00
<b>TOTAL</b> 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 66 OF 229  
(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. Minnesota Victory 2014**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 110 E Liberty St  
 City Mankato State MN Zip Code 56001  
 FEC ID number of contributing federal political committee. **C** C00545541  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 26500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 06 / 2014  
**Transaction ID : C10090996**  
 Amount of Each Receipt this Period  
 16500.00  
 Minnesota Victory 2014

**B.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

**C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	16500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	391812.48

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

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

FOR LINE NUMBER: PAGE 67 OF 229  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  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. US Postmaster**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Riverview Station  
 City Saint Paul State MN Zip Code 55107  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 919.76

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 07 / 2014  
**Transaction ID : C10090987**  
 Amount of Each Receipt this Period  
 249.21  
 Refund Postage from BRM

**B.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 Amount of Each Receipt this Period

**C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	249.21
<b>TOTAL</b> This Period (last page this line number only).....▶	249.21

**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 68 OF 229
<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. Keith Ellison for Congress**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 6072  
 City State Zip Code  
 Minneapolis MN 55406-0072  
 FEC ID number of contributing federal political committee. **C** C00422410  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 86903.85

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 06 / 2014  
**Transaction ID : C10090993**  
 Amount of Each Receipt this Period  
 3143.96  
 Rent

**B. READY FOR HILLARY PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 7705  
 City State Zip Code  
 MCLEAN VA 22106  
 FEC ID number of contributing federal political committee. **C** C00540997  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5800.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 03 / 2014  
**Transaction ID : C10090983**  
 Amount of Each Receipt this Period  
 400.00  
 Table Rental of State Fair (Actual Cost)

**C. Walz (Tim), For Congress**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 938  
 City State Zip Code  
 Mankato MN 56002-0938  
 FEC ID number of contributing federal political committee. **C** C00409409  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1457.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 08 / 2014  
**Transaction ID : C10090975**  
 Amount of Each Receipt this Period  
 178.56  
 Predictive Dialer Rental

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3722.52
<b>TOTAL</b> This Period (last page this line number only).....▶	3722.52

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA17

Transaction ID : C10090993

Actual cost per square foot by square feet used.

Form/Schedule: SA17

Transaction ID: C10090975

Charged actual cost charged to Party by vendor.

**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**

Full Name (Last, First, Middle Initial)

**A. ACTBLUE**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement  
Actblue Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D552725**

Amount of Each Disbursement this Period

16.21

Full Name (Last, First, Middle Initial)

**B. ACTBLUE**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement  
Actblue Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 07 / 2014

**Transaction ID : D552726**

Amount of Each Disbursement this Period

3.28

Full Name (Last, First, Middle Initial)

**C. Adam Carr**

Mailing Address 19834 Jaguar Ave

City Lakeville State MN Zip Code 55044

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546856**

Amount of Each Disbursement this Period

1061.16

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

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

1080.65

**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**

Full Name (Last, First, Middle Initial)

**A. Allen Slaughter Sr**

Mailing Address 818 Penn Ave N

City Minneapolis State MN Zip Code 55411

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2014			

**Transaction ID : D546852**

Amount of Each Disbursement this Period

222.94
--------

Full Name (Last, First, Middle Initial)

**B. Andrew Beck**

Mailing Address 487 Ashland Ave

City Saint Paul State MN Zip Code 55104

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2014			

**Transaction ID : D546623**

Amount of Each Disbursement this Period

619.31
--------

Full Name (Last, First, Middle Initial)

**C. Bruce Davis**

Mailing Address 2309 Nicollet Ave S

City Minneapolis State MN Zip Code 55404

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2014			

**Transaction ID : D546715**

Amount of Each Disbursement this Period

243.48
--------

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

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

1085.73
---------

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**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**

Full Name (Last, First, Middle Initial)

**A. Cheryl Kaliszewski**

Mailing Address 1458 Hazelwood St

City State Zip Code  
Saint Paul MN 55106

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2014			

**Transaction ID : D546842**

Amount of Each Disbursement this Period

330.78
--------

Full Name (Last, First, Middle Initial)

**B. Curtis Shelmon**

Mailing Address 554 Central Ave W #909

City State Zip Code  
Saint Paul MN 55103

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2014			

**Transaction ID : D546859**

Amount of Each Disbursement this Period

846.97
--------

Full Name (Last, First, Middle Initial)

**C. EFTPS Fed Tax Payment**

Mailing Address Federal Withholding Taxes

City State Zip Code  
Iowa City IA 52244

Purpose of Disbursement  
Federal Withholding Tax

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			06			2014			

**Transaction ID : D549992**

Amount of Each Disbursement this Period

1092.20
---------

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

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

2269.95
---------

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**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**

Full Name (Last, First, Middle Initial)

**A. Elise Convy**

Mailing Address 11319 Ewing Cir S

City State Zip Code  
Bloomington MN 55431

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546624**

Amount of Each Disbursement this Period

1381.03

Full Name (Last, First, Middle Initial)

**B. Estelle Jones**

Mailing Address 1600 Case Ave

City State Zip Code  
Saint Paul MN 55106

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546722**

Amount of Each Disbursement this Period

138.95

Full Name (Last, First, Middle Initial)

**C. Berrett Gall**

Mailing Address 150 Portland Ave  
Unit 305

City State Zip Code  
Minneapolis MN 55401-2621

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546626**

Amount of Each Disbursement this Period

1946.02

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

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

3466.00

**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**

Full Name (Last, First, Middle Initial)

**A. Geoffrey Dittberner**

Mailing Address 445 9th Ave S

City State Zip Code  
South Saint Paul MN 55075

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2014			

**Transaction ID : D546717**

Amount of Each Disbursement this Period

153.80
--------

Full Name (Last, First, Middle Initial)

**B. Georgia Ales-Lynch**

Mailing Address 1320 Smith Ave S

City State Zip Code  
Saint Paul MN 55118

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2014			

**Transaction ID : D546712**

Amount of Each Disbursement this Period

289.38
--------

Full Name (Last, First, Middle Initial)

**C. HealthPartners**

Mailing Address 8170 33rd Ave S

City State Zip Code  
Bloomington MN 55425-4516

Purpose of Disbursement  
Health Insurance

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			08			2014			

**Transaction ID : D550411**

Amount of Each Disbursement this Period

1619.00
---------

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

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

2062.18
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**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**

Full Name (Last, First, Middle Initial)

**A. James Parsons Jr**

Mailing Address 5148 10th Ave S

City Minneapolis State MN Zip Code 55417-1724

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546847**

Amount of Each Disbursement this Period

561.79

Full Name (Last, First, Middle Initial)

**B. Juannell Johnson**

Mailing Address 478 Hazel St N

City Saint Paul State MN Zip Code 55119

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546721**

Amount of Each Disbursement this Period

588.27

Full Name (Last, First, Middle Initial)

**C. Julia Hoffa**

Mailing Address 5129 Mayview Rd

City Minnetonka State MN Zip Code 55345

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546718**

Amount of Each Disbursement this Period

291.64

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

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

1441.70

**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**

Full Name (Last, First, Middle Initial)

**A. Katrina Cole**

Mailing Address 995 Saint Albans St  
Apt 307

City Saint Paul State MN Zip Code 55103

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546714**

Amount of Each Disbursement this Period

364.04

Full Name (Last, First, Middle Initial)

**B. Katrina Cole**

Mailing Address 995 Saint Albans St  
Apt 307

City Saint Paul State MN Zip Code 55103

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 07 / 2014

**Transaction ID : D550001**

Amount of Each Disbursement this Period

188.40

Full Name (Last, First, Middle Initial)

**C. Keith Deckert**

Mailing Address 286 Van Buren Ave Apt 2

City Saint Paul State MN Zip Code 55103

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546716**

Amount of Each Disbursement this Period

433.69

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

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

986.13

**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**

Full Name (Last, First, Middle Initial)

**A. Terry Kelley**

Mailing Address 5649 Perry Ave N

City Minneapolis State MN Zip Code 55429-2828

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546843**

Amount of Each Disbursement this Period

260.61

Full Name (Last, First, Middle Initial)

**B. Larry Reeves**

Mailing Address 1599 St. Anthony Apt 9

City Saint Paul State MN Zip Code 55104

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546848**

Amount of Each Disbursement this Period

234.77

Full Name (Last, First, Middle Initial)

**C. Leah Manney**

Mailing Address 11160 County 1 Blvd

City Saint Paul State MN Zip Code 55109

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546846**

Amount of Each Disbursement this Period

160.20

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

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

655.58

**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**

Full Name (Last, First, Middle Initial)

**A. Ken Martin**

Mailing Address 4104 Oakbrooke Curv

City Eagan State MN Zip Code 55122-4217

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546627**

Amount of Each Disbursement this Period

2861.47

Full Name (Last, First, Middle Initial)

**B. Matthew Leavitt**

Mailing Address 2525 Harriet Ave S #319

City Minneapolis State MN Zip Code 55405

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546844**

Amount of Each Disbursement this Period

67.78

Full Name (Last, First, Middle Initial)

**C. Mazyar Hosseini-Dehkordi**

Mailing Address 9525 Virginia Ave S

City Minneapolis State MN Zip Code 55438

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546719**

Amount of Each Disbursement this Period

239.19

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

3168.44

**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**

Full Name (Last, First, Middle Initial)

**A. Minnesota Child Support Payment Center**

Mailing Address PO Box 64306

City State Zip Code  
Saint Paul MN 55164-0306

Purpose of Disbursement  
Wage Levy

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546890**

Amount of Each Disbursement this Period

49.28

Full Name (Last, First, Middle Initial)

**B. Minnesota Child Support Payment Center**

Mailing Address PO Box 64306

City State Zip Code  
Saint Paul MN 55164-0306

Purpose of Disbursement  
Wage Levy

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546892**

Amount of Each Disbursement this Period

36.00

Full Name (Last, First, Middle Initial)

**C. Minnesota Child Support Payment Center**

Mailing Address PO Box 64306

City State Zip Code  
Saint Paul MN 55164-0306

Purpose of Disbursement  
Wage Levy

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546893**

Amount of Each Disbursement this Period

59.25

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

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

144.53

**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**

Full Name (Last, First, Middle Initial)

**A. Minnesota Child Support Payment Center**

Mailing Address PO Box 64306

City State Zip Code  
Saint Paul MN 55164-0306

Purpose of Disbursement  
Wage Levy

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2014			

**Transaction ID : D546886**

Amount of Each Disbursement this Period

49.28
-------

Full Name (Last, First, Middle Initial)

**B. Minnesota Child Support Payment Center**

Mailing Address PO Box 64306

City State Zip Code  
Saint Paul MN 55164-0306

Purpose of Disbursement  
Wage Levy

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2014			

**Transaction ID : D546887**

Amount of Each Disbursement this Period

287.03
--------

Full Name (Last, First, Middle Initial)

**C. Minnesota Child Support Payment Center**

Mailing Address PO Box 64306

City State Zip Code  
Saint Paul MN 55164-0306

Purpose of Disbursement  
Wage Levy

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2014			

**Transaction ID : D546888**

Amount of Each Disbursement this Period

24.91
-------

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

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

361.22
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**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**

Full Name (Last, First, Middle Initial)

**A. Minnesota Department of Revenue**

Mailing Address PO Box 821

City Minneapolis State MN Zip Code 55440-0821

Purpose of Disbursement  
State Withholding Tax

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2014			

**Transaction ID : D546898**

Amount of Each Disbursement this Period

3434.00
---------

Full Name (Last, First, Middle Initial)

**B. Minnesota Department of Revenue**

Mailing Address PO Box 821

City Minneapolis State MN Zip Code 55440-0821

Purpose of Disbursement  
Sales Tax

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			07			2014			

**Transaction ID : D550383**

Amount of Each Disbursement this Period

1137.00
---------

Full Name (Last, First, Middle Initial)

**C. Noble Systems**

Mailing Address 4151 Ashford Dunwoody Rd NE  
Ste 600

City Atlanta State GA Zip Code 30319-1452

Purpose of Disbursement  
Monthly Dialer Lease & VPN

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			10			2014			

**Transaction ID : D550431**

Amount of Each Disbursement this Period

6353.07
---------

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

10924.07
----------

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

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**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**

Full Name (Last, First, Middle Initial)

**A. Patrick Burke**

Mailing Address 626 Bates Ave

City State Zip Code  
Saint Paul MN 55106

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546683**

Amount of Each Disbursement this Period

993.82

Full Name (Last, First, Middle Initial)

**B. Peggy Shapiro Graphic Design**

Mailing Address 2255 N Clark St #206

City State Zip Code  
Chicago IL 60614

Purpose of Disbursement  
Invitation Design

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 07 / 2014

**Transaction ID : D550385**

Amount of Each Disbursement this Period

725.00

Full Name (Last, First, Middle Initial)

**C. Principal Life**

Mailing Address PO Box 14416

City State Zip Code  
Des Moines IA 50306-3416

Purpose of Disbursement  
Dental & Life Insurance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 08 / 2014

**Transaction ID : D550413**

Amount of Each Disbursement this Period

353.04

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

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

2071.86

# 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**

Full Name (Last, First, Middle Initial)

### A. Reginald N Birts

Mailing Address 395 Luella St N Apt 314

City Saint Paul State MN Zip Code 55119-4324

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

Transaction ID : D546713

Amount of Each Disbursement this Period

241.18

Full Name (Last, First, Middle Initial)

### B. Sara Rivera

Mailing Address 806 Earl St #1

City Saint Paul State MN Zip Code 55106

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

Transaction ID : D546850

Amount of Each Disbursement this Period

391.61

Full Name (Last, First, Middle Initial)

### C. Shonda James-Ofili

Mailing Address 489 Geneva Ave N

City Saint Paul State MN Zip Code 55128

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

Transaction ID : D546720

Amount of Each Disbursement this Period

25.27

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

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

658.06

**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**

Full Name (Last, First, Middle Initial)

**A. Toni Wiegert**

Mailing Address 400 Larpenteur Ave

City Saint Paul State MN Zip Code 55113

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2014			

**Transaction ID : D546853**

Amount of Each Disbursement this Period

479.66
--------

Full Name (Last, First, Middle Initial)

**B. US Postmaster**

Mailing Address Riverview Station

City Saint Paul State MN Zip Code 55107

Purpose of Disbursement  
Direct Mail Postage

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			02			2014			

**Transaction ID : D550365**

Amount of Each Disbursement this Period

3728.89
---------

Full Name (Last, First, Middle Initial)

**C. WI SCTF**

Mailing Address Box 74400

City Milwaukee State WI Zip Code 53274

Purpose of Disbursement  
Wage Levy

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2014			

**Transaction ID : D546891**

Amount of Each Disbursement this Period

36.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

4244.55
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**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**

Full Name (Last, First, Middle Initial)

**A. WI SCTF**

Mailing Address Box 74400

City Milwaukee State WI Zip Code 53274

Purpose of Disbursement Wage Levy

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546889**

Amount of Each Disbursement this Period

160.21

Full Name (Last, First, Middle Initial)

**B. Zamir Zayfert**

Mailing Address 582 Thomas Ave

City Saint Paul State MN Zip Code 55009

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546854**

Amount of Each Disbursement this Period

242.49

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

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

402.70

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

35023.35

**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 checked="" 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**

Full Name (Last, First, Middle Initial)

**A. Drake Bank State**

Mailing Address 60 Plato Blvd E

City State Zip Code  
Saint Paul MN 55107-1820

Purpose of Disbursement  
Transfer of misdeposit on 10/6/2014. Pipefitters Local 539. See Schedule A, Line 11c, Page 46  
Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /   
10 / 11 / 2014

**Transaction ID : D552678**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

**B. Drake Bank State**

Mailing Address 60 Plato Blvd E

City State Zip Code  
Saint Paul MN 55107-1820

Purpose of Disbursement  
Contribution over the limit. Marcia Carsey. See Schedule A, Line 11a, Page 10  
Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /   
10 / 15 / 2014

**Transaction ID : D552679**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Drake Bank State**

Mailing Address 60 Plato Blvd E

City State Zip Code  
Saint Paul MN 55107-1820

Purpose of Disbursement  
Contribution over the limit for Senate District 66. See Schedule A, Line 12, page 62  
Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /   
10 / 09 / 2014

**Transaction ID : D552680**

Amount of Each Disbursement this Period

1000.00

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

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

7500.00

**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 checked="" 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**

Full Name (Last, First, Middle Initial)

**A. Drake Bank State**

Mailing Address 60 Plato Blvd E

City State Zip Code  
Saint Paul MN 55107-1820

Purpose of Disbursement  
Contributions over the limit for 1st Congressional District. See Schedule A,  
Line 12, Page 48  
Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 09 / 2014

**Transaction ID : D552681**

Amount of Each Disbursement this Period

6000.00

Full Name (Last, First, Middle Initial)

**B. Drake Bank State**

Mailing Address 60 Plato Blvd E

City State Zip Code  
Saint Paul MN 55107-1820

Purpose of Disbursement  
Contribution over the limit for Senate District 64. See Schedule A, Line 12,  
Page 62  
Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 09 / 2014

**Transaction ID : D552682**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Drake Bank State**

Mailing Address 60 Plato Blvd E

City State Zip Code  
Saint Paul MN 55107-1820

Purpose of Disbursement  
Contribution over the limit for 5th Congressional District. Schedule A, Line 12,  
Page 48  
Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 09 / 2014

**Transaction ID : D552683**

Amount of Each Disbursement this Period

1500.00

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

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

8500.00

**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 checked="" 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**

Full Name (Last, First, Middle Initial)

**A. Drake Bank State**

Mailing Address 60 Plato Blvd E

City State Zip Code  
Saint Paul MN 55107-1820

Purpose of Disbursement  
Contribution over the limit for Winona County DFL. See Schedule A, Line 12,  
Page 64

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
10 / 09 / 2014

**Transaction ID : D552684**

Amount of Each Disbursement this Period

900.00

Full Name (Last, First, Middle Initial)

**B. Drake Bank State**

Mailing Address 60 Plato Blvd E

City State Zip Code  
Saint Paul MN 55107-1820

Purpose of Disbursement  
Contribution over the limit for Julie Steiner. See Note.

