

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
FEC MAIL CENTER

2009 FEB -3 AM 11:19
Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

Eighth Congressional District Republican Party of Minnesota

ADDRESS (number and street) 303 Douglas Avenue

Check if different than previously reported. (ACC)

Eveleth MN 55734 - 1511

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C 0 0 3 6 1 4 8 5

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

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- | | | | |
|---|--------------------------------------|---------------------------------------|--|
| <input checked="" type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on M M / D D / in the State of

- (d) 30-Day POST-Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on M M / D D / in the State of

5. Covering Period M M / D D / Y Y Y Y Y Y through M M / D D / Y Y Y Y Y Y

0 1 / 0 1 / 2 0 0 9 through 0 1 / 3 1 / 2 0 0 9

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

Type or Print Name of Treasurer Ronald L. Britton

Signature of Treasurer 

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

0 2 / 0 2 / 2 0 0 9

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

Office Use Only									
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FEC FORM 3X
Rev. 12/2004

29030014422

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Eighth Congressional District Republican Party of Minnesota

Report Covering the Period: From:

M	M
0	1

 /

D	D
0	1

 /

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	1

 /

D	D
3	1

 /

Y	Y	Y	Y
2	0	0	9

**COLUMN A
This Period**

**COLUMN B
Calendar Year-to-Date**

6. (a) Cash on Hand January 1,	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	2	0	0	8	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>4</td><td>9</td><td>5</td><td>6</td><td>9</td><td>1</td></tr></table>	4	9	5	6	9	1		
2	0	0	8											
4	9	5	6	9	1									
(b) Cash on Hand at Beginning of Reporting Period.....	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>4</td><td>9</td><td>5</td><td>6</td><td>9</td><td>1</td></tr></table>	4	9	5	6	9	1							
4	9	5	6	9	1									
(c) Total Receipts (from Line 19)	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>2</td><td>0</td><td>8</td><td>1</td><td>0</td><td>0</td></tr></table>	2	0	8	1	0	0	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>2</td><td>0</td><td>8</td><td>1</td><td>0</td><td>0</td></tr></table>	2	0	8	1	0	0
2	0	8	1	0	0									
2	0	8	1	0	0									
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>7</td><td>0</td><td>3</td><td>7</td><td>9</td><td>1</td></tr></table>	7	0	3	7	9	1	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>7</td><td>0</td><td>3</td><td>7</td><td>9</td><td>1</td></tr></table>	7	0	3	7	9	1
7	0	3	7	9	1									
7	0	3	7	9	1									
7. Total Disbursements (from Line 31).....	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>2</td><td>8</td><td>4</td><td>6</td><td>7</td></tr></table>	2	8	4	6	7	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>2</td><td>8</td><td>4</td><td>6</td><td>7</td></tr></table>	2	8	4	6	7		
2	8	4	6	7										
2	8	4	6	7										
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>6</td><td>7</td><td>5</td><td>3</td><td>2</td><td>4</td></tr></table>	6	7	5	3	2	4	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>6</td><td>7</td><td>5</td><td>3</td><td>2</td><td>4</td></tr></table>	6	7	5	3	2	4
6	7	5	3	2	4									
6	7	5	3	2	4									
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>													
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>													

29030014423

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

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Eighth Congressional District Republican Party of Minnesota

Report Covering the Period:

From:

MM / DD / YYYY
01 / 01 / 2009

To:

MM / DD / YYYY
01 / 31 / 2009

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).....

9 6 0 0

9 6 0 0

(ii) Unitemized

1 9 8 5 0 0

1 9 8 5 0 0

(iii) TOTAL (add
Lines 11(a)(i) and (ii).....▶

2 0 8 1 0 0

2 0 8 1 0 0

(b) Political Party Committees

(c) Other Political Committees
(such as PACs).....

(d) Total Contributions (add Lines
11(a)(iii), (b), and (c)) (Carry
Totals to Line 33, page 5).....▶

2 0 8 1 0 0

2 0 8 1 0 0

12. Transfers From Affiliated/Other
Party Committees.....

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures
(Refunds, Rebates, etc.)
(Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made
to Federal Candidates and Other
Political Committees.....

17. Other Federal Receipts
(Dividends, Interest, etc.).....

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account
(from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b))..

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c)).....▶

2 0 8 1 0 0

2 0 8 1 0 0

20. Total Federal Receipts
(subtract Line 18(c) from Line 19).....▶

2 0 8 1 0 0

2 0 8 1 0 0

29030014424

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)	2 8 4 6 7	2 8 4 6 7
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2 8 4 6 7	2 8 4 6 7
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	2 0 8 1 0 0	2 0 8 1 0 0
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2 0 8 1 0 0	2 0 8 1 0 0

29030014426

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 1 OF 1
	<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)
Eighth Congressional District Republican Party of Minnesota

Full Name (Last, First, Middle Initial)
A. Britton, Ronald L.

Mailing Address
303 Douglas Avenue

City **Eveleth** State **MN** Zip Code **55734**

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9 6 0 0

Date of Receipt
01 / 02 / 2009

Amount of Each Receipt this Period
9 6 0 0

Contribution In-Kind - Phone book ads (Dex)

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

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	9 6 0 0
TOTAL This Period (last page this line number only).....▶	9 6 0 0

29030014427

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

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

FOR LINE NUMBER:
(check only one)

PAGE 1 OF 2

<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)

Eighth Congressional District Republican Party of Minnesota

Full Name (Last, First, Middle Initial)

A.

Ronald Britton

Mailing Address

303 Douglas Ave

City

State

Zip Code

Eveleth

MN

55734

Purpose of Disbursement

In-kind contribution phone book ads

Candidate Name

0 0 1

Category/
Type

Date of Disbursement

0 1 / 0 2 / 2 0 0 9

Amount of Each Disbursement this Period

9 6 0 0

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B.

USPS

Mailing Address

231 1st ST S

City

State

Zip Code

Virginia

MN

55792

Purpose of Disbursement

Stamps for office use

Candidate Name

0 0 1

Category/
Type

Date of Disbursement

0 1 / 0 2 / 2 0 0 9

Amount of Each Disbursement this Period

4 2 0 0

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C.

USPS

Mailing Address

231 1st ST S

City

State

Zip Code

Virginia

MN

55792

Purpose of Disbursement

Postage FEC Reports

Candidate Name

0 0 1

Category/
Type

Date of Disbursement

0 1 / 0 8 / 2 0 0 9

Amount of Each Disbursement this Period

3 7 4 0

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

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

1 7 5 4 0

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

1 7 5 4 0

29030014428

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)						PAGE 2 OF 2
	<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)
Eighth Congressional District Republican Party of Minnesota

Full Name (Last, First, Middle Initial) A.		Date of Disbursement
USPS		<input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 231 1st ST S		<input type="text"/> / <input type="text"/> / <input type="text"/>
City Virginia	State MN	Zip Code 55792
Purpose of Disbursement Standard Mail for Fundraising		Amount of Each Disbursement this Period
Candidate Name		<input type="text"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Category/ Type <input type="text"/>
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/>
State:	District:	

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

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

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

29030014429

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input checked="" type="checkbox"/> USPS Express Mail	Postmarked <i>2/2/09</i>
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

JMP

PREPARER

(3/2005)

2/3/09

DATE PREPARED

29030014430