



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**WIN MINNESOTA FEDERAL PAC**

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="2013"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="0.00"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="357000.00"/>	<input type="text" value="357000.00"/>
(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="357000.00"/>	<input type="text" value="357000.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="70315.58"/>	<input type="text" value="70315.58"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="286684.42"/>	<input type="text" value="286684.42"/>
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="0.00"/>	

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

WIN MINNESOTA FEDERAL PAC

Report Covering the Period: From: 07 / 01 / 2013 To: 12 / 31 / 2013

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	232000.00	232000.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	232000.00	232000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	125000.00	125000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	357000.00	357000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
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).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	357000.00	357000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	357000.00	357000.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	70315.58	70315.58
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	70315.58	70315.58
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
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 .....	0.00	0.00
(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)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	70315.58	70315.58
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	70315.58	70315.58

**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) .....	357000.00	357000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	357000.00	357000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ▶	70315.58	70315.58
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	70315.58	70315.58

**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 6 OF 21
	<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)  
**WIN MINNESOTA FEDERAL PAC**

**A. AFSCME**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1625 L Street NW  
City Washington State DC Zip Code 20036  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **40000.00**

Date of Receipt **10 / 10 / 2013**  
**Transaction ID : SA11AI.4233**  
Amount of Each Receipt this Period **40000.00**

**B. James Belushi**  
Full Name (Last, First, Middle Initial)  
Mailing Address 360 Hamilton Avenue Ste. 100  
City New York State NY Zip Code 10601  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Self-Employed Actor  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **5000.00**

Date of Receipt **12 / 31 / 2013**  
**Transaction ID : SA11AI.4118**  
Amount of Each Receipt this Period **5000.00**

**C. ACTBLUE**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 441146  
City SOMERVILLE State MA Zip Code 02144  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **5000.00**

Date of Receipt **12 / 03 / 2013**  
**Transaction ID : SA11AI.4118.0**  
Amount of Each Receipt this Period **5000.00**  
Note: Above Contribution earmarked through this organization  
**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional)..... **45000.00**  
**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 7 OF 21
	<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)  
**WIN MINNESOTA FEDERAL PAC**

**A. Clifford Burnstein**  
Full Name (Last, First, Middle Initial)

Mailing Address 665 6th Avenue  
Apt PHA

City New York State NY Zip Code 10010

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

Name of Employer Q Prime, Inc. Occupation Co-Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
12 / 31 / 2013  
**Transaction ID : SA11AI.4117**

Amount of Each Receipt this Period  
5000.00

**B. EDUCATION MINNESOTA**  
Full Name (Last, First, Middle Initial)

Mailing Address 41 Sherburn Avenue

City Saint Paul State MN Zip Code 55103

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50000.00

Date of Receipt  
12 / 23 / 2013  
**Transaction ID : SA11AI.4235**

Amount of Each Receipt this Period  
50000.00

**C. Jay Greenspan**  
Full Name (Last, First, Middle Initial)

Mailing Address 8383 Wilshire Blvd.  
#500

City Beverly Hills State CA Zip Code 90211

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

Name of Employer Self-Employed Occupation Actor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
12 / 31 / 2013  
**Transaction ID : SA11AI.4116**

Amount of Each Receipt this Period  
2000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 57000.00

**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 8 OF 21
	<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)  
**WIN MINNESOTA FEDERAL PAC**

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

Mailing Address P.O. BOX 441146

City State Zip Code  
SOMERVILLE MA 02144

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  
 12 / 31 / 2013  
**Transaction ID : SA11AI.4116.0**

Amount of Each Receipt this Period  
2000.00

Note: Above Contribution earmarked through this organization.

**[MEMO ITEM]**

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

Mailing Address 260 E. Chestnut No. 4302

City State Zip Code  
Chicago IL 60611

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

Name of Employer Occupation  
Brandenburg Industrial Service President

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  
 12 / 31 / 2013  
**Transaction ID : SA11AI.4119**

Amount of Each Receipt this Period  
10000.00

Full Name (Last, First, Middle Initial)  
**C. Bill Maher**

Mailing Address 10960 Wilshire Blvd.