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
10 / 10 / 2014

**Transaction ID : D552685**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Drake Bank State**

Mailing Address 60 Plato Blvd E

City State Zip Code  
Saint Paul MN 55107-1820

Purpose of Disbursement  
Transfer was misdeposited on 10/15/2014. Capitol Leadership PAC. See  
Schedule A Line 11c Page 43

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
10 / 15 / 2014

**Transaction ID : D552686**

Amount of Each Disbursement this Period

1000.00

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

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

2400.00

18400.00

: 97 `A`G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A`N5HCB

Form/Schedule: SB22

Transaction ID : D552685

Julie Steiner had the same contribution entered twice. Once on 9/8/2014 for \$5,000.00 and 10/5/2014 for \$5,000.00. When the second \$5000.00 was entered it appeared that Ms Steiner was over the limit by \$500.00. The money was transferred to the state account assuming she was over the limit. After reconciling the bank accounts for this reporting period it determined that the \$5000.00 was entered twice and was the same contribution as given on 9/8/2014. Therefore she was not over the limit by \$500.00 and the contribution was moved back to the federal account. It should be noted that the transfer from the state account to the federal account and then returned back to the federal account all happened within 24 hours.

Form/Schedule:

Transaction ID:

**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 checked="" 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**

Full Name (Last, First, Middle Initial)

**A. Gutierrez for Congress**

Mailing Address 5310 W. CULLOM AVE.

City CHICAGO State IL Zip Code 60641

Purpose of Disbursement  
Contribution

Candidate Name

**LUIS V GUTIERREZ**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: IL District: 04

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 08 / 2014

**Transaction ID : D550404**

Amount of Each Disbursement this Period

2000.00

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

2000.00

2000.00

**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 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**

Full Name (Last, First, Middle Initial)

**A. John Nuytten**

Mailing Address 3258 230th St

City Marshall State MN Zip Code 56258-5225

Purpose of Disbursement  
Returned Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2014			

**Transaction ID : D550376**

Amount of Each Disbursement this Period

250.00
--------

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

--

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

--

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

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

250.00
--------

250.00
--------

**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 type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Abdel-Kader Toovi**

Mailing Address 3020 University Ave SE

City Minneapolis State MN Zip Code 55414

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546347**

Amount of Each Disbursement this Period

1077.39

Full Name (Last, First, Middle Initial)

**B. Abigail Engelhart**

Mailing Address 1355 Vine Place

City Mound State MN Zip Code 55364

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546242**

Amount of Each Disbursement this Period

1043.39

Full Name (Last, First, Middle Initial)

**C. Adam Guptill**

Mailing Address 625 Snelling Ave N

City Saint Paul State MN Zip Code 55104

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546662**

Amount of Each Disbursement this Period

205.88

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

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

2326.66

**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**

Full Name (Last, First, Middle Initial)

**A. Alyse Quade**

Mailing Address 3741 12th Ave S  
Apt 4

City Minneapolis State MN Zip Code 55407

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546330**

Amount of Each Disbursement this Period

1077.39

Full Name (Last, First, Middle Initial)

**B. Alyssa Siems Roberson**

Mailing Address 3932 38th Ave S

City Minneapolis State MN Zip Code 55406-4520

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546672**

Amount of Each Disbursement this Period

1873.38

Full Name (Last, First, Middle Initial)

**C. Amanda Shoberg**

Mailing Address 476 Brimhall St  
Apt 12

City Saint Paul State MN Zip Code 55105

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546346**

Amount of Each Disbursement this Period

1043.39

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

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

3994.16

**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**

Full Name (Last, First, Middle Initial)

**A. Andrew Beeman**

Mailing Address 1810 Morningside Ave

City Duluth State MN Zip Code 55803-2137

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546642**

Amount of Each Disbursement this Period

205.87

Full Name (Last, First, Middle Initial)

**B. Anne Gleich**

Mailing Address 913 West 7th St

City Hastings State MN Zip Code 55033

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546656**

Amount of Each Disbursement this Period

205.87

Full Name (Last, First, Middle Initial)

**C. Artiste Mayfield**

Mailing Address 730 East 17th Street

City Minneapolis State MN Zip Code 55404

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546876**

Amount of Each Disbursement this Period

600.00

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

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

1011.74

**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**

Full Name (Last, First, Middle Initial)

**A. Aryssa Burton**

Mailing Address 1712 Grand Ave

City State Zip Code  
Saint Paul MN 55105

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
10 / 03 / 2014

**Transaction ID : D546606**

Amount of Each Disbursement this Period

927.58

Full Name (Last, First, Middle Initial)

**B. Ashley Dunn**

Mailing Address 1600 Grand Ave

City State Zip Code  
Saint Paul MN 55105

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
10 / 03 / 2014

**Transaction ID : D546200**

Amount of Each Disbursement this Period

1059.69

Full Name (Last, First, Middle Initial)

**C. Asma Mohammed**

Mailing Address 7732 Lakeview Ln

City State Zip Code  
Spring Lake Park MN 55432

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
10 / 03 / 2014

**Transaction ID : D546319**

Amount of Each Disbursement this Period

1077.39

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

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

3064.66

**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**

Full Name (Last, First, Middle Initial)

**A. AT&T**

Mailing Address 1980 S Robert St

City West Saint Paul State MN Zip Code 55118

Purpose of Disbursement  
Cell Phone and Minutes

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2014

**Transaction ID : D550443**

Amount of Each Disbursement this Period

1387.54

Full Name (Last, First, Middle Initial)

**B. Athina Hester**

Mailing Address 930 Marshall Ave

City Saint Paul State MN Zip Code 55104

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546863**

Amount of Each Disbursement this Period

246.94

Full Name (Last, First, Middle Initial)

**C. Ayana Martin**

Mailing Address 751 Central Ave W  
Apt 6

City Saint Paul State MN Zip Code 55104

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546866**

Amount of Each Disbursement this Period

153.05

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

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

1787.53

**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**

Full Name (Last, First, Middle Initial)

**A. Susy Bates**

Mailing Address 3441 23rd Ave S  
Apt 1

City Minneapolis State MN Zip Code 55407-5146

Purpose of Disbursement  
GOTV Consultant

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

10 / 02 / 2014

**Transaction ID : D550448**

Amount of Each Disbursement this Period

7000.00

Full Name (Last, First, Middle Initial)

**B. Susy Bates**

Mailing Address 3441 23rd Ave S  
Apt 1

City Minneapolis State MN Zip Code 55407-5146

Purpose of Disbursement  
GOTV Consultant

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

10 / 14 / 2014

**Transaction ID : D550971**

Amount of Each Disbursement this Period

3500.00

Full Name (Last, First, Middle Initial)

**C. Susy Bates**

Mailing Address 3441 23rd Ave S  
Apt 1

City Minneapolis State MN Zip Code 55407-5146

Purpose of Disbursement  
GOTV Consultant

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

10 / 14 / 2014

**Transaction ID : D550972**

Amount of Each Disbursement this Period

3500.00

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

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

14000.00

**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 type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Bergmann Zwerdling Direct**

Mailing Address 1015 18th St NW  
Ste 500

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Volunteer Exempt Mail-Nolan

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D550384**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Bergmann Zwerdling Direct**

Mailing Address 1015 18th St NW  
Ste 500

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Volunteer Exempt Mail-Nolan

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D550426**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Bergmann Zwerdling Direct**

Mailing Address 1015 18th St NW  
Ste 500

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Volunteer Exempt Mail-Nolan

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D550428**

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)

<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**

Full Name (Last, First, Middle Initial)

**A. Bergmann Zwerdling Direct**

Mailing Address 1015 18th St NW  
Ste 500

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Volunteer Exempt Mail-Nolan

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D552235**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Bergmann Zwerdling Direct**

Mailing Address 1015 18th St NW  
Ste 500

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Volunteer Exempt Mail-Nolan

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D552236**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Sarah Black**

Mailing Address 9054 Prestwick Cir N

City Plymouth State MN Zip Code 55443-3952

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D546711**

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)  
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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**

Full Name (Last, First, Middle Initial)

**A. Blueprint Interactive**

Mailing Address 1155 Connecticut Ave NW, Suite 601

City Washington State DC Zip Code 20036

Purpose of Disbursement Returned wire transfer which had been sent to wrong vendor

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 07 / 2014

**Transaction ID : D553662**

Amount of Each Disbursement this Period

-24789.50

Full Name (Last, First, Middle Initial)

**B. Blueprint Interactive**

Mailing Address 1155 Connecticut Ave NW, Suite 601

City Washington State DC Zip Code 20036

Purpose of Disbursement Wired to wrong vendor. See returned amount on Schedule 30B.

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 07 / 2014

**Transaction ID : D552229**

Amount of Each Disbursement this Period

24789.50

Full Name (Last, First, Middle Initial)

**C. Brian Bosire**

Mailing Address 4456 Cinnamon Ridge Trl

City Saint Paul State MN Zip Code 55122

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546605**

Amount of Each Disbursement this Period

927.59

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

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

927.59

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB30B

Transaction ID : D552229

Inadvertent wire to wrong vendor on 10/7/2014. Drake Bank notified the Bank for Blueprint Interactive and they had their bank wire it back.

Form/Schedule:

Transaction ID:

**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**

Full Name (Last, First, Middle Initial)

**A. Jacquelyn Brustuen**

Mailing Address 1159 Jessie St

City State Zip Code  
Saint Paul MN 55130-3608

Purpose of Disbursement  
GOTV Consultant

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 14 / 2014

**Transaction ID : D550969**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**B. Jacquelyn Brustuen**

Mailing Address 1159 Jessie St

City State Zip Code  
Saint Paul MN 55130-3608

Purpose of Disbursement  
GOTV Consultant

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 14 / 2014

**Transaction ID : D550970**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**C. Jacquelyn Brustuen**

Mailing Address 1159 Jessie St

City State Zip Code  
Saint Paul MN 55130-3608

Purpose of Disbursement  
GOTV Consultant

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 02 / 2014

**Transaction ID : D550449**

Amount of Each Disbursement this Period

2000.00

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

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

6000.00

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

Use separate schedule(s)  
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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**

Full Name (Last, First, Middle Initial)

**A. Casey Krolczyk**

Mailing Address 65 Cygnet Place

City Orono State MN Zip Code 55356

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2014			

**Transaction ID : D546270**

Amount of Each Disbursement this Period

1043.39
---------

Full Name (Last, First, Middle Initial)

**B. Catherine Bruns**

Mailing Address 404 18th Ave S

City Moorhead State MN Zip Code 56560-4165

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2014			

**Transaction ID : D546645**

Amount of Each Disbursement this Period

213.87
--------

Full Name (Last, First, Middle Initial)

**C. Cheryl Kenney**

Mailing Address 355 Maria Ave Apt 11

City Saint Paul State MN Zip Code 55106

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2014			

**Transaction ID : D546865**

Amount of Each Disbursement this Period

482.76
--------

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

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

1740.02
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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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**

Full Name (Last, First, Middle Initial)

**A. Christopher Hage**

Mailing Address 1320 15th St N  
Apt 3

City State Zip Code  
Saint Cloud MN 56303

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2014			

**Transaction ID : D546585**

Amount of Each Disbursement this Period

413.81
--------

Full Name (Last, First, Middle Initial)

**B. Clara Ware**

Mailing Address 668 4th St East  
Apt 3

City State Zip Code  
Saint Paul MN 55106

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2014			

**Transaction ID : D546868**

Amount of Each Disbursement this Period

37.01
-------

Full Name (Last, First, Middle Initial)

**C. Cordaro Washington**

Mailing Address 554 Central Ave W #1008

City State Zip Code  
Saint Paul MN 55104

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2014			

**Transaction ID : D546869**

Amount of Each Disbursement this Period

351.72
--------

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

802.54
--------

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

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

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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 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**

Full Name (Last, First, Middle Initial)

**A. Corey Cusick**

Mailing Address 525 E 11th St

City Duluth State MN Zip Code 55805

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546573**

Amount of Each Disbursement this Period

961.82

Full Name (Last, First, Middle Initial)

**B. Daniel Balm**

Mailing Address 331 Ave G

City Fort Dodge State IA Zip Code 50501

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546233**

Amount of Each Disbursement this Period

1043.39

Full Name (Last, First, Middle Initial)

**C. Darryl Robinson**

Mailing Address 836 Olson Memorial Hwy

City Minneapolis State MN Zip Code 55411

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546872**

Amount of Each Disbursement this Period

920.69

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

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

2925.90

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

Use separate schedule(s)  
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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**

Full Name (Last, First, Middle Initial)

**A. David Kalligher**

Mailing Address 1818 Cleveland St NE

City Minneapolis State MN Zip Code 55418

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546613**

Amount of Each Disbursement this Period

927.58

Full Name (Last, First, Middle Initial)

**B. David Ngo-Peterson**

Mailing Address 29710 Hemmingway Ave

City Stacy State MN Zip Code 55079

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546619**

Amount of Each Disbursement this Period

532.79

Full Name (Last, First, Middle Initial)

**C. Corey Day**

Mailing Address 3518 Nicollet Ave #203

City Minneapolis State MN Zip Code 55408-4575

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546625**

Amount of Each Disbursement this Period

2276.78

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

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

3737.15

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
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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 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**

Full Name (Last, First, Middle Initial)

**A. Delaney Sweet**

Mailing Address 2123 S 106th St

City Omaha State NE Zip Code 68124

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2014			

**Transaction ID : D546674**

Amount of Each Disbursement this Period

228.88
--------

Full Name (Last, First, Middle Initial)

**B. DeShawn Woods**

Mailing Address 2100 Como Ave

City Saint Paul State MN Zip Code 55108

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2014			

**Transaction ID : D546349**

Amount of Each Disbursement this Period

1077.39
---------

Full Name (Last, First, Middle Initial)

**C. Cristina Diaz**

Mailing Address 1235 Berkeley Ave

City Saint Paul State MN Zip Code 55105-2802

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2014			

**Transaction ID : D546608**

Amount of Each Disbursement this Period

961.14
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

2267.41
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

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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 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**

Full Name (Last, First, Middle Initial)

**A. Dontae Foreman**

Mailing Address 322 7th W

City State Zip Code  
Saint Paul MN 55104

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546862**

Amount of Each Disbursement this Period

246.80

Full Name (Last, First, Middle Initial)

**B. Ebony Young**

Mailing Address 294 Thomas

City State Zip Code  
Saint Paul MN 55103

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546870**

Amount of Each Disbursement this Period

300.59

Full Name (Last, First, Middle Initial)

**C. EFTPS Fed Tax Payment**

Mailing Address Federal Withholding Taxes

City State Zip Code  
Iowa City IA 52244

Purpose of Disbursement  
Federal Withholding Tax

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2014

**Transaction ID : D549993**

Amount of Each Disbursement this Period

22885.88

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

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

23433.27

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

Use separate schedule(s)  
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Detailed Summary Page

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(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**

Full Name (Last, First, Middle Initial)

**A. EFTPS Fed Tax Payment**

Mailing Address Federal Withholding Taxes

City Iowa City State IA Zip Code 52244

Purpose of Disbursement  
Federal Withholding Tax

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2014

**Transaction ID : D550462**

Amount of Each Disbursement this Period

18111.58

Full Name (Last, First, Middle Initial)

**B. Elie Farhat**

Mailing Address 196 Windser Ct

City Saint Paul State MN Zip Code 55112

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546243**

Amount of Each Disbursement this Period

1009.39

Full Name (Last, First, Middle Initial)

**C. Elizabeth Harte**

Mailing Address 1600 Grand Ave

City Saint Paul State MN Zip Code 55105

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546198**

Amount of Each Disbursement this Period

247.96

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

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

19368.93

**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**

Full Name (Last, First, Middle Initial)

**A. Elizabeth Kelly**

Mailing Address 224 W Minnehaha Pkwy

City Minneapolis State MN Zip Code 55419

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546667**

Amount of Each Disbursement this Period

730.46

Full Name (Last, First, Middle Initial)

**B. Emily Alsleben**

Mailing Address 111 Kellogg Blvd Apt 2302

City Saint Paul State MN Zip Code 55101

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546350**

Amount of Each Disbursement this Period

1365.51

Full Name (Last, First, Middle Initial)

**C. Emily Nygren**

Mailing Address 1405 London Rd Apt 4

City Duluth State MN Zip Code 55805

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546326**

Amount of Each Disbursement this Period

1077.39

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

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

3173.36

**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**

Full Name (Last, First, Middle Initial)

**A. Emily Uecker**

Mailing Address 2101 Elliott Ave S

City Minneapolis State MN Zip Code 55404

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546201**

Amount of Each Disbursement this Period

245.05

Full Name (Last, First, Middle Initial)

**B. Erik Myster**

Mailing Address 625 Snelling Ave N Apt C

City Saint Paul State MN Zip Code 55104

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546668**

Amount of Each Disbursement this Period

1026.70

Full Name (Last, First, Middle Initial)

