

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
DORSEY NATIONAL FUND

ADDRESS (number and street) 50 South Sixth Street  
 Check if different than previously reported. (ACC)  
Minneapolis MN 55402

2. **FEC IDENTIFICATION NUMBER** C00018945  
**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 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 11 25 2008 through 12 31 2008

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 Lynnette S Crandall

Signature of Treasurer Electronically Filed by Lynnette S Crandall Date 01 29 2009

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)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
DORSEY NATIONAL FUND

Report Covering the Period: From: 

M	M
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		13096.81
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	9677.36									
(c) Total Receipts (from Line 19) .....	0.00	52663.76								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	9677.36	65760.57								
7. Total Disbursements (from Line 31) .....	-5060.00	51023.21								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	14737.36	14737.36								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	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  
DORSEY NATIONAL FUND

Report Covering the Period: From: 

M	M
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	8

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	0.00	17041.19
(i) Itemized (use Schedule A) .....	0.00	35622.57
(ii) Unitemized .....	0.00	52663.76
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	0.00	52663.76
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 Transfer (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)) .....	0.00	52663.76
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	0.00	52663.76

**DETAILED SUMMARY PAGE**

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	1043.21
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	1043.21
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	-5000.00	44550.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	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.....	-60.00	5430.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	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))..	-5060.00	51023.21
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	-5060.00	51023.21

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	0.00	52663.76
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	0.00	52663.76
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	1043.21
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	1043.21

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 10  
(check only one)

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Michael J. Ahern		Date of Receipt MM / DD / YYYY 12 / 31 / 2008		
	Mailing Address 50 South Sixth Street Suite 1500		<b>Transaction ID:</b> SA11AI.5436		
	City Minneapolis	State MN	Zip Code 55443	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C		[MEMO ITEM]		
	Name of Employer Dorsey & Whitney LLP	Occupation Lawyer	Aggregate Year-to-Date 50.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Philippe Oman		Date of Receipt MM / DD / YYYY 12 / 31 / 2008		
	Mailing Address 50 South Sixth Street		<b>Transaction ID:</b> SA11AI.5429		
	City Minneapolis	State MN	Zip Code 55402	Amount of Each Receipt this Period 175.00	
	FEC ID number of contributing federal political committee. C		[MEMO ITEM]		
	Name of Employer Dorsey & Whitney LLP	Occupation Accountant	Aggregate Year-to-Date 175.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Lynnette Slater Crandall		Date of Receipt MM / DD / YYYY 12 / 31 / 2008		
	Mailing Address 50 South Sixth Street		<b>Transaction ID:</b> SA11AI.5431		
	City Minneapolis	State MN	Zip Code 55402	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C		[MEMO ITEM]		
	Name of Employer Dorsey & Whitney LLP	Occupation Lawyer	Aggregate Year-to-Date 50.00		

<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:		PAGE 7 / 10	
	(check only one)			
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
DORSEY NATIONAL FUND

**A.**

Full Name (Last, First, Middle Initial) Rose Wilson		Date of Receipt
Mailing Address 50 South Sixth Street		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
City	State	Zip Code
Minneapolis	MN	55402
FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.5430
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer Dorsey & Whitney LLP	Occupation Administrator	<b>[MEMO ITEM]</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="50.00"/>		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="0.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="0.00"/>

**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 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)  
DORSEY NATIONAL FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>BETTY PAC</b> <hr/> Mailing Address <b>PO BOX 14141</b> <hr/> City <b>ST PAUL</b> State <b>MN</b> Zip Code <b>55114</b> <hr/> Purpose of Disbursement <hr/> Candidate Name <b>BETTY MCCOLLUM</b> <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: <b>MN</b> District: <b>04</b>	<b>Transaction ID: SB23.5410</b> Date of Disbursement 12 / 22 / 2008 <hr/> Amount of Each Disbursement this Period 250.00 <hr/> Category/Type 011
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>HILLARY CLINTON FOR PRESIDENT</b> <hr/> Mailing Address <b>1825 K Street Suite 1000</b> <hr/> City <b>Washington</b> State <b>DC</b> Zip Code <b>20006</b> <hr/> Purpose of Disbursement Return of 10/23/07 contribution check <hr/> Candidate Name <b>HILLARY RODHAM CLINTON</b> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: <b>00</b>	<b>Transaction ID: SB23.5442</b> Date of Disbursement 12 / 31 / 2008 <hr/> Amount of Each Disbursement this Period -2500.00 <hr/> Category/Type
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>Jon Tester for U.S. Senate</b> <hr/> Mailing Address <b>P.O. Box 1135</b> <hr/> City <b>Helena</b> State <b>MT</b> Zip Code <b>59624</b> <hr/> Purpose of Disbursement Return of 12/19/05 Contribution check <hr/> Candidate Name <b>JON TESTER</b> <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2005 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: <b>MT</b> District: <b>00</b>	<b>Transaction ID: SB23.5448</b> Date of Disbursement 12 / 31 / 2008 <hr/> Amount of Each Disbursement this Period -250.00 <hr/> Category/Type 011

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



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 9 / 10

<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)  
DORSEY NATIONAL FUND

A.

Full Name (Last, First, Middle Initial)  
NATIONAL REPUBLICAN SENATORIAL COMMITTEE

Transaction ID: SB23.5440

Date of Disbursement

Mailing Address 425 SECOND STREET NE

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	0	8

City State Zip Code  
WASHINGTON DC 20002

Amount of Each Disbursement this Period

-2500.00
----------

Purpose of Disbursement  
Return of 6/3/04 contribution check

011
Category/ Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2004  
 Primary  General  
 Other (specify) ▼

State: District:

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

-2500.00
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TOTAL This Period (last page this line number only) ..... ►

-5000.00
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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)

PAGE 10 / 10

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

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NAME OF COMMITTEE (In Full)  
DORSEY NATIONAL FUND

A.

Full Name (Last, First, Middle Initial)  
Committee to Elect Les Ponomarchuck Superior Court Judge #10

Mailing Address 800 Fifth Avenue #101-182

City Seattle State WA Zip Code 98104

Purpose of Disbursement

Candidate Name  
Return of 5/22/08 nonfederal contribution check

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB29.5453

Date of Disbursement

12 / 31 / 2008

Amount of Each Disbursement this Period

-150.00

B.

Full Name (Last, First, Middle Initial)  
Dorsey & Whitney LLP

Mailing Address 50 South Sixth Street Suite 1500

City Minneapolis State MN Zip Code 55402

Purpose of Disbursement  
Administrative/Overhead Expenses

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB29.5415

Date of Disbursement

12 / 16 / 2008

Amount of Each Disbursement this Period

90.00

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

-60.00

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

-60.00