City State Zip Code  
Los Angeles CA 90024

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

Name of Employer Occupation  
Self-Employed Entertainer

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 / 2013  
**Transaction ID : SA11AI.4113**

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 15000.00

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



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

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

FOR LINE NUMBER: PAGE 9 OF 21  
(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)  
**WIN MINNESOTA FEDERAL PAC**

**A. Vance Opperman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 225 South Sixth Street  
 Suite 5200  
 City State Zip Code  
 Minneapolis MN 55402  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Key Investment, Inc. President and CEO  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 50000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 27 / 2013  
**Transaction ID : SA11AI.4111**  
 Amount of Each Receipt this Period  
 50000.00

**B. Stephen Silberstein**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 29 Eucalyptus Road  
 City State Zip Code  
 Belvedere CA 94920  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 N/A Retired  
 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 / 25 / 2013  
**Transaction ID : SA11AI.4112**  
 Amount of Each Receipt this Period  
 10000.00

**C. Alexander Soros**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 888 7th Avenue  
 City State Zip Code  
 New York NY 10106  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 N/A Student  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 50000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2013  
**Transaction ID : SA11AI.4115**  
 Amount of Each Receipt this Period  
 50000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 110000.00  
**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 10 OF 21  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
**WIN MINNESOTA FEDERAL PAC**

**A. Hope Warschaw**  
Full Name (Last, First, Middle Initial)  
Mailing Address 514 Palisades Beach Road  
City Santa Monica State CA Zip Code 90402  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Warland Investments Occupation Co-Managing Director  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 23 / 2013  
**Transaction ID : SA11AI.4114**  
Amount of Each Receipt this Period  
5000.00

**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).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	232000.00

**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 11 OF 21
<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

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)  
**WIN MINNESOTA FEDERAL PAC**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN ASSOCIATION FOR JUSTICE POLITICAL ACTION COMMITTEE (AAJ PAC)**

Mailing Address **777 6TH STREET, NW  
SUITE 200**

City **WASHINGTON** State **DC** Zip Code **20001**

FEC ID number of contributing federal political committee. **C C00024521**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**25000.00**

Date of Receipt  
**12 / 31 / 2013**

**Transaction ID : SA11C.4213**

Amount of Each Receipt this Period  
**25000.00**

**B.** Full Name (Last, First, Middle Initial)  
**WORKING FOR WORKING AMERICANS - FEDERAL**

Mailing Address **6801 PLACID STREET**

City **LAS VEGAS** State **NV** Zip Code **89119**

FEC ID number of contributing federal political committee. **C C00490847**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**100000.00**

Date of Receipt  
**10 / 07 / 2013**

**Transaction ID : SA11C.4173**

Amount of Each Receipt this Period  
**100000.00**

**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

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>125000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>125000.00</b>

**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

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)  
**WIN MINNESOTA FEDERAL PAC**

Full Name (Last, First, Middle Initial)

**A. Peggy Shapiro Graphic & Design**

Mailing Address 2555 N Clark St

City Chicago State IL Zip Code 60614

Purpose of Disbursement  
Design Services

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.4159**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Perkins Coie**

Mailing Address 1201 3rd Avenue  
FI 40

City Seattle State WA Zip Code 98101

Purpose of Disbursement  
Legal Fees

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.4161**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Perkins Coie**

Mailing Address 1201 3rd Avenue  
FI 40

City Seattle State WA Zip Code 98101

Purpose of Disbursement  
Legal Fees

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.4162**

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 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

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)  
**WIN MINNESOTA FEDERAL PAC**

Full Name (Last, First, Middle Initial)

**A. Perkins Coie**

Mailing Address 1201 3rd Avenue  
FI 40

City Seattle State WA Zip Code 98101

Purpose of Disbursement  
Legal Fees

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

**09 / 13 / 2013**

**Transaction ID : SB21B.4163**

Amount of Each Disbursement this Period

**968.40**

Full Name (Last, First, Middle Initial)