**C. Gabriel Berlovitz**

Mailing Address 3748 46th Ave S

City Minneapolis State MN Zip Code 55406-2913

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546604**

Amount of Each Disbursement this Period

480.78

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

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

1752.53

**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**

Full Name (Last, First, Middle Initial)

**A. Gale Julius**

Mailing Address 1404 10th Ave NE

City Rochester State MN Zip Code 55906

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546263**

Amount of Each Disbursement this Period

1043.39

Full Name (Last, First, Middle Initial)

**B. Garrick Hoekstra**

Mailing Address 307 W Howard Street  
Room 306

City Winona State MN Zip Code 55987

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546199**

Amount of Each Disbursement this Period

359.57

Full Name (Last, First, Middle Initial)

**C. Seth Gellman**

Mailing Address 23 Western Ter

City Golden Valley State MN Zip Code 55426-1339

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546884**

Amount of Each Disbursement this Period

480.78

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

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

1883.74

**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**

Full Name (Last, First, Middle Initial)

**A. Geneva Cole**

Mailing Address 968 Larpenteur Ave W

City Saint Paul State MN Zip Code 55113-6550

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546651**

Amount of Each Disbursement this Period

228.87

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Georgina Hernandez**

Mailing Address 2642 Girard Ave N

City Minneapolis State MN Zip Code 55411

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546883**

Amount of Each Disbursement this Period

1018.02

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. HealthPartners**

Mailing Address 8170 33rd Ave S

City Bloomington State MN Zip Code 55425-4516

Purpose of Disbursement  
Health Insurance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 08 / 2014

**Transaction ID : D550410**

Amount of Each Disbursement this Period

14926.20

Category/  
Type

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

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

16173.09

**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**

Full Name (Last, First, Middle Initial)

**A. Heather Klindworth**

Mailing Address 8125 Everest Ln N

City State Zip Code  
Maple Grove MN 55311

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546267**

Amount of Each Disbursement this Period

1043.39

Full Name (Last, First, Middle Initial)

**B. Holiday Station Store**

Mailing Address 200 S Wabasha St

City State Zip Code  
Saint Paul MN 55107

Purpose of Disbursement  
Gas Cards - GOTV

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2014

**Transaction ID : D550454**

Amount of Each Disbursement this Period

400.00

Full Name (Last, First, Middle Initial)

**C. Isaac Mullin**

Mailing Address 2300 Aldrich Ave S  
Apt 17

City State Zip Code  
Minneapolis MN 55405

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546323**

Amount of Each Disbursement this Period

1077.39

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

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

2520.78

**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**

Full Name (Last, First, Middle Initial)

**A. Isuru Herath**

Mailing Address 1605 25th St SE

City State Zip Code  
Saint Cloud MN 56304

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2014			

**Transaction ID : D546873**

Amount of Each Disbursement this Period

694.20
--------

Full Name (Last, First, Middle Initial)

**B. Jack Elsnes**

Mailing Address 10417 W River Rd

City State Zip Code  
Brooklyn Park MN 55444

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2014			

**Transaction ID : D546241**

Amount of Each Disbursement this Period

1043.39
---------

Full Name (Last, First, Middle Initial)

**C. Jackson Fate**

Mailing Address 1024 15th Ave SE

City State Zip Code  
Minneapolis MN 55414

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2014			

**Transaction ID : D546654**

Amount of Each Disbursement this Period

205.88
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

1943.47
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**TOTAL** This Period (last page this line number only)..... ▶

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**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**

Full Name (Last, First, Middle Initial)

**A. Jerald McMurray**

Mailing Address 401 Sibley St  
Apt 310

City State Zip Code  
Saint Paul MN 55105

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
10 / 03 / 2014

**Transaction ID : D546318**

Amount of Each Disbursement this Period

1108.39

Full Name (Last, First, Middle Initial)

**B. Jimmy John's**

Mailing Address 523 Jackson Street

City State Zip Code  
Saint Paul MN 55102

Purpose of Disbursement  
Staff Food

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
10 / 01 / 2014

**Transaction ID : D550014**

Amount of Each Disbursement this Period

98.64

Full Name (Last, First, Middle Initial)

**C. Joan Johnson**

Mailing Address 877 Saint Paul Ave

City State Zip Code  
Saint Paul MN 55116

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
10 / 03 / 2014

**Transaction ID : D546864**

Amount of Each Disbursement this Period

285.88

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

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

1492.91

**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**

Full Name (Last, First, Middle Initial)

**A. John Makepeace**

Mailing Address 66 9th St East Apt 2212

City State Zip Code  
Saint Paul MN 55101

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
10 / 03 / 2014

**Transaction ID : D546616**

Amount of Each Disbursement this Period

430.78

Full Name (Last, First, Middle Initial)

**B. John Remensperger**

Mailing Address 620 2nd St SW  
Apt 113

City State Zip Code  
Rochester MN 55902

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
10 / 03 / 2014

**Transaction ID : D546337**

Amount of Each Disbursement this Period

1077.39

Full Name (Last, First, Middle Initial)

**C. Jonathan Martin**

Mailing Address 4125 DuPont Ave S

City State Zip Code  
Minneapolis MN 55409

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
10 / 03 / 2014

**Transaction ID : D546579**

Amount of Each Disbursement this Period

993.82

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

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

2501.99

**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**

Full Name (Last, First, Middle Initial)

**A. Jorge Contreras**

Mailing Address 224 W Minnehaha Pkwy

City Minneapolis State MN Zip Code 55419

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546352**

Amount of Each Disbursement this Period

1395.51

Full Name (Last, First, Middle Initial)

**B. Jorge Segovia**

Mailing Address 3701 38th Ave S

City Minneapolis State MN Zip Code 55406

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546878**

Amount of Each Disbursement this Period

534.00

Full Name (Last, First, Middle Initial)

**C. Jose Maldonado**

Mailing Address 966 Robert St S  
Apt 102

City Saint Paul State MN Zip Code 55118-1447

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546617**

Amount of Each Disbursement this Period

896.58

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

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

2826.09

**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**

Full Name (Last, First, Middle Initial)

**A. Joseph Knaak**

Mailing Address 9699 187th St N

City State Zip Code  
Forest Lake MN 55025

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D546614**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Joseph Kreisman**

Mailing Address 1367 Bayard Ave

City State Zip Code  
Saint Paul MN 55116-1643

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D546269**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Joshua Sanchez**

Mailing Address 1104 E St.

City State Zip Code  
Marathon WI 54448

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D546341**

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)

<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**

Full Name (Last, First, Middle Initial)

**A. Joshua Schutz**

Mailing Address 319 East Main Street

City Mankato State MN Zip Code 56001

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546671**

Amount of Each Disbursement this Period

228.87

Full Name (Last, First, Middle Initial)

**B. JR Copier Specialists**

Mailing Address 1313 Chestnut Ave  
Ste 105

City Minneapolis State MN Zip Code 55403-1324

Purpose of Disbursement  
Copier Rental

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 02 / 2014

**Transaction ID : D550447**

Amount of Each Disbursement this Period

4843.12

Full Name (Last, First, Middle Initial)

**C. Julia Carpenter**

Mailing Address 15660 17th PI N

City Minneapolis State MN Zip Code 55447

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546647**

Amount of Each Disbursement this Period

228.88

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

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

5300.87

**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**

Full Name (Last, First, Middle Initial)

**A. JuQuan Spears**

Mailing Address 506 Central

City Saint Paul State MN Zip Code 55103

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546867**

Amount of Each Disbursement this Period

315.32

Full Name (Last, First, Middle Initial)

**B. Justine Kapitzke**

Mailing Address 206 5th Avenue NW  
Apt 210

City Bemidji State MN Zip Code 56601

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546885**

Amount of Each Disbursement this Period

115.44

Full Name (Last, First, Middle Initial)

**C. Karen Burrage**

Mailing Address 1120 Kingsford Street

City Saint Paul State MN Zip Code 55106

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546881**

Amount of Each Disbursement this Period

600.00

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

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

1030.76

**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**

Full Name (Last, First, Middle Initial)

**A. Karl Landskroener**

Mailing Address 2516 35th Ave S

City Minneapolis State MN Zip Code 55406

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2014			

**Transaction ID : D546273**

Amount of Each Disbursement this Period

1043.39
---------

Full Name (Last, First, Middle Initial)

**B. Karla Leitzman**

Mailing Address 593 Laurel Ave  
Apt 4

City St. Paul State MN Zip Code 55106

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2014			

**Transaction ID : D546274**

Amount of Each Disbursement this Period

1077.39
---------

Full Name (Last, First, Middle Initial)

**C. Katherine Walker**

Mailing Address 5655 W 35th St  
Apt 511

City Minneapolis State MN Zip Code 55416

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2014			

**Transaction ID : D546348**

Amount of Each Disbursement this Period

1043.39
---------

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

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

3164.17
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**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**

Full Name (Last, First, Middle Initial)

**A. Katie Humphrey**

Mailing Address 1027 South Lake Ave

City State Zip Code  
Duluth MN 55802

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
10 / 03 / 2014

**Transaction ID : D546255**

Amount of Each Disbursement this Period

1009.39

Full Name (Last, First, Middle Initial)

**B. Kelsey Kutzler**

Mailing Address 1418 Adams St NE

City State Zip Code  
Minneapolis MN 55413

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
10 / 03 / 2014

**Transaction ID : D546272**

Amount of Each Disbursement this Period

1043.39

Full Name (Last, First, Middle Initial)

**C. Mark Kirwin**

Mailing Address 2001 22nd Ave NE

City State Zip Code  
Minneapolis MN 55418-3907

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
10 / 03 / 2014

**Transaction ID : D546875**

Amount of Each Disbursement this Period

532.81

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

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

2585.59

**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**

Full Name (Last, First, Middle Initial)

**A. Kristian Nyberg**

Mailing Address 4305 Lancelot

City State Zip Code  
Minnetonka MN 55345

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
10 / 03 / 2014

**Transaction ID : D546324**

Amount of Each Disbursement this Period

1077.39

Full Name (Last, First, Middle Initial)

**B. Kyle Olson**

Mailing Address 2229 5th St NE

City State Zip Code  
Minneapolis MN 55418

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
10 / 03 / 2014

**Transaction ID : D546580**

Amount of Each Disbursement this Period

1692.15

Full Name (Last, First, Middle Initial)

**C. Kyle Vanderflute**

Mailing Address 504 S Broadway

City State Zip Code  
Gilbert MN 55741

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
10 / 03 / 2014

**Transaction ID : D546583**

Amount of Each Disbursement this Period

1042.82

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

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

3812.36

**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**

Full Name (Last, First, Middle Initial)

**A. Kyrstin Schuette**

Mailing Address 9800 45th Ave N  
Apt 115

City Plymouth State MN Zip Code 55442

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2014			

**Transaction ID : D546342**

Amount of Each Disbursement this Period

1009.39
---------

Full Name (Last, First, Middle Initial)

**B. Lacey Carlson**

Mailing Address 2151 Blue Heron Dr

City Delavan State WI Zip Code 53115

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2014			

**Transaction ID : D546650**

Amount of Each Disbursement this Period

1059.69
---------

Full Name (Last, First, Middle Initial)

**C. Larissa Shea**

Mailing Address 2710 Pleasant Ave S

City Minneapolis State MN Zip Code 55408

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2014			

**Transaction ID : D546344**

Amount of Each Disbursement this Period

1077.39
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

3146.47
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**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**

Full Name (Last, First, Middle Initial)

**A. Laura Hoffman**

Mailing Address 509 8th St SE

City Minneapolis State MN Zip Code 55414-1207

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546246**

Amount of Each Disbursement this Period

1108.39

Full Name (Last, First, Middle Initial)

**B. Lauren Canales**

Mailing Address 3125 Virginia Ave S Apt 4

City Minneapolis State MN Zip Code 55426

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546646**

Amount of Each Disbursement this Period

228.87

Full Name (Last, First, Middle Initial)

**C. Layton Smith**

Mailing Address 2732 2nd Ave S

City Minneapolis State MN Zip Code 55406

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D547166**

Amount of Each Disbursement this Period

247.08

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

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

1584.34

**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**

Full Name (Last, First, Middle Initial)

**A. Lee Brothers Event Center**

Mailing Address 6441 10th Ave

City Oakdale State MN Zip Code 55128

Purpose of Disbursement  
Food for Volunteers

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 14 / 2014

**Transaction ID : D550975**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Lindsay Aune**

Mailing Address 2401 36th St S  
Apt 205

City Moorhead State MN Zip Code 56560

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546359**

Amount of Each Disbursement this Period

1144.82

Full Name (Last, First, Middle Initial)

**C. Lone Oak Companies**

Mailing Address 3177 Dodd Rd

City Eagan State MN Zip Code 55121

Purpose of Disbursement  
GOTV Letter

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 14 / 2014

**Transaction ID : D550979**

Amount of Each Disbursement this Period

930.29

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

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

3075.11

**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**

Full Name (Last, First, Middle Initial)

**A. Lorenz Bus Service**

Mailing Address 8600 Xylite St NE

City Minneapolis State MN Zip Code 55449-5003

Purpose of Disbursement  
GOTV Bus Tour

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 14 / 2014

**Transaction ID : D550981**

Amount of Each Disbursement this Period

7000.00

Full Name (Last, First, Middle Initial)

**B. Lourdes DeLaLuz Francisco**

Mailing Address 3336 Cedar Ave S  
Apt 2

City Minneapolis State MN Zip Code 55407

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546877**

Amount of Each Disbursement this Period

526.00

Full Name (Last, First, Middle Initial)

**C. Luz Tejada-Pereira**

Mailing Address 4820 Pleasant Ave

City Minneapolis State MN Zip Code 55419

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546677**

Amount of Each Disbursement this Period

1133.34

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

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

8659.34

**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**

Full Name (Last, First, Middle Initial)

**A. Madeleine Chouanard**

Mailing Address 1700 Bush Ave

City State Zip Code  
Saint Paul MN 55106

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D546236**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Mallory Howitt**

Mailing Address 342 S Snelling Ave

City State Zip Code  
Saint Paul MN 55105-1801

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D546612**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Manilan Houle**

Mailing Address 101 Vassar St

City State Zip Code  
Duluth MN 55803

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D546666**

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)

<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**

Full Name (Last, First, Middle Initial)

**A. Marissa Kramer**

Mailing Address 404 8th Street SE  
Apt 4

City Minneapolis State MN Zip Code 55414

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546268**

Amount of Each Disbursement this Period

1077.39

Full Name (Last, First, Middle Initial)

**B. Marta Popadiak**

Mailing Address 1898 Ashland Ave

City Saint Paul State MN Zip Code 55104

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546354**

Amount of Each Disbursement this Period

1400.51

Full Name (Last, First, Middle Initial)

**C. Marvin Innes**

Mailing Address 3346 Upton Ave N

City Minneapolis State MN Zip Code 55412

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546879**

Amount of Each Disbursement this Period

1018.58

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

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

3496.48

**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**

Full Name (Last, First, Middle Initial)

**A. Mary Kennedy**

Mailing Address 1712 Grand Ave Apt 2

City State Zip Code  
Saint Paul MN 55105

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
10 / 03 / 2014

**Transaction ID : D546194**

Amount of Each Disbursement this Period

503.79

Full Name (Last, First, Middle Initial)

**B. Matthew Bowles-Roth**

Mailing Address 5117 James Ave S

City State Zip Code  
Minneapolis MN 55419

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
10 / 03 / 2014

**Transaction ID : D546234**

Amount of Each Disbursement this Period

1077.39

Full Name (Last, First, Middle Initial)

**C. Meredith Stacey**

Mailing Address 401 Sibley St  
Apt 310

City State Zip Code  
Saint Paul MN 55101

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
10 / 03 / 2014

**Transaction ID : D546355**

Amount of Each Disbursement this Period

1346.51

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

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

2927.69

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

Use separate schedule(s)  
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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**

Full Name (Last, First, Middle Initial)

**A. Meredyth Krug**

Mailing Address 521 2nd St SE

City Minneapolis State MN Zip Code 55414

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546271**

Amount of Each Disbursement this Period

1077.39

Full Name (Last, First, Middle Initial)

**B. Michael Magistad**

Mailing Address 1573 Cohansey #203

City Saint Paul State MN Zip Code 55117

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546615**

Amount of Each Disbursement this Period

1018.58

Full Name (Last, First, Middle Initial)

**C. Michele Pikovsky**

Mailing Address 10700 50th Ave N

City Minneapolis State MN Zip Code 55442

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546670**

Amount of Each Disbursement this Period

230.87

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

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

2326.84

**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**

Full Name (Last, First, Middle Initial)

**A. Miles Paxton**

Mailing Address 18390 U.S. Hwy 169

City Milaca State MN Zip Code 56353

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546581**

Amount of Each Disbursement this Period

961.82

**B. Minnesota Department of Revenue**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 821

City Minneapolis State MN Zip Code 55440-0821

Purpose of Disbursement  
State Withholding Tax

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546895**

Amount of Each Disbursement this Period

3045.00

**C. Minnesota Department of Revenue**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 821

City Minneapolis State MN Zip Code 55440-0821

Purpose of Disbursement  
State Withholding Tax

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546897**

Amount of Each Disbursement this Period

189.00

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

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

4195.82

**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**

Full Name (Last, First, Middle Initial)

**A. Minnesota Office of Secretary of State**

Mailing Address 180 Sob  
100 Constitution Avenue

City Saint Paul State MN Zip Code 55155-0001

Purpose of Disbursement  
Absentee Data by Precinct

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 02 / 2014

**Transaction ID : D550439**

Amount of Each Disbursement this Period

46.00

Full Name (Last, First, Middle Initial)

**B. Mission Control Inc**

Mailing Address 114A Mansfield Hollow Rd

City Mansfield Center State CT Zip Code 06250-1316

Purpose of Disbursement  
Volunteer Exempt Mail-Peterson

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D550452**

Amount of Each Disbursement this Period

25480.08

Full Name (Last, First, Middle Initial)

**C. Mission Control Inc**

Mailing Address 114A Mansfield Hollow Rd

City Mansfield Center State CT Zip Code 06250-1316

Purpose of Disbursement  
Volunteer Exempt Mail-Peterson

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D550453**

Amount of Each Disbursement this Period

25520.08

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

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

51046.16

**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**

Full Name (Last, First, Middle Initial)

**A. Mission Control Inc**

Mailing Address 114A Mansfield Hollow Rd

City Mansfield Center State CT Zip Code 06250-1316

Purpose of Disbursement  
Volunteer Exempt Mail-Peterson

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2014

**Transaction ID : D552237**

Amount of Each Disbursement this Period

25599.08

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Mitchell Hancock**

Mailing Address 4740 Sharon Lane

City Saint Paul State MN Zip Code 55110

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546197**

Amount of Each Disbursement this Period

253.96

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. MN House of Representatives**

Mailing Address 100 Rev Dr. Martin Luther King Jr

City Saint Paul State MN Zip Code 55155

Purpose of Disbursement  
Research Copies

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 14 / 2014

**Transaction ID : D550980**

Amount of Each Disbursement this Period

145.50

Category/  
Type

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

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

25998.54

**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**

Full Name (Last, First, Middle Initial)

**A. MSUM- Soduxo**

Mailing Address 725 14th St S

City Moorhead State MN Zip Code 56563

Purpose of Disbursement  
Volunteer Food & Beverages

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 08 / 2014

**Transaction ID : D552221**

Amount of Each Disbursement this Period

125.98

Full Name (Last, First, Middle Initial)

**B. Mustafa Jumale**

Mailing Address 2421 Pillsbury Ave S  
Apt 107

City Minneapolis State MN Zip Code 55404

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546874**

Amount of Each Disbursement this Period

1063.63

Full Name (Last, First, Middle Initial)

**C. Nathan Borth**

Mailing Address 632 E 3rd St  
Apt I

City Duluth State MN Zip Code 55805

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546644**

Amount of Each Disbursement this Period

228.87

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

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

1418.48

**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"/> 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**

Full Name (Last, First, Middle Initial)

**A. Nicholas Coe**

Mailing Address 2015 41st St NW

City Rochester State MN Zip Code 55901

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546351**

Amount of Each Disbursement this Period

1395.51

Full Name (Last, First, Middle Initial)

**B. Nicholas Galli**

Mailing Address 22603 159th St

City Elk River State MN Zip Code 55330

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546244**

Amount of Each Disbursement this Period

1043.39

Full Name (Last, First, Middle Initial)

**C. Nicholas Kor**

Mailing Address 1085 Hagne Ave

City Saint Paul State MN Zip Code 55104

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546353**

Amount of Each Disbursement this Period

1346.51

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

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

3785.41

**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"/> 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**

Full Name (Last, First, Middle Initial)

**A. Pamela Hartley-Pinto**

Mailing Address 950 Jefferson Commons Circle

City State Zip Code  
Saint Paul MN 55114

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D546245**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Patrick Chilton**

Mailing Address 1429 Grand Ave  
Apt 1

City State Zip Code  
Saint Paul MN 55105

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D546235**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Patrick Owens**

Mailing Address 765 N Hampden Ave  
Apt 537

City State Zip Code  
Saint Paul MN 55114

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D546327**

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)

<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**

Full Name (Last, First, Middle Initial)

**A. Justin Perpich**

Mailing Address 4211 W 7th St

City Duluth State MN Zip Code 55807-1529

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546582**

Amount of Each Disbursement this Period

1595.15

Full Name (Last, First, Middle Initial)

**B. Phil Jents**

Mailing Address 1030 W 3rd St

City Duluth State MN Zip Code 55806

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546258**

Amount of Each Disbursement this Period

1077.39

Full Name (Last, First, Middle Initial)

**C. Phillip Norr**

Mailing Address 1107 2nd Ave S

City Fargo State ND Zip Code 58103

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546232**

Amount of Each Disbursement this Period

1138.04

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

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

3810.58

**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**

Full Name (Last, First, Middle Initial)

**A. Pinzoo.com**

Mailing Address 1146 N Central Ave  
# 255

City Glendale State CA Zip Code 91202-2506

Purpose of Disbursement  
Cell Phone Minutes

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

10 / 10 / 2014

**Transaction ID : D550446**

Amount of Each Disbursement this Period

588.30

Full Name (Last, First, Middle Initial)

**B. Principal Life**

Mailing Address PO Box 14416

City Des Moines State IA Zip Code 50306-3416

Purpose of Disbursement  
Dental & Life Insurance

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

10 / 08 / 2014

**Transaction ID : D550412**

Amount of Each Disbursement this Period

4251.90

Full Name (Last, First, Middle Initial)

**C. Reissard Gibbs**

Mailing Address 620 Gorman St

City Shakopee State MN Zip Code 55379

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

10 / 03 / 2014

**Transaction ID : D546655**

Amount of Each Disbursement this Period

927.58

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

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

5767.78

**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**

Full Name (Last, First, Middle Initial)

**A. Robert Harter**

Mailing Address 1723 East 4th Street

City Duluth State MN Zip Code 55812

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

10 / 03 / 2014

**Transaction ID : D546663**

Amount of Each Disbursement this Period

230.87

Full Name (Last, First, Middle Initial)

**B. Robert T Johnson**

Mailing Address 122000 Marion Ln West

City Minnetonka State MN Zip Code 55305

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

10 / 03 / 2014

**Transaction ID : D546260**

Amount of Each Disbursement this Period

1032.18

Full Name (Last, First, Middle Initial)

**C. Rosa Francisco Morales**

Mailing Address 3336 Cedar Ave S  
Apt 2

City Minneapolis State MN Zip Code 55407

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

10 / 03 / 2014

**Transaction ID : D546882**

Amount of Each Disbursement this Period

938.02

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

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

2201.07

**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**

Full Name (Last, First, Middle Initial)

**A. Ryan Holden**

Mailing Address 1014 East Saint Germain  
Apt 25

City State Zip Code  
Saint Cloud MN 56304

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

10 / 03 / 2014

**Transaction ID : D546665**

Amount of Each Disbursement this Period

228.87

Full Name (Last, First, Middle Initial)

**B. Sara Lovett**

Mailing Address 48 27th Ave SE  
Apt 101

City State Zip Code  
Minneapolis MN 55414

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

10 / 03 / 2014

**Transaction ID : D546312**

Amount of Each Disbursement this Period

1077.39

Full Name (Last, First, Middle Initial)

**C. Sarah Duevel**

Mailing Address 1538 Selby Ave

City State Zip Code  
Saint Paul MN 55104

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

10 / 03 / 2014

**Transaction ID : D546652**

Amount of Each Disbursement this Period

1950.38

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

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

3256.64

**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**

Full Name (Last, First, Middle Initial)

**A. Segundo Asqui**

Mailing Address 1217 Broadway

City State Zip Code  
Minneapolis MN 55413

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
10 / 03 / 2014

**Transaction ID : D546880**

Amount of Each Disbursement this Period

560.00

Full Name (Last, First, Middle Initial)

**B. Seven Corners Printing**

Mailing Address 1099 Snelling Ave N

City State Zip Code  
Saint Paul MN 55108-2705

Purpose of Disbursement  
Volunteer GOTV Stickers

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
10 / 14 / 2014

**Transaction ID : D550977**

Amount of Each Disbursement this Period

285.21

Full Name (Last, First, Middle Initial)

**C. Seven Corners Printing**

Mailing Address 1099 Snelling Ave N

City State Zip Code  
Saint Paul MN 55108-2705

Purpose of Disbursement  
Voter Registration Reminders

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
10 / 14 / 2014

**Transaction ID : D550978**

Amount of Each Disbursement this Period

1446.44

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

2291.65

**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 type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Shana Holmes**

Mailing Address 3202 1st Ave S

City Minneapolis State MN Zip Code 55408

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546249**

Amount of Each Disbursement this Period

1009.39

Full Name (Last, First, Middle Initial)

**B. Simon Radecki**

Mailing Address 3404 Silver Lane

City Minneapolis State MN Zip Code 55421

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546331**

Amount of Each Disbursement this Period

1067.39

Full Name (Last, First, Middle Initial)

**C. Soapbox Systems Inc**

Mailing Address 8609 Lyndale Ave S  
Ste 203

City Minneapolis State MN Zip Code 55420

Purpose of Disbursement  
Predictive Dialer Minutes

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 07 / 2014

**Transaction ID : D550392**

Amount of Each Disbursement this Period

23677.50

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

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

25754.28

**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**

Full Name (Last, First, Middle Initial)

**A. Stefan Heikel**

Mailing Address 1892 Feronia Ave

City State Zip Code  
Saint Paul MN 55104

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /   
10 / 03 / 2014

**Transaction ID : D546611**

Amount of Each Disbursement this Period

873.58

Full Name (Last, First, Middle Initial)

**B. Susan Wasmundt**

Mailing Address 727 Front Ave  
Apt 1404

City State Zip Code  
Saint Paul MN 55103

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /   
10 / 03 / 2014

**Transaction ID : D547168**

Amount of Each Disbursement this Period

114.36

Full Name (Last, First, Middle Initial)

**C. Sydney Spreck**

Mailing Address 12855 103rd Street North

City State Zip Code  
Stillwater MN 55082

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /   
10 / 03 / 2014

**Transaction ID : D546673**

Amount of Each Disbursement this Period

228.88

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

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

1216.82

**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**

Full Name (Last, First, Middle Initial)

**A. Taylor Lightman**

Mailing Address 1500 St Olaf Ave

City Northfield State MN Zip Code 55057

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546275**

Amount of Each Disbursement this Period

1043.39

Full Name (Last, First, Middle Initial)

**B. Theodore Tschann**

Mailing Address 427 Woodlawn Ave

City Saint Paul State MN Zip Code 55105

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546357**

Amount of Each Disbursement this Period

1036.70

Full Name (Last, First, Middle Initial)

**C. Thumb Things/ Button Works**

Mailing Address 925 Robert St S

City Saint Paul State MN Zip Code 55118-1443

Purpose of Disbursement  
State Fair Buttons

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 08 / 2014

**Transaction ID : D550407**

Amount of Each Disbursement this Period

1194.44

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

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

3274.53

**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**

Full Name (Last, First, Middle Initial)

**A. Timothy Dubis**

Mailing Address 10917 Sheridan Ave S

City Minneapolis State MN Zip Code 55431

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546609**

Amount of Each Disbursement this Period

896.58

Full Name (Last, First, Middle Initial)

**B. Timothy Graff**

Mailing Address 516 Innsbruck Drive

City Chaska State MN Zip Code 55318

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546195**

Amount of Each Disbursement this Period

1193.32

Full Name (Last, First, Middle Initial)

**C. Travis Burton**

Mailing Address 713 Bradbury Cr

City Jordan State MN Zip Code 55352

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546607**

Amount of Each Disbursement this Period

1041.14

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

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

3131.04

**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**

Full Name (Last, First, Middle Initial)

**A. Troy Olson**

Mailing Address 990 Grand Ave  
Apt 3

City Saint Paul State MN Zip Code 55105

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	3		2	0	1	4

**Transaction ID : D546358**

Amount of Each Disbursement this Period

8	5	0	7	0
---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. University of Minnesota**

Mailing Address 300 Washington Ave SE

City Minneapolis State MN Zip Code 55455-0118

Purpose of Disbursement  
Room Rental GOTV Rally

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	9		2	0	1	4

**Transaction ID : D550429**

Amount of Each Disbursement this Period

1	6	8	4	3	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. University of Minnesota**

Mailing Address 300 Washington Ave SE

City Minneapolis State MN Zip Code 55455-0118

Purpose of Disbursement  
Room Rental GOTV Rally

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	2		2	0	1	4

**Transaction ID : D550374**

Amount of Each Disbursement this Period

1	5	0	0	0
---	---	---	---	---

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

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

1	9	1	9	5	0
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**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**

Full Name (Last, First, Middle Initial)

**A. US Postmaster**

Mailing Address Riverview Station

City State Zip Code  
Saint Paul MN 55107

Purpose of Disbursement  
Sample Ballot Printing

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			09			2014			

**Transaction ID : D550430**

Amount of Each Disbursement this Period

9	3	3	4	.	0	6
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. US Postmaster**

Mailing Address Riverview Station

City State Zip Code  
Saint Paul MN 55107

Purpose of Disbursement  
Business Reply Mail - Absentee Ballot Requests

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			08			2014			

**Transaction ID : D550455**

Amount of Each Disbursement this Period

8	0	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. US Postmaster**

Mailing Address Riverview Station

City State Zip Code  
Saint Paul MN 55107

Purpose of Disbursement  
Business Reply Mail - Absentee Ballot Requests

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			14			2014			

**Transaction ID : D550976**

Amount of Each Disbursement this Period

8	0	0	0	.	0	0
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

2	5	3	3	.	0	6
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8	0	0	0	.	0	0
---	---	---	---	---	---	---

**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**

Full Name (Last, First, Middle Initial)

**A. US Postmaster**

Mailing Address Riverview Station

City State Zip Code  
Saint Paul MN 55107

Purpose of Disbursement  
Sample Ballot Printing

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /   
10 / 15 / 2014

**Transaction ID : D552238**

Amount of Each Disbursement this Period

24417.32

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Vanessa Hernandez-Cruz**

Mailing Address 100 Queen St Moorhead

City State Zip Code  
Moorhead MN 56560

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /   
10 / 03 / 2014

**Transaction ID : D546664**

Amount of Each Disbursement this Period

230.87

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. Vanessa Young**

Mailing Address 1950 Case Ave

City State Zip Code  
Saint Paul MN 55119

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /   
10 / 03 / 2014

**Transaction ID : D546622**

Amount of Each Disbursement this Period

1124.69

Category/  
Type

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

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

25772.88

**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**

Full Name (Last, First, Middle Initial)

**A. Victoria Hong**

Mailing Address 1162 Edgerton St  
Unit 2

City State Zip Code  
Saint Paul MN 55130

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2014			

**Transaction ID : D546253**

Amount of Each Disbursement this Period

1108.39
---------

Full Name (Last, First, Middle Initial)

**B. Vlad Ryaboy**

Mailing Address 4774 Dominick Way

City State Zip Code  
Minnetonka MN 55343-8751

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2014			

**Transaction ID : D546621**

Amount of Each Disbursement this Period

1011.13
---------

Full Name (Last, First, Middle Initial)

**C. Mychal Vlatkovich**

Mailing Address 202 S 18th Ave E

City State Zip Code  
Duluth MN 55812-2005

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2014			

**Transaction ID : D546356**

Amount of Each Disbursement this Period

1346.51
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

3466.03
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**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**

Full Name (Last, First, Middle Initial)

**A. William Black**

Mailing Address 20588 Quinnell Ave N

City Scandia State MN Zip Code 55073

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546229**

Amount of Each Disbursement this Period

1529.47

Full Name (Last, First, Middle Initial)

**B. Wolfgang Durchholz**

Mailing Address 1049 11th Ave SE

City Minneapolis State MN Zip Code 55414

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546653**

Amount of Each Disbursement this Period

230.87

Full Name (Last, First, Middle Initial)

**C. Zachary Johnson**

Mailing Address 202 East 2nd Street

City Morris State MN Zip Code 56267

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : D546578**

Amount of Each Disbursement this Period

993.82

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

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

2754.16

**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**

Full Name (Last, First, Middle Initial)

**A. Zachary Marko**

Mailing Address 6714 Orchard Ln N

City Minneapolis State MN Zip Code 55429

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

10 / 03 / 2014

**Transaction ID : D546618**

Amount of Each Disbursement this Period

1004.59

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Amount of Each Disbursement this Period

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

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

1004.59

489717.36

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 154 OF 229
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>AFSCME MN People Committee Council 5 PAC</b>	Nature of Debt (Purpose): Employee Leaseback, Wages, Taxes, Benefits
Mailing Address 300 Hardman Ave S	
City State Zip Code South Saint Paul MN 55075-2435	

Outstanding Balance Beginning This Period <input type="text" value="6177.17"/>	<b>Transaction ID : D548099</b>	
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="6177.17"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Anne Lewis Strategies LLC</b>	Nature of Debt (Purpose): Email Consultant
Mailing Address 2801 M St NW	
City State Zip Code Washington DC 20007-3712	

Outstanding Balance Beginning This Period <input type="text" value="4500.00"/>	<b>Transaction ID : D548100</b>	
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="4500.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ArcStone</b>	Nature of Debt (Purpose): Web Page Design
Mailing Address 104 W Franklin Ave	
City State Zip Code Minneapolis MN 55404	

Outstanding Balance Beginning This Period <input type="text" value="2383.75"/>	<b>Transaction ID : D530359</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="2058.75"/>	Outstanding Balance at Close of This Period <input type="text" value="325.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="11002.17"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> 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)	PAGE 155 OF 229
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Honsa Binder Printing</b>	Nature of Debt (Purpose): Printing
Mailing Address 320 Spruce St	
City State Zip Code Saint Paul MN 55101-2445	

Outstanding Balance Beginning This Period 3218.42	<b>Transaction ID : D548102</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3218.42

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Infinity Alpha Omega</b>	Nature of Debt (Purpose): State Fair T'Shirts
Mailing Address 4302 Girard Ave N	
City State Zip Code Minneapolis MN 55412	