**B. Perkins Coie**

Mailing Address 1201 3rd Avenue  
FI 40

City Seattle State WA Zip Code 98101

Purpose of Disbursement  
Legal Fees

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

**10 / 24 / 2013**

**Transaction ID : SB21B.4164**

Amount of Each Disbursement this Period

**1086.60**

Full Name (Last, First, Middle Initial)

**C. Perkins Coie**

Mailing Address 1201 3rd Avenue  
FI 40

City Seattle State WA Zip Code 98101

Purpose of Disbursement  
Legal Fees

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

**11 / 01 / 2013**

**Transaction ID : SB21B.4165**

Amount of Each Disbursement this Period

**380.09**

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

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

**2435.09**

**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 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

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)  
**WIN MINNESOTA FEDERAL PAC**

Full Name (Last, First, Middle Initial)

**A. Perkins Coie**

Mailing Address 1201 3rd Avenue  
FI 40

City State Zip Code  
Seattle WA 98101

Purpose of Disbursement  
Legal Fees

001

Candidate Name

Category/  
Type

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  
12 / 19 / 2013

Transaction ID : SB21B.4167

Amount of Each Disbursement this Period

2176.28

Full Name (Last, First, Middle Initial)

**B. Project Lakes and Plains**

Mailing Address 1348 Hewitt Ave

City State Zip Code  
Saint Paul MN 55104

Purpose of Disbursement  
Research

001

Candidate Name

Category/  
Type

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  
12 / 06 / 2013

Transaction ID : SB21B.4168

Amount of Each Disbursement this Period

9000.00

Full Name (Last, First, Middle Initial)

**C. Seven Corners Printing**

Mailing Address 230 7th St W

City State Zip Code  
Saint Paul MN 55102

Purpose of Disbursement  
Printing

Candidate Name

Category/  
Type

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 / 24 / 2013

Transaction ID : SB21B.4169

Amount of Each Disbursement this Period

681.26

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

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

11857.54

**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 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

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)  
**WIN MINNESOTA FEDERAL PAC**

Full Name (Last, First, Middle Initial)

**A. Seven Corners Printing**

Mailing Address 230 7th St W

City State Zip Code  
Saint Paul MN 55102

Purpose of Disbursement  
Printing

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.4170**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. US Bank Merchant Services**

Mailing Address 800 Nicollet Mall

City State Zip Code  
Minneapolis MN 55402

Purpose of Disbursement  
Credit Card Processing Fees

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.4151**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. US Bank Merchant Services**

Mailing Address 800 Nicollet Mall

City State Zip Code  
Minneapolis MN 55402

Purpose of Disbursement  
Credit Card Processing Fees

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.4152**

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 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

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)  
**WIN MINNESOTA FEDERAL PAC**

Full Name (Last, First, Middle Initial)

**A. US Bank Merchant Services**

Mailing Address 800 Nicollet Mall

City Minneapolis State MN Zip Code 55402

Purpose of Disbursement  
Credit Card Processing Fees

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		02		2013

Transaction ID : SB21B.4153

Amount of Each Disbursement this Period

75.95
-------

Full Name (Last, First, Middle Initial)

**B. Natalie Volin Lehr**

Mailing Address 67 Otis Avenue

City Saint Paul State MN Zip Code 55104

Purpose of Disbursement  
Reimbursement - See Memos

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		19		2013

Transaction ID : SB21B.4154

Amount of Each Disbursement this Period

1243.92
---------

Full Name (Last, First, Middle Initial)

**C. Delta Airlines**

Mailing Address 1030 Delta Blvd

City Atlanta State GA Zip Code 30320

Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		19		2013

Transaction ID : SB21B.4154.0

Amount of Each Disbursement this Period

270.80
--------

[MEMO ITEM]

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

1319.87
---------

**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

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)  
**WIN MINNESOTA FEDERAL PAC**

Full Name (Last, First, Middle Initial)