Outstanding Balance Beginning This Period 570.64	<b>Transaction ID : D537249</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 570.64

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Kate Monson Media</b>	Nature of Debt (Purpose): Party Graphics Design, Video Editing
Mailing Address 46654 300th St	
City State Zip Code Beresford SD 57004	

Outstanding Balance Beginning This Period 3185.00	<b>Transaction ID : D537250</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3185.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	6974.06
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> 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)	PAGE 156 OF 229
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Lockridge Grindal Nauen PLLP</b>	Nature of Debt (Purpose): Legal Fees
Mailing Address 100 Washington Ave S #2200	
City State Zip Code Minneapolis MN 55401-2159	

Outstanding Balance Beginning This Period <input type="text" value="14475.28"/>	<b>Transaction ID : D530586</b>	
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="14475.28"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>NGP VAN Inc.</b>	Nature of Debt (Purpose): Software Compliance, Email Service, Duplicating Information
Mailing Address 1101 15th St SW	
City State Zip Code Washington DC 20005	

Outstanding Balance Beginning This Period <input type="text" value="1250.00"/>	<b>Transaction ID : D537253</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1250.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>New Partners Consulting Inc</b>	Nature of Debt (Purpose): Consultant
Mailing Address 401 9th St NW	
City State Zip Code Washington DC 20004-2128	

Outstanding Balance Beginning This Period <input type="text" value="5000.00"/>	<b>Transaction ID : D533274</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="5000.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="14475.28"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> 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)	PAGE 157 OF 229
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>RJF Kramer &amp; Associates</b>	Nature of Debt (Purpose): State Fair T'Shirts
Mailing Address 1471 Barclay St	
City State Zip Code Saint Paul MN 55106-1405	

Outstanding Balance Beginning This Period <input type="text" value="3739.97"/>	<b>Transaction ID : D537254</b>	
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="3739.97"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Sandler Reiff &amp; Young</b>	Nature of Debt (Purpose): Legal Fees
Mailing Address 1025 Vermont Ave NW Ste 300	
City State Zip Code Washington DC 20005-6302	

Outstanding Balance Beginning This Period <input type="text" value="1200.00"/>	<b>Transaction ID : D548105</b>	
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="1200.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Seven Corners Printing</b>	Nature of Debt (Purpose): Printing
Mailing Address 1099 Snelling Ave N	
City State Zip Code Saint Paul MN 55108-2705	

Outstanding Balance Beginning This Period <input type="text" value="55540.09"/>	<b>Transaction ID : D530363</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="14444.87"/>	Outstanding Balance at Close of This Period <input type="text" value="41095.22"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="46035.19"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> 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)	PAGE 158 OF 229
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Solutions Builders - OK</b>	Nature of Debt (Purpose): Virtual Onsigght Network Support , Replace UPS Service
Mailing Address 3500 W 80th St	
City State Zip Code Bloomington MN 55431-1090	

Outstanding Balance Beginning This Period <input type="text" value="1560.00"/>	<b>Transaction ID : D548107</b>	
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="1560.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Streamworks</b>	Nature of Debt (Purpose): Direct Mail - Mailhouse
Mailing Address 3770 Dunlap St N	
City State Zip Code Saint Paul MN 55112	

Outstanding Balance Beginning This Period <input type="text" value="2837.77"/>	<b>Transaction ID : D537257</b>	
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="2837.77"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Thumb Things/ Button Works</b>	Nature of Debt (Purpose): State Fair Buttons
Mailing Address 925 Robert St S	
City State Zip Code Saint Paul MN 55118-1443	

Outstanding Balance Beginning This Period <input type="text" value="1194.44"/>	<b>Transaction ID : D537258</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1194.44"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="4397.77"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> 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)	PAGE 159 OF 229
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tony Doom Supply Inc</b>	Nature of Debt (Purpose): T'Shirts
Mailing Address 432 Legion Field Rd	
City State Zip Code Marshall MN 56258	

Outstanding Balance Beginning This Period 1858.56	<b>Transaction ID : D548108</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1858.56

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Union House</b>	Nature of Debt (Purpose): State Fair T'Shirts
Mailing Address 26796 Felton Ave	
City State Zip Code Wyoming MN 55092-9609	

Outstanding Balance Beginning This Period 3436.50	<b>Transaction ID : D537259</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3436.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	5295.06
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	88179.53
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	88179.53

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Minnesota Democratic-Farmer-Labor Party</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00025254
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>Blueprint Interactive</b>	Date of Public Distribution/Dissemination <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> 10 / 02 / 2014
Mailing Address 1155 Connecticut Ave NW, Suite 601	Amount <span style="margin-left: 20px;">5233.00</span>
City Washington State DC Zip Code 20036	<b>Transaction ID : D546687</b> Date of Disbursement or Obligation <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> 10 / 02 / 2014
Purpose of Expenditure Facebook Posts to begin 10/2/2014	Category/Type <span style="margin-left: 20px;">004</span>
Name of Federal Candidate Stewart Mills	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MN
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">25466.00</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Blueprint Interactive</b>	Date of Public Distribution/Dissemination <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> 10 / 08 / 2014
Mailing Address 1155 Connecticut Ave NW, Suite 601	Amount <span style="margin-left: 20px;">5233.00</span>
City Washington State DC Zip Code 20036	<b>Transaction ID : D546691</b> Date of Disbursement or Obligation <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> 10 / 08 / 2014
Purpose of Expenditure Facebook Posts to begin 10/8/2014	Category/Type <span style="margin-left: 20px;">004</span>
Name of Federal Candidate Stewart Mills	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MN
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">25466.00</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="margin-left: 20px;">10466.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="margin-left: 20px;"></span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="margin-left: 20px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Thomas Hamilton*  
Signature

[Electronically Filed]

Date M M M / D D D / Y Y Y Y Y Y  
10 / 21 / 2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Minnesota Democratic-Farmer-Labor Party</b>		FEC IDENTIFICATION NUMBER <b>C C00025254</b>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>Canal Partners Media</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 16 / 2014</b>	
Mailing Address 1027 33rd St NW		Amount <b>7500.00</b>	
City Washington	State DC	Zip Code 20007	Transaction ID : <b>D550524</b>
Purpose of Expenditure Radio Ads to begin 10/16/2014		Category/Type <b>004</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 15 / 2014</b>
Name of Federal Candidate Stewart Mills		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>08</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>MN</b>
Calendar Year-To-Date Per Election for Office Sought		<b>25466.00</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Canal Partners Media</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 16 / 2014</b>	
Mailing Address 1027 33rd St NW		Amount <b>7500.00</b>	
City Washington	State DC	Zip Code 20007	Transaction ID : <b>D550609</b>
Purpose of Expenditure Radio Ads to begin 10/16/2014		Category/Type <b>004</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 15 / 2014</b>
Name of Federal Candidate RICHARD MICHAEL NOLAN		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>08</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>MN</b>
Calendar Year-To-Date Per Election for Office Sought		<b>25466.00</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<b>15000.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	
(c) <b>TOTAL</b> Independent Expenditures.....▶	<b>25466.00</b>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Thomas Hamilton*  
Signature

[Electronically Filed]

Date **10 / 21 / 2014**

**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.

<p>ACTIVITY OR EVENT IDENTIFIER 2014 HHH-Mondale Dinner</p> <p>ACTIVITY IS:  <input checked="" type="checkbox"/> Fundraising    <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS:  <input type="checkbox"/> New    <input type="checkbox"/> Revised    <input checked="" type="checkbox"/> Same as Previously Reported  <b>Transaction ID : R905</b></p>	<p>FEDERAL %  <input type="text" value="75.00"/> %</p>	<p>NONFEDERAL %  <input type="text" value="25.00"/> %</p>
<p>ACTIVITY OR EVENT IDENTIFIER Founders Dinner 2014</p> <p>ACTIVITY IS:  <input checked="" type="checkbox"/> Fundraising    <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS:  <input type="checkbox"/> New    <input type="checkbox"/> Revised    <input checked="" type="checkbox"/> Same as Previously Reported  <b>Transaction ID : R904</b></p>	<p>FEDERAL %  <input type="text" value="45.00"/> %</p>	<p>NONFEDERAL %  <input type="text" value="55.00"/> %</p>
<p>ACTIVITY OR EVENT IDENTIFIER</p> <p>ACTIVITY IS:  <input type="checkbox"/> Fundraising    <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS:  <input type="checkbox"/> New    <input type="checkbox"/> Revised    <input type="checkbox"/> Same as Previously Reported</p>	<p>FEDERAL %  <input type="text"/> %</p>	<p>NONFEDERAL %  <input type="text"/> %</p>
<p>ACTIVITY OR EVENT IDENTIFIER</p> <p>ACTIVITY IS:  <input type="checkbox"/> Fundraising    <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS:  <input type="checkbox"/> New    <input type="checkbox"/> Revised    <input type="checkbox"/> Same as Previously Reported</p>	<p>FEDERAL %  <input type="text"/> %</p>	<p>NONFEDERAL %  <input type="text"/> %</p>
<p>ACTIVITY OR EVENT IDENTIFIER</p> <p>ACTIVITY IS:  <input type="checkbox"/> Fundraising    <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS:  <input type="checkbox"/> New    <input type="checkbox"/> Revised    <input type="checkbox"/> Same as Previously Reported</p>	<p>FEDERAL %  <input type="text"/> %</p>	<p>NONFEDERAL %  <input type="text"/> %</p>
<p>ACTIVITY OR EVENT IDENTIFIER</p> <p>ACTIVITY IS:  <input type="checkbox"/> Fundraising    <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS:  <input type="checkbox"/> New    <input type="checkbox"/> Revised    <input type="checkbox"/> Same as Previously Reported</p>	<p>FEDERAL %  <input type="text"/> %</p>	<p>NONFEDERAL %  <input type="text"/> %</p>

**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 Share of Admin	MM / DD / YYYY 10 / 01 / 2014	38990.46

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	38990.46
<b>Transaction ID : T3299</b>	
<b>ii) Generic Voter Drive</b> .....	
<b>iii) Exempt Activities</b> .....	
<b>iv) Direct Fundraising (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
<b>v) Direct Candidate Support (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
<b>vi) Public Communications Referring Only to Party (Made by PAC)</b> .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> 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 Share of Admin	MM / DD / YYYY 10 / 03 / 2014	42592.52

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	39886.52
<b>Transaction ID : T3300</b>	
<b>ii) Generic Voter Drive</b> .....	
<b>iii) Exempt Activities</b> .....	
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)	
a) Founders Dinner 2014	2706.00
<b>Transaction ID : T3301</b>	
b) .....	
c) Total Amount Transferred For Direct Fundraising .....	2706.00
<b>v) Direct Candidate Support</b> (List Activity or Event Identifier)	
a) .....	
b) .....	
c) Total Amount Transferred For Direct Candidate Support.....	
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC) .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> 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 Share of Admin	MM / DD / YYYY 10 / 03 / 2014	11500.00

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	11500.00
<b>Transaction ID : T3302</b>	
<b>ii) Generic Voter Drive</b> .....	
<b>iii) Exempt Activities</b> .....	
<b>iv) Direct Fundraising (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
<b>v) Direct Candidate Support (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
<b>vi) Public Communications Referring Only to Party (Made by PAC)</b> .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> 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 Share of Admin	MM / DD / YYYY 10 / 07 / 2014	395.00

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	395.00
<b>Transaction ID : T3303</b>	
<b>ii) Generic Voter Drive</b> .....	
<b>iii) Exempt Activities</b> .....	
<b>iv) Direct Fundraising (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
<b>v) Direct Candidate Support (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
<b>vi) Public Communications Referring Only to Party (Made by PAC)</b> .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> 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 Share of Admin	MM / DD / YYYY 10 / 06 / 2014	12719.00

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	12719.00
<b>Transaction ID : T3304</b>	
<b>ii) Generic Voter Drive</b> .....	
<b>iii) Exempt Activities</b> .....	
<b>iv) Direct Fundraising (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
<b>v) Direct Candidate Support (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
<b>vi) Public Communications Referring Only to Party (Made by PAC)</b> .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> 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 Share of Admin	MM / DD / YYYY 10 / 07 / 2014	24815.48

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	24815.48
<b>Transaction ID : T3305</b>	
<b>ii) Generic Voter Drive</b> .....	
<b>iii) Exempt Activities</b> .....	
<b>iv) Direct Fundraising (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
<b>v) Direct Candidate Support (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
<b>vi) Public Communications Referring Only to Party (Made by PAC)</b> .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> 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 Share of Admin	MM / DD / YYYY 10 / 08 / 2014	9627.02

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	9627.02
<b>Transaction ID : T3306</b>	
<b>ii) Generic Voter Drive</b> .....	
<b>iii) Exempt Activities</b> .....	
<b>iv) Direct Fundraising (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
<b>v) Direct Candidate Support (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
<b>vi) Public Communications Referring Only to Party (Made by PAC)</b> .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> 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 Share of Admin	MM / DD / YYYY 10 / 08 / 2014	474.00

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	474.00
<b>Transaction ID : T3307</b>	
<b>ii) Generic Voter Drive</b> .....	
<b>iii) Exempt Activities</b> .....	
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
<b>v) Direct Candidate Support</b> (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC) .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> 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 Share of Admin	MM / DD / YYYY 10 / 08 / 2014	1532.04

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	1532.04
<b>Transaction ID : T3308</b>	
<b>ii) Generic Voter Drive</b> .....	
<b>iii) Exempt Activities</b> .....	
<b>iv) Direct Fundraising (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
<b>v) Direct Candidate Support (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support .....	
<b>vi) Public Communications Referring Only to Party (Made by PAC)</b> .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> 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 Share of Admin	MM / DD / YYYY 10 / 14 / 2014	18644.00

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	18644.00
<b>Transaction ID : T3309</b>	
<b>ii) Generic Voter Drive</b> .....	
<b>iii) Exempt Activities</b> .....	
<b>iv) Direct Fundraising (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
<b>v) Direct Candidate Support (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
<b>vi) Public Communications Referring Only to Party (Made by PAC)</b> .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> 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 Share of Admin	MM / DD / YYYY 10 / 15 / 2014	9875.00

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	9875.00
<b>Transaction ID : T3310</b>	
<b>ii) Generic Voter Drive</b> .....	
<b>iii) Exempt Activities</b> .....	
<b>iv) Direct Fundraising (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
<b>v) Direct Candidate Support (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
<b>vi) Public Communications Referring Only to Party (Made by PAC)</b> .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	168458.52
<b>TOTAL</b> This Period (Generic Voter Drive) .....	0.00
<b>TOTAL</b> This Period (Exempt Activities) .....	0.00
<b>TOTAL</b> This Period (Direct Fundraising) .....	2706.00
<b>TOTAL</b> This Period (Direct Candidate Support) .....	0.00
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	0.00
<b>TOTAL</b> This Period (Total Amount Transferred).....	171164.52

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Disbursement for 1025 London Road LLC. Transaction ID: D550952. Allocated Activity: Administrative. Date: 10/14/2014. Total Amount: 2500.00.

Form B: Disbursement for Aaron Wood. Transaction ID: D546710. Allocated Activity: Administrative. Date: 10/03/2014. Total Amount: 993.83.

Form C: Disbursement for Alfred Eze. Transaction ID: D546629. Allocated Activity: Administrative. Date: 10/03/2014. Total Amount: 593.36.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE 858.31, NONFEDERAL SHARE 3228.88, TOTAL AMOUNT 4087.19.

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

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Disbursement for Andrea Whitaker. Transaction ID: D546603. Allocated Activity: Administrative. Date: 10/03/2014. Total Amount: 1026.71.

Form B: Disbursement for Andrew Knaak. Transaction ID: D546589. Allocated Activity: Administrative. Date: 10/03/2014. Total Amount: 1221.80.

Form C: Disbursement for Andrew Virden. Transaction ID: D546708. Allocated Activity: Administrative. Date: 10/03/2014. Total Amount: 1092.69.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE 701.65, NONFEDERAL SHARE 2639.55, TOTAL AMOUNT 3341.20.

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

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Andrew Virden, Transaction ID: D550966. Allocated Activity or Event: Administrative. Date: 10/14/2014. Total Amount: 341.48.

Form B: Anthony McGlinch, Transaction ID: D546871. Allocated Activity or Event: Administrative. Date: 10/03/2014. Total Amount: 961.82.

Form C: Anthony Pico, Transaction ID: D546700. Allocated Activity or Event: Administrative. Date: 10/03/2014. Total Amount: 928.82.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 468.74, 1763.38, 2232.12.

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: H4

Transaction ID : D550966

Verizon PO Box 4002 Acworth, GA 30101--\$50.00 (Cell Phone), Mileage--\$291.48

Form/Schedule:

Transaction ID:

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Full Name (Last, First, Middle Initial) Transaction ID : D546707
Allocated Activity or Event:
Anthony Sterle
Mailing Address 1451 111th Dr NE Unit D
City Minneapolis State MN Zip Code 55449
Purpose of Disbursement: Payroll
Activity or Event Identifier: Administrative
FEDERAL SHARE 250.02 NONFEDERAL SHARE 940.55 TOTAL AMOUNT 1190.57

Form B: Full Name (Last, First, Middle Initial) Transaction ID : D550043
Allocated Activity or Event:
ArcStone
Mailing Address 104 W Franklin Ave
City Minneapolis State MN Zip Code 55404
Purpose of Disbursement: Web Page Design
Activity or Event Identifier: Administrative
FEDERAL SHARE 432.34 NONFEDERAL SHARE 1626.41 TOTAL AMOUNT 2058.75

Form C: Full Name (Last, First, Middle Initial) Transaction ID : D546679
Allocated Activity or Event:
Babatope Adedayo
Mailing Address 2835 Rice St Apt 921
City Roseville State MN Zip Code 55113
Purpose of Disbursement: Payroll
Activity or Event Identifier: Administrative
FEDERAL SHARE 230.75 NONFEDERAL SHARE 868.07 TOTAL AMOUNT 1098.82

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 913.11, 3435.03, 4348.14

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Babatope Adedayo, Transaction ID: D550963. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Cell Phone), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (10/14/2014), and a summary table showing Federal Share (10.50), NonFederal Share (39.50), and Total Amount (50.00).

Form B: Babatope Adedayo, Transaction ID: D550964. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Office Supplies), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (10/14/2014), and a summary table showing Federal Share (6.79), NonFederal Share (25.52), and Total Amount (32.31).

Form C: Ben Baglio, Transaction ID: D546681. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Payroll), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (10/03/2014), and a summary table showing Federal Share (201.98), NonFederal Share (759.84), and Total Amount (961.82).

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE (219.27) + NONFEDERAL SHARE (824.86) = TOTAL AMOUNT (1044.13)

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

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: H4

Transaction ID : D550963

TMobile PO Box 97380 Albuquerque, NM 87176--\$50.00 (Cell Phone)

Form/Schedule: H4

Transaction ID: D550964

Target 2500 E Lake St Minneapolis, MN 55406--\$32.31 (Office Supplies)

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Brandon Hanson, Transaction ID: D550017. Allocated Activity or Event: Administrative. Date: 10/01/2014. Purpose: Training Mileage. Amounts: FEDERAL SHARE 52.50, NONFEDERAL SHARE 197.50, TOTAL AMOUNT 250.00.

Form B: Brennan Meier, Transaction ID: D546697. Allocated Activity or Event: Administrative. Date: 10/03/2014. Purpose: Payroll. Amounts: FEDERAL SHARE 208.70, NONFEDERAL SHARE 785.12, TOTAL AMOUNT 993.82.

Form C: Brian Kaul, Transaction ID: D546693. Allocated Activity or Event: Administrative. Date: 10/03/2014. Purpose: Payroll. Amounts: FEDERAL SHARE 208.70, NONFEDERAL SHARE 785.12, TOTAL AMOUNT 993.82.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 469.90, 1767.74, 2237.64.

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Full Name (Last, First, Middle Initial) Transaction ID : D546196 Allocated Activity or Event: Administrative [checked] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC [ ] Allocated Activity or Event Year-To-Date 1959881.43 Date 10/03/2014 Purpose of Disbursement: Payroll Activity or Event Identifier: Administrative FEDERAL SHARE 525.64 NONFEDERAL SHARE 1977.40 TOTAL AMOUNT 2503.04

Form B: Full Name (Last, First, Middle Initial) Transaction ID : D550022 Allocated Activity or Event: Administrative [checked] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC [ ] Allocated Activity or Event Year-To-Date 1959881.43 Date 10/03/2014 Purpose of Disbursement: Field Office Rent Activity or Event Identifier: Administrative FEDERAL SHARE 451.50 NONFEDERAL SHARE 1698.50 TOTAL AMOUNT 2150.00

Form C: Full Name (Last, First, Middle Initial) Transaction ID : D550932 Allocated Activity or Event: Administrative [checked] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC [ ] Allocated Activity or Event Year-To-Date 1959881.43 Date 10/14/2014 Purpose of Disbursement: Field Office Phones & Internet Activity or Event Identifier: Administrative FEDERAL SHARE 187.62 NONFEDERAL SHARE 705.81 TOTAL AMOUNT 893.43

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 1164.76, 4381.71, 5546.47

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [ ], [ ], [ ]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Charter Communication. Transaction ID: D550933. Allocated Activity or Event: Administrative. Date: 10/14/2014. Total Amount: 80.00.

Form B: Christopher McCall. Transaction ID: D546593. Allocated Activity or Event: Administrative. Date: 10/03/2014. Total Amount: 1643.14.

Form C: Colette Millard. Transaction ID: D546698. Allocated Activity or Event: Administrative. Date: 10/03/2014. Total Amount: 961.82.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 563.84, 2121.12, 2684.96.

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) Transaction ID : D550957
Crossroads Of Oakdale #2
Mailing Address 7300 Hudson Blvd, #210
City Saint Paul State MN Zip Code 55128
Purpose of Disbursement: Field Office Rent
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 1959881.43
Date 10 / 14 / 2014
FEDERAL SHARE 420.00 + NONFEDERAL SHARE 1580.00 = TOTAL AMOUNT 2000.00

B. Full Name (Last, First, Middle Initial) Transaction ID : D550936
Crow Wing County DFL
Mailing Address PO Box 254
City Brainerd State MN Zip Code 56401
Purpose of Disbursement: Field Office Rent
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 1959881.43
Date 10 / 14 / 2014
FEDERAL SHARE 97.02 + NONFEDERAL SHARE 364.98 = TOTAL AMOUNT 462.00

C. Full Name (Last, First, Middle Initial) Transaction ID : D546680
Daniel Aizpuru
Mailing Address 421 6th St SE Apt 1
City Minneapolis State MN Zip Code 55414
Purpose of Disbursement: Payroll
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 1959881.43
Date 10 / 03 / 2014
FEDERAL SHARE 201.98 + NONFEDERAL SHARE 759.84 = TOTAL AMOUNT 961.82

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 719.00, 2704.82, 3423.82

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: (empty), (empty), (empty)

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : D546203</b> <b>Daniel Bergmann</b>		Allocated Activity or Event: <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 2226 Garfield Ave Apt 102		Allocated Activity or Event Year-To-Date 1959881.43	
City State Zip Code Minneapolis MN 55405	Category/ Type	Date <input type="text" value="10"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Payroll		FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 245.92 + 925.12 = 1171.04	
Activity or Event Identifier: <b>Administrative</b>			

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : D546689</b> <b>Daniel Dodge</b>		Allocated Activity or Event: <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 1919 Silver Bell Road Apt 209		Allocated Activity or Event Year-To-Date 1959881.43	
City State Zip Code Saint Paul MN 55122	Category/ Type	Date <input type="text" value="10"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Payroll		FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 199.25 + 749.57 = 948.82	
Activity or Event Identifier: Administrative			

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : D550965</b> <b>Daniel Dodge</b>		Allocated Activity or Event: <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 1919 Silver Bell Road Apt 209		Allocated Activity or Event Year-To-Date 1959881.43	
City State Zip Code Saint Paul MN 55122	Category/ Type	Date <input type="text" value="10"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Mileage		FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 62.62 + 235.58 = 298.20	
Activity or Event Identifier: Administrative			

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
507.79		1910.27		2418.06

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Disbursement for David Bard, Transaction ID D546587. Includes fields for Name, Address, City/State/Zip, Purpose (Payroll), Activity Identifier (Administrative), and Allocated Activity (Administrative checked). Totals: FEDERAL SHARE 196.30, NONFEDERAL SHARE 738.48, TOTAL AMOUNT 934.78.

Form B: Disbursement for David Weinelick, Transaction ID D546638. Includes fields for Name, Address, City/State/Zip, Purpose (Payroll), Activity Identifier (Administrative), and Allocated Activity (Administrative checked). Totals: FEDERAL SHARE 437.44, NONFEDERAL SHARE 1645.59, TOTAL AMOUNT 2083.03.

Form C: Disbursement for Drake Bank Federal, Transaction ID D550071. Includes fields for Name, Address, City/State/Zip, Purpose (Wire Transfer Fee), Activity Identifier (Administrative), and Allocated Activity (Administrative checked). Totals: FEDERAL SHARE 4.20, NONFEDERAL SHARE 15.80, TOTAL AMOUNT 20.00.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE 637.94, NONFEDERAL SHARE 2399.87, TOTAL AMOUNT 3037.81.

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

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) <b>Drake Bank Federal</b>		Transaction ID : <b>D550072</b>	Allocated Activity or Event: <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 60 Plato Blvd E			Allocated Activity or Event Year-To-Date 1959881.43	
City Saint Paul	State MN	Zip Code 55107-1820	Date 10 / 02 / 2014	
Purpose of Disbursement: Wire Transfer Fee		Category/ Type	Date 10 / 02 / 2014	
Activity or Event Identifier: <b>Administrative</b>				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
2.10			7.90	10.00

B. Full Name (Last, First, Middle Initial) <b>Drake Bank Federal</b>		Transaction ID : <b>D547182</b>	Allocated Activity or Event: <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 60 Plato Blvd E			Allocated Activity or Event Year-To-Date 1959881.43	
City Saint Paul	State MN	Zip Code 55107-1820	Date 10 / 03 / 2014	
Purpose of Disbursement: Bank Charges		Category/ Type	Date 10 / 03 / 2014	
Activity or Event Identifier: Administrative				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
14.62			54.98	69.60

C. Full Name (Last, First, Middle Initial) <b>Drake Bank Federal</b>		Transaction ID : <b>D550021</b>	Allocated Activity or Event: <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 60 Plato Blvd E			Allocated Activity or Event Year-To-Date 1959881.43	
City Saint Paul	State MN	Zip Code 55107-1820	Date 10 / 03 / 2014	
Purpose of Disbursement: Commercial Loan Payment for Bus Purchase		Category/ Type	Date 10 / 03 / 2014	
Activity or Event Identifier: Administrative				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
534.64			2011.28	2545.92

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
551.36		2074.16		2625.52

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Full Name (Last, First, Middle Initial) Drake Bank Federal, Transaction ID : D550375, Allocated Activity or Event: Administrative, Date: 10/03/2014, FEDERAL SHARE: 4.20, NONFEDERAL SHARE: 15.80, TOTAL AMOUNT: 20.00

Form B: Full Name (Last, First, Middle Initial) Drake Bank Federal, Transaction ID : D552240, Allocated Activity or Event: Administrative, Date: 10/15/2014, FEDERAL SHARE: 4.20, NONFEDERAL SHARE: 15.80, TOTAL AMOUNT: 20.00

Form C: Full Name (Last, First, Middle Initial) Drake Bank Federal, Transaction ID : D552241, Allocated Activity or Event: Administrative, Date: 10/15/2014, FEDERAL SHARE: 4.20, NONFEDERAL SHARE: 15.80, TOTAL AMOUNT: 20.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE (12.60), NONFEDERAL SHARE (47.40), TOTAL AMOUNT (60.00)

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Full Name (Last, First, Middle Initial) Drake Bank Federal, Transaction ID : D552242, Allocated Activity or Event: Administrative, Date 10/15/2014, FEDERAL SHARE 4.20, NONFEDERAL SHARE 15.80, TOTAL AMOUNT 20.00

Form B: Full Name (Last, First, Middle Initial) Drake Bank Federal, Transaction ID : D552243, Allocated Activity or Event: Administrative, Date 10/15/2014, FEDERAL SHARE 4.20, NONFEDERAL SHARE 15.80, TOTAL AMOUNT 20.00

Form C: Full Name (Last, First, Middle Initial) Drake Bank Federal, Transaction ID : D552244, Allocated Activity or Event: Administrative, Date 10/15/2014, FEDERAL SHARE 4.20, NONFEDERAL SHARE 15.80, TOTAL AMOUNT 20.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE (12.60), NONFEDERAL SHARE (47.40), TOTAL AMOUNT (60.00)

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Full Name (Last, First, Middle Initial) Drake Bank Federal, Transaction ID : D550381, Allocated Activity or Event: Administrative, Date 10/06/2014, FEDERAL SHARE 2.10, NONFEDERAL SHARE 7.90, TOTAL AMOUNT 10.00

Form B: Full Name (Last, First, Middle Initial) Drake Bank Federal, Transaction ID : D550382, Allocated Activity or Event: Administrative, Date 10/07/2014, FEDERAL SHARE 4.20, NONFEDERAL SHARE 15.80, TOTAL AMOUNT 20.00

Form C: Full Name (Last, First, Middle Initial) Drake Bank Federal, Transaction ID : D550405, Allocated Activity or Event: Administrative, Date 10/08/2014, FEDERAL SHARE 4.20, NONFEDERAL SHARE 15.80, TOTAL AMOUNT 20.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE (10.50), NONFEDERAL SHARE (39.50), TOTAL AMOUNT (50.00)

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Full Name (Last, First, Middle Initial) Drake Bank Federal, Transaction ID : D550415, Allocated Activity or Event: Administrative, Date: 10/09/2014, FEDERAL SHARE: 4.20, NONFEDERAL SHARE: 15.80, TOTAL AMOUNT: 20.00

Form B: Full Name (Last, First, Middle Initial) Drake Bank Federal, Transaction ID : D550417, Allocated Activity or Event: Administrative, Date: 10/09/2014, FEDERAL SHARE: 4.20, NONFEDERAL SHARE: 15.80, TOTAL AMOUNT: 20.00

Form C: Full Name (Last, First, Middle Initial) Drake Bank Federal, Transaction ID : D552239, Allocated Activity or Event: Administrative, Date: 10/15/2014, FEDERAL SHARE: 4.20, NONFEDERAL SHARE: 15.80, TOTAL AMOUNT: 20.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE (12.60), NONFEDERAL SHARE (47.40), TOTAL AMOUNT (60.00)

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Full Name (Last, First, Middle Initial) Drake Bank Federal, Transaction ID : D550450, Allocated Activity or Event: Administrative, Date 10/03/2014, Purpose of Disbursement: Wire Transfer Fee, Activity or Event Identifier: Administrative. Summary: FEDERAL SHARE 4.20, NONFEDERAL SHARE 15.80, TOTAL AMOUNT 20.00.

Form B: Full Name (Last, First, Middle Initial) Drake Bank Federal, Transaction ID : D550451, Allocated Activity or Event: Administrative, Date 10/03/2014, Purpose of Disbursement: Wire Transfer Fee, Activity or Event Identifier: Administrative. Summary: FEDERAL SHARE 4.20, NONFEDERAL SHARE 15.80, TOTAL AMOUNT 20.00.

Form C: Full Name (Last, First, Middle Initial) Drake Bank Federal, Transaction ID : D550458, Allocated Activity or Event: Administrative, Date 10/03/2014, Purpose of Disbursement: Bank Charges, Activity or Event Identifier: Administrative. Summary: FEDERAL SHARE 366.47, NONFEDERAL SHARE 1378.63, TOTAL AMOUNT 1745.10.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 374.87, 1410.23, 1785.10.

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Full Name (Last, First, Middle Initial) Drake Bank Federal, Transaction ID : D550459, Allocated Activity or Event: Administrative, Date: 10/03/2014, FEDERAL SHARE: 335.50, NONFEDERAL SHARE: 1262.11, TOTAL AMOUNT: 1597.61

Form B: Full Name (Last, First, Middle Initial) Drake Bank Federal, Transaction ID : D550460, Allocated Activity or Event: Administrative, Date: 10/03/2014, FEDERAL SHARE: 47.58, NONFEDERAL SHARE: 178.97, TOTAL AMOUNT: 226.55

Form C: Full Name (Last, First, Middle Initial) Drake Bank Federal, Transaction ID : D550379, Allocated Activity or Event: Administrative, Date: 10/06/2014, FEDERAL SHARE: 0.84, NONFEDERAL SHARE: 3.16, TOTAL AMOUNT: 4.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE (383.92), NONFEDERAL SHARE (1444.24), TOTAL AMOUNT (1828.16)

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: EFTPS Fed Tax Payment. Transaction ID: D550461. Allocated Activity: Administrative. Date: 10/06/2014. Total Amount: 23116.64.

Form B: Ellen C Anderson. Transaction ID: D546628. Allocated Activity: Administrative. Date: 10/03/2014. Total Amount: 1221.81.

Form C: Ellen Perrault. Transaction ID: D546639. Allocated Activity: Administrative. Date: 10/03/2014. Total Amount: 1730.13.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 5474.40, 20594.18, 26068.58.

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Emily Weber, Transaction ID: D546600. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Payroll), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (10/03/2014), and a summary table showing Federal Share (265.82), NonFederal Share (999.99), and Total Amount (1265.81).

Form B: Emma Connell, Transaction ID: D546686. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Payroll), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (10/03/2014), and a summary table showing Federal Share (215.21), NonFederal Share (809.61), and Total Amount (1024.82).

Form C: Erik Q Anderson, Transaction ID: D546586. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Payroll), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (10/03/2014), and a summary table showing Federal Share (256.58), NonFederal Share (965.23), and Total Amount (1221.81).

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE (737.61) + NONFEDERAL SHARE (2774.83) = TOTAL AMOUNT (3512.44)

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

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Frederick Schaefer</b>		<b>Transaction ID : D546704</b>	<b>Allocated Activity or Event:</b> <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 957 Flandrau St			Allocated Activity or Event Year-To-Date 1959881.43	
City Saint Paul	State MN	Zip Code 55106-3638	Date 10 / 03 / 2014	
Purpose of Disbursement: Payroll		Category/ Type	Date	
Activity or Event Identifier: <b>Administrative</b>			10 / 03 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	
328.44			1235.56	
		=	TOTAL AMOUNT	
			1564.00	

<b>B. Full Name (Last, First, Middle Initial)</b> <b>HealthPartners</b>		<b>Transaction ID : D550032</b>	<b>Allocated Activity or Event:</b> <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 8170 33rd Ave S			Allocated Activity or Event Year-To-Date 1959881.43	
City Bloomington	State MN	Zip Code 55425-4516	Date 10 / 08 / 2014	
Purpose of Disbursement: Health Insurance		Category/ Type	Date	
Activity or Event Identifier: Administrative			10 / 08 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	
2558.95			9626.55	
		=	TOTAL AMOUNT	
			12185.50	

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Heidi Kraus Kaplan</b>		<b>Transaction ID : D546633</b>	<b>Allocated Activity or Event:</b> <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 2603 Newton Ave S			Allocated Activity or Event Year-To-Date 1959881.43	
City Minneapolis	State MN	Zip Code 55405-2436	Date 10 / 03 / 2014	
Purpose of Disbursement: Payroll		Category/ Type	Date	
Activity or Event Identifier: Administrative			10 / 03 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	
177.74			668.65	
		=	TOTAL AMOUNT	
			846.39	

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3065.13		11530.76		14595.89

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Hoch & Hoch, Transaction ID: D550942. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Field Office Rent), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (10/14/2014), and a summary table showing Federal Share (657.95), NonFederal Share (2475.14), and Total Amount (3133.09).