**A. Delta Airlines**

Mailing Address 1030 Delta Blvd

City Atlanta State GA Zip Code 30320

Purpose of Disbursement  
Travel

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  
12 / 19 / 2013

Transaction ID : **SB21B.4154.1**

Amount of Each Disbursement this Period

630.90

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. WIN Minnesota**

Mailing Address 1600 University Avenue W  
Suite 401C

City Saint Paul State MN Zip Code 55104

Purpose of Disbursement  
Administrative and Fundraising Support

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  
08 / 30 / 2013

Transaction ID : **SB21B.4194**

Amount of Each Disbursement this Period

674.14

Full Name (Last, First, Middle Initial)

**C. WIN Minnesota**

Mailing Address 1600 University Avenue W  
Suite 401C

City Saint Paul State MN Zip Code 55104

Purpose of Disbursement  
Administrative and Fundraising Support

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

001  
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 30 / 2013

Transaction ID : **SB21B.4201**

Amount of Each Disbursement this Period

2350.35

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

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

3024.49

**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

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)  
**WIN MINNESOTA FEDERAL PAC**

Full Name (Last, First, Middle Initial)

**A. WIN Minnesota**

Mailing Address 1600 University Avenue W  
Suite 401C

City Saint Paul State MN Zip Code 55104

Purpose of Disbursement  
Administrative and Fundraising Support

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.4203**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. WIN Minnesota**

Mailing Address 1600 University Avenue W  
Suite 401C

City Saint Paul State MN Zip Code 55104

Purpose of Disbursement  
Administrative and Fundraising Support

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.4204**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. WIN Minnesota**

Mailing Address 1600 University Avenue W  
Suite 401C

City Saint Paul State MN Zip Code 55104

Purpose of Disbursement  
Administrative and Fundraising Support

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.4205**

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 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

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)  
**WIN MINNESOTA FEDERAL PAC**

Full Name (Last, First, Middle Initial)

**A. WIN Minnesota**

Mailing Address 1600 University Avenue W  
Suite 401C

City Saint Paul State MN Zip Code 55104

Purpose of Disbursement  
Administrative and Fundraising Support

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.4206**

Amount of Each Disbursement this Period

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)..... ▶

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 20 OF 21
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**WIN MINNESOTA FEDERAL PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Perkins Coie</b>	Nature of Debt (Purpose): Legal Services
Mailing Address 1201 3rd Avenue FI 40	
City State Zip Code Seattle WA 98101	

Outstanding Balance Beginning This Period <input type="text" value="2193.65"/>	<b>Transaction ID : SD10.4125</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="2193.65"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>WIN Minnesota</b>	Nature of Debt (Purpose): Administrative and Fundraising Support - March
Mailing Address 1600 University Avenue W Suite 401C	
City State Zip Code Saint Paul MN 55104	

Outstanding Balance Beginning This Period <input type="text" value="674.14"/>	<b>Transaction ID : SD10.4128</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="674.14"/>	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>WIN Minnesota</b>	Nature of Debt (Purpose): Administrative and Fundraising Support
Mailing Address 1600 University Avenue W Suite 401C	
City State Zip Code Saint Paul MN 55104	

Outstanding Balance Beginning This Period <input type="text" value="2350.35"/>	<b>Transaction ID : SD10.4129</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="2350.35"/>	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="0.00"/>
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 21 OF 21
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**WIN MINNESOTA FEDERAL PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>WIN Minnesota</b>	Nature of Debt (Purpose): Administrative and Fundraising Support
Mailing Address 1600 University Avenue W Suite 401C	
City State Zip Code Saint Paul MN 55104	

Outstanding Balance Beginning This Period <input type="text" value="2179.30"/>	<b>Transaction ID : SD10.4131</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="2179.30"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>WIN Minnesota</b>	Nature of Debt (Purpose): Administrative and Fundraising Support
Mailing Address 1600 University Avenue W Suite 401C	
City State Zip Code Saint Paul MN 55104	

Outstanding Balance Beginning This Period <input type="text" value="4736.82"/>	<b>Transaction ID : SD10.4132</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="4736.82"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

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 <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text" value="0.00"/>
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"/>