Form B: Innovative Office Solutions, Transaction ID: D550445. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Office Supplies), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (10/08/2014), and a summary table showing Federal Share (407.26), NonFederal Share (1532.06), and Total Amount (1939.32).

Form C: Jacquelyn Clinton, Transaction ID: D546685. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Payroll), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (10/03/2014), and a summary table showing Federal Share (355.35), NonFederal Share (1336.80), and Total Amount (1692.15).

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE (1420.56) + NONFEDERAL SHARE (5344.00) = TOTAL AMOUNT (6764.56)

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

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Jaime Makepeace, Transaction ID: D546592. Allocated Activity: Administrative. Date: 10/03/2014. Total Amount: 2109.50.

Form B: Jeff & Joni Eichorn, Transaction ID: D550945. Allocated Activity: Administrative. Date: 10/14/2014. Total Amount: 1800.00.

Form C: Jennifer Maes, Transaction ID: D546591. Allocated Activity: Administrative. Date: 10/03/2014. Total Amount: 1221.81.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 1077.58, 4053.73, 5131.31.

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: JMM Properties LLC, Transaction ID: D550943. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Field Office Rent), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (10/14/2014), and a summary table showing Federal Share (840.00), NonFederal Share (3160.00), and Total Amount (4000.00).

Form B: Joane McAfee, Transaction ID: D546696. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Payroll), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (10/03/2014), and a summary table showing Federal Share (201.98), NonFederal Share (759.84), and Total Amount (961.82).

Form C: Jordan Hagert, Transaction ID: D546692. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Payroll), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (10/03/2014), and a summary table showing Federal Share (208.70), NonFederal Share (785.12), and Total Amount (993.82).

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE (1250.68) + NONFEDERAL SHARE (4704.96) = TOTAL AMOUNT (5955.64)

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

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Full Name (Last, First, Middle Initial) Joseph Schulte, Transaction ID : D546706, Allocated Activity or Event: Administrative, Date: 10/03/2014, Purpose of Disbursement: Payroll, Activity or Event Identifier: Administrative. Summary: FEDERAL SHARE 208.70, NONFEDERAL SHARE 785.12, TOTAL AMOUNT 993.82.

Form B: Full Name (Last, First, Middle Initial) Kara Osterman, Transaction ID : D546596, Allocated Activity or Event: Administrative, Date: 10/03/2014, Purpose of Disbursement: Payroll, Activity or Event Identifier: Administrative. Summary: FEDERAL SHARE 194.79, NONFEDERAL SHARE 732.78, TOTAL AMOUNT 927.57.

Form C: Full Name (Last, First, Middle Initial) Katelynn Snyder, Transaction ID : D546598, Allocated Activity or Event: Administrative, Date: 10/03/2014, Purpose of Disbursement: Payroll, Activity or Event Identifier: Administrative. Summary: FEDERAL SHARE 265.19, NONFEDERAL SHARE 997.61, TOTAL AMOUNT 1262.80.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 668.68, 2515.51, 3184.19.

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values are empty.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Kelber Catering Convention Ctr Foods. Transaction ID: D552247. Allocated Activity or Event: Fundraising. Date: 10/03/2014. Total Amount: 32000.00.

Form B: Larry Hoffman. Transaction ID: D550031. Allocated Activity or Event: Administrative. Date: 10/07/2014. Total Amount: 1500.00.

Form C: Liban Adan Abdulkadir. Transaction ID: D546678. Allocated Activity or Event: Administrative. Date: 10/03/2014. Total Amount: 961.82.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 14916.98, 19544.84, 34461.82.

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Libby Keefe, Transaction ID: D546632. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Payroll), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (10/03/2014), and a summary table showing Federal Share (391.11), NonFederal Share (1471.34), and Total Amount (1862.45).

Form B: Linda McEwen, Transaction ID: D546637. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Payroll), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (10/03/2014), and a summary table showing Federal Share (283.72), NonFederal Share (1067.31), and Total Amount (1351.03).

Form C: Livingston Holdings LLC, Transaction ID: D550954. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Field Office Rent), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (10/14/2014), and a summary table showing Federal Share (451.50), NonFederal Share (1698.50), and Total Amount (2150.00).

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE (1126.33) + NONFEDERAL SHARE (4237.15) = TOTAL AMOUNT (5363.48)

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

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Marcos Carvalho, Transaction ID: D546684. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Payroll), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (10/03/2014), and a summary table showing Federal Share (201.98), NonFederal Share (759.84), and Total Amount (961.82).

Form B: Marge Hoffa, Transaction ID: D546630. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Payroll), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (10/03/2014), and a summary table showing Federal Share (138.89), NonFederal Share (522.48), and Total Amount (661.37).

Form C: Marlene Rojas Lara, Transaction ID: D546703. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Payroll), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (10/03/2014), and a summary table showing Federal Share (208.70), NonFederal Share (785.12), and Total Amount (993.82).

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE (549.57) + NONFEDERAL SHARE (2067.44) = TOTAL AMOUNT (2617.01)

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

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Matthew LaFontaine, Transaction ID: D546694. Allocated Activity or Event: Administrative. Purpose of Disbursement: Payroll. Activity or Event Identifier: Administrative. Date: 10/03/2014. Amounts: FEDERAL SHARE 208.70, NONFEDERAL SHARE 785.12, TOTAL AMOUNT 993.82.

Form B: Michael Crusinberry, Transaction ID: D546688. Allocated Activity or Event: Administrative. Purpose of Disbursement: Payroll. Activity or Event Identifier: Administrative. Date: 10/03/2014. Amounts: FEDERAL SHARE 365.64, NONFEDERAL SHARE 1375.52, TOTAL AMOUNT 1741.16.

Form C: Michael Gumbert, Transaction ID: D546690. Allocated Activity or Event: Administrative. Purpose of Disbursement: Payroll. Activity or Event Identifier: Administrative. Date: 10/03/2014. Amounts: FEDERAL SHARE 218.99, NONFEDERAL SHARE 823.83, TOTAL AMOUNT 1042.82.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 793.33, 2984.47, 3777.80.

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: (empty), (empty), (empty).

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Michael McCool</b>		<b>Transaction ID : D546635</b>	<b>Allocated Activity or Event:</b> <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 2542 Central Ave NE			Allocated Activity or Event Year-To-Date 1959881.43	
City Minneapolis	State MN	Zip Code 55418	Date 10 / 03 / 2014	
Purpose of Disbursement: Payroll		Category/ Type	Date 10 / 03 / 2014	
Activity or Event Identifier: <b>Administrative</b>				
FEDERAL SHARE		+	NONFEDERAL SHARE	
183.45			690.14	
		=	TOTAL AMOUNT	
			873.59	

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Michael McCool</b>		<b>Transaction ID : D550038</b>	<b>Allocated Activity or Event:</b> <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 2542 Central Ave NE			Allocated Activity or Event Year-To-Date 1959881.43	
City Minneapolis	State MN	Zip Code 55418	Date 10 / 10 / 2014	
Purpose of Disbursement: Mileage, Meals, Parking		Category/ Type	Date 10 / 10 / 2014	
Activity or Event Identifier: Administrative				
FEDERAL SHARE		+	NONFEDERAL SHARE	
168.33			633.24	
		=	TOTAL AMOUNT	
			801.57	

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Michael Ohama</b>		<b>Transaction ID : D546699</b>	<b>Allocated Activity or Event:</b> <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 5681 River Oak Drive			Allocated Activity or Event Year-To-Date 1959881.43	
City Savage	State MN	Zip Code 55378	Date 10 / 03 / 2014	
Purpose of Disbursement: Payroll		Category/ Type	Date 10 / 03 / 2014	
Activity or Event Identifier: Administrative				
FEDERAL SHARE		+	NONFEDERAL SHARE	
296.92			1117.00	
		=	TOTAL AMOUNT	
			1413.92	

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
648.70		2440.38		3089.08

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

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFH`ZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: H4

Transaction ID : D550038

Culver's 11025 61st St NE Albertville, MN 55301--\$9.50 (Meal), McDonald's 2085 College Way Fergus Falls, MN 56537--\$4.71 (Meal), Taco Bell 13500 Rogers Dr Rogers, MN 55374--\$7.92 (Meal), Culver's 36 28th St SE Rochester, MN 55902--\$9.35 (Meal), State of MN 75 Rev Dr. Martin Luther King Jr, Blvd St. Paul, MN 55155--\$6.60 (Parking), McDonalds 2770 N Service Rd Red Wing, MN 55066--\$6.40 (Meal), Culver's 901 Why 10 S St. Cloud, MN 56304--\$18.18 (Meal), Mileage--\$738.91

Form/Schedule:

Transaction ID:

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Minnesota Department of Revenue. Transaction ID: D546894. Allocated Activity or Event: Administrative. Date: 10/03/2014. Total Amount: 3795.00.

Form B: MinnPost Inc. Transaction ID: D552234. Allocated Activity or Event: Fundraising. Date: 10/06/2014. Total Amount: 1125.00.

Form C: Morgan Hinton. Transaction ID: D550016. Allocated Activity or Event: Administrative. Date: 10/01/2014. Total Amount: 250.00.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 1693.20, 3476.80, 5170.00.

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: New Partners Consulting Inc, Transaction ID: D550023. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and a summary table for FEDERAL SHARE, NONFEDERAL SHARE, and TOTAL AMOUNT.

Form B: New Partners Consulting Inc, Transaction ID: D552689. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and a summary table for FEDERAL SHARE, NONFEDERAL SHARE, and TOTAL AMOUNT.

Form C: NGP VAN Inc, Transaction ID: D550036. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and a summary table for FEDERAL SHARE, NONFEDERAL SHARE, and TOTAL AMOUNT.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for SUBTOTAL showing FEDERAL SHARE (1837.50), NONFEDERAL SHARE (6912.50), and TOTAL AMOUNT (8750.00).

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

Summary table for TOTAL showing FEDERAL SHARE, NONFEDERAL SHARE, and TOTAL AMOUNT fields.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: NGP VAN Inc. Transaction ID: D552690. Allocated Activity or Event: Administrative. Date: 10/08/2014. Purpose: List Maintenance. Amounts: FEDERAL SHARE 84.00, NONFEDERAL SHARE 316.00, TOTAL AMOUNT 400.00.

Form B: Nitti Sanitation Transaction ID: D550919. Allocated Activity or Event: Administrative. Date: 10/14/2014. Purpose: Field Office Trash & Recycling. Amounts: FEDERAL SHARE 23.28, NONFEDERAL SHARE 87.60, TOTAL AMOUNT 110.88.

Form C: Office Max Corporate Transaction ID: D550436. Allocated Activity or Event: Administrative. Date: 10/02/2014. Purpose: Office Supplies. Amounts: FEDERAL SHARE 38.82, NONFEDERAL SHARE 146.04, TOTAL AMOUNT 184.86.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 146.10, 549.64, 695.74.

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Office Max Corporate, Transaction ID: D550437. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Office Supplies), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (10/02/2014), and a summary table showing Federal Share (332.93), NonFederal Share (1252.47), and Total Amount (1585.40).

Form B: Office Max Corporate, Transaction ID: D550438. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Office Supplies), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (10/02/2014), and a summary table showing Federal Share (28.31), NonFederal Share (106.52), and Total Amount (134.83).

Form C: Office Max Corporate, Transaction ID: D550440. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Office Supplies), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (10/03/2014), and a summary table showing Federal Share (57.92), NonFederal Share (217.90), and Total Amount (275.82).

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE (419.16) + NONFEDERAL SHARE (1576.89) = TOTAL AMOUNT (1996.05)

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

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Office Max Corporate, Transaction ID: D550441. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Office Supplies), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (10/03/2014), and a summary table showing Federal Share (59.47), NonFederal Share (223.73), and Total Amount (283.20).

Form B: Office Max Corporate, Transaction ID: D550442. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Office Supplies), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (10/06/2014), and a summary table showing Federal Share (123.56), NonFederal Share (464.80), and Total Amount (588.36).

Form C: Office Max Corporate, Transaction ID: D550444. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Office Supplies), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (10/08/2014), and a summary table showing Federal Share (28.18), NonFederal Share (106.03), and Total Amount (134.21).

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE (211.21) + NONFEDERAL SHARE (794.56) = TOTAL AMOUNT (1005.77)

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

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Office Max, Transaction ID: D552693. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and Year-To-Date amounts.

Form B: Pamela McCrory, Transaction ID: D546584. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and Year-To-Date amounts.

Form C: Paris Vu, Transaction ID: D546709. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and Year-To-Date amounts.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE (612.65), NONFEDERAL SHARE (2304.75), TOTAL AMOUNT (2917.40).

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

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Paul Bunyan Communications, Transaction ID: D552677. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, and Allocated Activity or Event details.

Form B: Peter Schrankler, Transaction ID: D546705. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, and Allocated Activity or Event details.

Form C: Principal Life, Transaction ID: D550034. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, and Allocated Activity or Event details.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE (840.23), NONFEDERAL SHARE (2775.21), TOTAL AMOUNT (3615.44).

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

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: R&N Corporation, Transaction ID: D550951. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Field Office Rent), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (10/14/2014), and a summary table showing Federal Share (840.00), NonFederal Share (3160.00), and Total Amount (4000.00).

Form B: Ramsey County, Transaction ID: D550029. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Property Taxes), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (10/07/2014), and a summary table showing Federal Share (4894.05), NonFederal Share (18410.95), and Total Amount (23305.00).

Form C: River Bluff Strategies, Transaction ID: D550968. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Constituency Consulting), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (10/14/2014), and a summary table showing Federal Share (2625.00), NonFederal Share (9875.00), and Total Amount (12500.00).

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE (8359.05) + NONFEDERAL SHARE (31445.95) = TOTAL AMOUNT (39805.00)

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

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : D546682</b> Ryan Bauer		Allocated Activity or Event: <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 14426 Hummingbird St. NW		Allocated Activity or Event Year-To-Date 1959881.43	
City State Zip Code Andover MN 55304	Category/ Type	Date <input type="text" value="10"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Payroll			
Activity or Event Identifier: <b>Administrative</b>			
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
195.05		733.77	928.82

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : D550959</b> Ryan Bauer		Allocated Activity or Event: <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 14426 Hummingbird St. NW		Allocated Activity or Event Year-To-Date 1959881.43	
City State Zip Code Andover MN 55304	Category/ Type	Date <input type="text" value="10"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Office Supplies			
Activity or Event Identifier: Administrative			
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
5.16		19.40	24.56

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : D550962</b> Ryan Bauer		Allocated Activity or Event: <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 14426 Hummingbird St. NW		Allocated Activity or Event Year-To-Date 1959881.43	
City State Zip Code Andover MN 55304	Category/ Type	Date <input type="text" value="10"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Cell Phone			
Activity or Event Identifier: Administrative			
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
10.50		39.50	50.00

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
210.71		792.67		1003.38

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

: 97 `A-G79 @C B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFH`ZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: H4

Transaction ID : D550959

SCSU Copies Plus 720 4th Ave St. Cloud, MN 56301--\$10.72 (Office Supplies), Handyman's Hardware 604 E Germain St St. Cloud, MN 56304--\$3.84 (Office Supplies), City of St. Cloud 400 2nd St S St. Cloud, MN 56301--\$10.00 (Office Supplies)

Form/Schedule: H4

Transaction ID: D550962

TMobile 3467 River Rapids Dr Coon Rapids, MN 55448--\$50.00 (Cell Phone)

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Sanimax LLC, Transaction ID: D550931. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and a summary table for FEDERAL SHARE, NONFEDERAL SHARE, and TOTAL AMOUNT.

Form B: Sara Buesing, Transaction ID: D546588. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and a summary table for FEDERAL SHARE, NONFEDERAL SHARE, and TOTAL AMOUNT.

Form C: Sara Pschigoda, Transaction ID: D546702. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and a summary table for FEDERAL SHARE, NONFEDERAL SHARE, and TOTAL AMOUNT.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for SUBTOTAL showing FEDERAL SHARE (418.19), NONFEDERAL SHARE (1573.22), and TOTAL AMOUNT (1991.41).

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

Summary table for TOTAL showing FEDERAL SHARE, NONFEDERAL SHARE, and TOTAL AMOUNT.

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : D550938</b> <b>Senate District 19 DFL</b>		Allocated Activity or Event: <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 110 E Liberty St		Allocated Activity or Event Year-To-Date 1959881.43	
City Mankato State MN Zip Code 56001	Date <input type="text" value="10"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>		
Purpose of Disbursement: Field Office Rent	Category/Type		
Activity or Event Identifier: <b>Administrative</b>			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="52.50"/>	<input type="text" value="197.50"/>	<input type="text" value="250.00"/>	

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : D550939</b> <b>Senate District 26 DFL</b>		Allocated Activity or Event: <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 9044		Allocated Activity or Event Year-To-Date 1959881.43	
City Rochester State MN Zip Code 55904	Date <input type="text" value="10"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>		
Purpose of Disbursement: Field Office Rent	Category/Type		
Activity or Event Identifier: Administrative			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="105.00"/>	<input type="text" value="395.00"/>	<input type="text" value="500.00"/>	

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : D546597</b> <b>Shane Pavlick</b>		Allocated Activity or Event: <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 3828 Oakland Ave		Allocated Activity or Event Year-To-Date 1959881.43	
City Minneapolis State MN Zip Code 55407	Date <input type="text" value="10"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>		
Purpose of Disbursement: Payroll	Category/Type		
Activity or Event Identifier: Administrative			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="271.07"/>	<input type="text" value="1019.73"/>	<input type="text" value="1290.80"/>	

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="428.57"/>		<input type="text" value="1612.23"/>		<input type="text" value="2040.80"/>

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

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

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: St Louis County 06 DFL, Transaction ID: D550937. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Field Office Rent), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (10/14/2014), and Amounts (FEDERAL SHARE: 135.66, NONFEDERAL SHARE: 510.34, TOTAL AMOUNT: 646.00).

Form B: Stephanie Pinkalla, Transaction ID: D546701. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Payroll), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (10/03/2014), and Amounts (FEDERAL SHARE: 201.98, NONFEDERAL SHARE: 759.84, TOTAL AMOUNT: 961.82).

Form C: Stephanie Pinkalla, Transaction ID: D550967. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Cell Phone), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (10/14/2014), and Amounts (FEDERAL SHARE: 10.50, NONFEDERAL SHARE: 39.50, TOTAL AMOUNT: 50.00).

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE (348.14) + NONFEDERAL SHARE (1309.68) = TOTAL AMOUNT (1657.82)

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

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: H4

Transaction ID : D550967

Verizon PO Box 4002 Acworth, GA 30101--\$50.00 (Cell Phone)

Form/Schedule:

Transaction ID:

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Full Name (Last, First, Middle Initial) Transaction ID : D550949
The Prow Company Inc
Mailing Address 1312 7th St NW
City Rochester State MN Zip Code 55901
Purpose of Disbursement: Field Office Rent
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Date 10/14/2014
FEDERAL SHARE 315.00 NONFEDERAL SHARE 1185.00 TOTAL AMOUNT 1500.00

Form B: Full Name (Last, First, Middle Initial) Transaction ID : D546695
Thomas Logan
Mailing Address PO Box 3161
City Willmar State MN Zip Code 56201
Purpose of Disbursement: Payroll
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Date 10/03/2014
FEDERAL SHARE 208.70 NONFEDERAL SHARE 785.12 TOTAL AMOUNT 993.82

Form C: Full Name (Last, First, Middle Initial) Transaction ID : D550456
US Postmaster
Mailing Address Riverview Station
City Saint Paul State MN Zip Code 55107
Purpose of Disbursement: Postage
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Date 10/08/2014
FEDERAL SHARE 4.20 NONFEDERAL SHARE 15.79 TOTAL AMOUNT 19.99

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 527.90, 1985.91, 2513.81

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Verizon Wireless. Transaction ID: D550019. Mailing Address: PO Box 25505. City: Lehigh Valley, PA. Zip Code: 18002-5505. Purpose: Cell Phones. Activity: Administrative. Date: 10/03/2014. Amounts: FEDERAL SHARE 145.91, NONFEDERAL SHARE 548.91, TOTAL AMOUNT 694.82.

Form B: Vicki Wright. Transaction ID: D546640. Mailing Address: 1505 McCarthy Rd. City: Eagan, MN. Zip Code: 55121-1905. Purpose: Payroll. Activity: Administrative. Date: 10/03/2014. Amounts: FEDERAL SHARE 181.76, NONFEDERAL SHARE 683.76, TOTAL AMOUNT 865.52.

Form C: Empty form for disbursement entry.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 327.67, 1232.67, 1560.34.

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 56692.59, 173422.49, 230115.08.

**SCHEDULE H5 (FEC Form 3X)**

**TRANSFERS OF LEVIN FUNDS RECEIVED FOR ALLOCATED FEDERAL ELECTION ACTIVITY**

(To be used by State, District and Local Party Committees Only)

NAME OF COMMITTEE (In Full) Minnesota Democratic-Farmer-Labor Party		
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NAME OF ACCOUNT MN State Acct - L	DATE OF RECEIPT MM / DD / YYYY 10 / 14 / 2014	TOTAL AMOUNT TRANSFERRED 1111.25
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**Transaction ID : T3311**

**BREAKDOWN OF THIS TRANSFER**

**i) Voter Registration**  
Total Amount Transferred for Voter Registration..... 0.00

VOTER REGISTRATION

**ii) Voter ID**  
Total Amount Transferred for Voter ID ..... 0.00

VOTER ID

**iii) GOTV**  
Total Amount Transferred for GOTV ..... 1111.25

GOTV

**iv) Generic Campaign Activity**  
Total Amount Transferred for Generic Campaign Activity ..... 0.00

GENERIC CAMPAIGN ACTIVITY

NAME OF ACCOUNT MN State Acct - L	DATE OF RECEIPT MM / DD / YYYY 10 / 14 / 2014	TOTAL AMOUNT TRANSFERRED 59.97
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**Transaction ID : T3312**

**BREAKDOWN OF THIS TRANSFER**

**i) Voter Registration**  
Total Amount Transferred for Voter Registration..... 0.00

VOTER REGISTRATION

**ii) Voter ID**  
Total Amount Transferred for Voter ID ..... 0.00

VOTER ID

**iii) GOTV**  
Total Amount Transferred for GOTV ..... 59.97

GOTV

**iv) Generic Campaign Activity**  
Total Amount Transferred for Generic Campaign Activity ..... 0.00

GENERIC CAMPAIGN ACTIVITY

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED (Last Page Only)**

**TOTAL** This Period (Voter Registration).....

**TOTAL** This Period (Voter ID) .....

**TOTAL** This Period (GOTV).....

**TOTAL** This Period (Generic Campaign Activity).....

**TOTAL** This Period (Total Amount of Transfers Received).....

**SCHEDULE H5 (FEC Form 3X)**

**TRANSFERS OF LEVIN FUNDS RECEIVED FOR ALLOCATED FEDERAL ELECTION ACTIVITY**

(To be used by State, District and Local Party Committees Only)

NAME OF COMMITTEE (In Full) Minnesota Democratic-Farmer-Labor Party		
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NAME OF ACCOUNT MN State Acct - L	DATE OF RECEIPT MM / DD / YYYY 10 / 14 / 2014	TOTAL AMOUNT TRANSFERRED 2686.00
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BREAKDOWN OF THIS TRANSFER		<b>Transaction ID : T3313</b>
VOTER REGISTRATION		
i) <b>Voter Registration</b>	Total Amount Transferred for Voter Registration.....	0.00
VOTER ID		
ii) <b>Voter ID</b>	Total Amount Transferred for Voter ID .....	0.00
GOTV		
iii) <b>GOTV</b>	Total Amount Transferred for GOTV .....	2686.00
GENERIC CAMPAIGN ACTIVITY		
iv) <b>Generic Campaign Activity</b>	Total Amount Transferred for Generic Campaign Activity .....	0.00

NAME OF ACCOUNT MN State Acct - L	DATE OF RECEIPT MM / DD / YYYY 10 / 14 / 2014	TOTAL AMOUNT TRANSFERRED 9097.55
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BREAKDOWN OF THIS TRANSFER		<b>Transaction ID : T3314</b>
VOTER REGISTRATION		
i) <b>Voter Registration</b>	Total Amount Transferred for Voter Registration.....	0.00
VOTER ID		
ii) <b>Voter ID</b>	Total Amount Transferred for Voter ID .....	0.00
GOTV		
iii) <b>GOTV</b>	Total Amount Transferred for GOTV .....	9097.55
GENERIC CAMPAIGN ACTIVITY		
iv) <b>Generic Campaign Activity</b>	Total Amount Transferred for Generic Campaign Activity .....	0.00

<b>TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED (Last Page Only)</b>	
<b>TOTAL</b> This Period (Voter Registration).....	0.00
<b>TOTAL</b> This Period (Voter ID) .....	0.00
<b>TOTAL</b> This Period (GOTV).....	12954.77
<b>TOTAL</b> This Period (Generic Campaign Activity).....	0.00
<b>TOTAL</b> This Period (Total Amount of Transfers Received).....	12954.77

**SCHEDULE H6 (FEC Form 3X)  
DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS  
FOR ALLOCATED FEDERAL ELECTION ACTIVITY**  
(To be used by State, District and Local Party Committees Only)

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

A. Full Name (Last, First, Middle Initial) / Full Organization Name <b>Seven Corners Printing</b>			Type of Allocated Activity or Event: <input type="checkbox"/> Voter Registration <input checked="" type="checkbox"/> GOTV <input type="checkbox"/> Voter ID <input type="checkbox"/> Generic Campaign		
Transaction ID : <b>D552248H6</b>			Allocated Activity or Event Year-To-Date 31874.31		
Mailing Address 1099 Snelling Ave N			Date MM / DD / YYYY 10 / 14 / 2014		
City	State	Zip Code	Category/Type		
Saint Paul	MN	55108-2705			
Purpose of Disbursement Pledge to Vote Cards					
FEDERAL SHARE		+	LEVIN SHARE		= TOTAL AMOUNT
15.94			59.97		75.91

B. Full Name (Last, First, Middle Initial) / Full Organization Name <b>Seven Corners Printing</b>			Type of Allocated Activity or Event: <input type="checkbox"/> Voter Registration <input checked="" type="checkbox"/> GOTV <input type="checkbox"/> Voter ID <input type="checkbox"/> Generic Campaign		
Transaction ID : <b>D552250H6</b>			Allocated Activity or Event Year-To-Date 31874.31		
Mailing Address 1099 Snelling Ave N			Date MM / DD / YYYY 10 / 14 / 2014		
City	State	Zip Code	Category/Type		
Saint Paul	MN	55108-2705			
Purpose of Disbursement Pledge to Vote Cards					
FEDERAL SHARE		+	LEVIN SHARE		= TOTAL AMOUNT
295.39			1111.25		1406.64

C. Full Name (Last, First, Middle Initial) / Full Organization Name <b>Seven Corners Printing</b>			Type of Allocated Activity or Event: <input type="checkbox"/> Voter Registration <input checked="" type="checkbox"/> GOTV <input type="checkbox"/> Voter ID <input type="checkbox"/> Generic Campaign		
Transaction ID : <b>D552249H6</b>			Allocated Activity or Event Year-To-Date 31874.31		
Mailing Address 1099 Snelling Ave N			Date MM / DD / YYYY 10 / 14 / 2014		
City	State	Zip Code	Category/Type		
Saint Paul	MN	55108-2705			
Purpose of Disbursement Pledge to Vote Cards					
FEDERAL SHARE		+	LEVIN SHARE		= TOTAL AMOUNT
2418.33			9097.55		11515.88

<b>SUBTOTAL</b> of Shared Federal and Levin Activity This Page					
FEDERAL SHARE		+	LEVIN SHARE		= TOTAL AMOUNT
2729.66			10268.77		12998.43
<b>TOTAL</b> This Period (last page for each line only)(Federal share to 30(a)(i) and Levin share to 30(a)(ii))					
FEDERAL SHARE			LEVIN SHARE		TOTAL AMOUNT
<b>TOTAL</b> This Period for the Levin Share					



**SCHEDULE L (FEC Form 3X)**

**AGGREGATION PAGE: LEVIN FUNDS**

Transaction ID : SchedL1

NAME OF COMMITTEE (In Full)			
Minnesota Democratic-Farmer-Labor Party			
NAME OF ACCOUNT			
LEVIN Designated Funds			
	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE	
1. RECEIPTS FROM PERSONS			
(a) Itemized ..... (Use Schedule L-A)	12954.77	25180.72	
(b) Unitemized .....	0.00	0.00	
(c) Total .....	12954.77	25180.72	
2. OTHER RECEIPTS .....	0.00	0.00	
3. TOTAL RECEIPTS .....	12954.77	25180.72	
(Add Lines 1c and 2)			
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)			
(a) Voter Registration .....	0.00	0.00	
(b) Voter ID .....	0.00	0.00	
(c) GOTV .....	12954.77	25180.72	
(d) Generic Campaign .....	0.00	0.00	
(e) Total .....	12954.77	25180.72	
5. OTHER DISBURSEMENTS .....	0.00	0.00	
6. TOTAL DISBURSEMENTS .....	12954.77	25180.72	
(Add Lines 4e and 5)			
7. BEGINNING CASH ON HAND .....	26.57	26.57	
(for Column B, use cash as of January 1st)			
8. RECEIPTS .....	12954.77	25180.72	
(from Line 3)			
9. SUBTOTAL .....	12981.34	25207.29	
(Add Lines 7 and 8)			
10. DISBURSEMENTS .....	12954.77	25180.72	
(From Line 6)			
11. ENDING CASH ON HAND .....	26.57	26.57	
(Subtract Line 10 From Line 9)			

**SCHEDULE L-A (FEC Form 3X)**  
**ITEMIZED RECEIPTS OF LEVIN FUNDS**

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

FOR LINE NUMBER:  
(check only one)  1a  2

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NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial) / Full Organization Name

**A. Amer Fed of State County & Municipal**

Account : LEVIN

Mailing Address 1625 L St NW

City Washington State DC Zip Code 20036-5665

Name of Employer or Principal Place of Business

Occupation

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 14 / 2014

Transaction ID : C10101726

Amount of Each Receipt this Period

10000.00

Aggregate Year-to-Date

Full Name (Last, First, Middle Initial) / Full Organization Name

**B. Boilermakers Local Lodge #647**

Account : LEVIN

Mailing Address 9459 Highway 10 NW  
Ste 105

City Anoka State MN Zip Code 55303-7221

Name of Employer or Principal Place of Business

Occupation

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 14 / 2014

Transaction ID : C10101724

Amount of Each Receipt this Period

2291.91

Aggregate Year-to-Date

Full Name (Last, First, Middle Initial) / Full Organization Name

**C. BROTHERHOOD OF LOCOMOTIVE ENGINEERS AND TRAINMEN PAC FUND**

Account : LEVIN

Mailing Address 1370 ONTARIO ST

City CLEVELAND State OH Zip Code 44113

Name of Employer or Principal Place of Business

Occupation

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 14 / 2014

Transaction ID : C10101729

Amount of Each Receipt this Period

662.86

Aggregate Year-to-Date

Full Name (Last, First, Middle Initial) / Full Organization Name

**D.**

Account :

Mailing Address

City State Zip Code

Name of Employer or Principal Place of Business

Occupation

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

Aggregate Year-to-Date

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

12954.77

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

12954.77

**SCHEDULE L-B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS  
OF LEVIN FUNDS**

Use separate schedule(s) for each category of the Aggregation Page	FOR LINE NUMBER: (check only one)	PAGE 229 OF 229
	<input type="checkbox"/> 4a <input checked="" type="checkbox"/> 4c <input type="checkbox"/> 5 <input type="checkbox"/> 4b <input type="checkbox"/> 4d	

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

Full Name (Last, First, Middle Initial) / Full Organization Name <b>A. Minnesota Democratic State Acct-L</b>			Date of Disbursement M M / D D / Y Y Y Y Y Y 10 / 14 / 2014
Mailing Address 255 E Plato Blvd			<b>Transaction ID : D552711</b>
City Saint Paul	State MN	Zip Code 55107	Amount of Each Disbursement this Period 1111.25
Purpose of Disbursement Trf of Levin Funds to Federal Account			<b>Account : LEVIN</b>

Full Name (Last, First, Middle Initial) / Full Organization Name <b>B. Minnesota Democratic State Acct-L</b>			Date of Disbursement M M / D D / Y Y Y Y Y Y 10 / 14 / 2014
Mailing Address 255 E Plato Blvd			<b>Transaction ID : D552712</b>
City Saint Paul	State MN	Zip Code 55107	Amount of Each Disbursement this Period 2686.00
Purpose of Disbursement Trf of Levin Funds to Federal Account			<b>Account : LEVIN</b>

Full Name (Last, First, Middle Initial) / Full Organization Name <b>C. Minnesota Democratic State Acct-L</b>			Date of Disbursement M M / D D / Y Y Y Y Y Y 10 / 14 / 2014
Mailing Address 255 E Plato Blvd			<b>Transaction ID : D552710</b>
City Saint Paul	State MN	Zip Code 55107	Amount of Each Disbursement this Period 59.97
Purpose of Disbursement Trf of Levin Funds to Federal Account			<b>Account : LEVIN</b>

Full Name (Last, First, Middle Initial) / Full Organization Name <b>D. Minnesota Democratic State Acct-L</b>			Date of Disbursement M M / D D / Y Y Y Y Y Y 10 / 14 / 2014
Mailing Address 255 E Plato Blvd			<b>Transaction ID : D552713</b>
City Saint Paul	State MN	Zip Code 55107	Amount of Each Disbursement this Period 9097.55
Purpose of Disbursement Trf of Levin Funds to Federal Account			<b>Account : LEVIN</b>

Full Name (Last, First, Middle Initial) / Full Organization Name <b>E.</b>			Date of Disbursement M M / D D / Y Y Y Y Y Y
Mailing Address			
City	State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement			<b>Account :</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶	12954.77
<b>TOTAL</b> This Period (last page this line number only)..... ▶	12954.77