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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORIVI 3	For An Authoriz	zed Committee	Offic	ce Use Only
NAME OF TYP COMMITTEE (in full)	E OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5	
Gerson for Congress				ı
ADDRESS (number and street)	D Box 1465			
▼				
Check if different than previously reported. (ACC)	urnsville		MN 5533	37
2. FEC IDENTIFICATION NUMB		CITY A	STATE ▲	ZIP CODE ▲
C C00523738		S THIS NEW (N) OR	AMENDED (A)	STATE ▼ DISTRICT MN 02
4. TYPE OF REPORT (Choose	One) (b) 12	2-Day PRE -Election Report for tl	ne:	
(a) Quarterly Reports:	(2) 12			П
April 15 Quarterly Repor	t (Q1)	Primary (12P)	General (12G)	Runoff (12R)
		Convention (12C)	Special (12S)	
July 15 Quarterly Report	t (Q2)	M M / D D	/ Y Y Y Y	in the
October 15 Quarterly Re	eport (Q3) E	lection on		State of
January 31 Year-End Re	port (YE) (c) 30	D-Day POST -Election Report for	the:	
		General (30G)	Runoff (30R)	Special (30S)
		General (30G)	Hulloll (30H)	Special (303)
Termination Report (TER		lection on	/ Y Y Y	in the State of
5. Covering Period 04	01 / Y Y Y 20	through	06 / 30 / Y	Y Y Y 2019
I certify that I have examined this Re Type or Print Name of Treasurer	eport and to the bes Gerson, David, , ,	at of my knowledge and belief it	is true, correct and cor	mplete.
Gerson, D Signature of Treasurer	Pavid, , ,	[Electronically Filed]	Date 07	14 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of false, erroneous,	or incomplete inform	ation may subject the person sigr	ning this Report to the pe	enalties of 52 U.S.C. §30109
Office				
Use Only				FEC FORM 3 (Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

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2019

06

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name Gerson for Congress

2019 30 01 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 0.00 0.00 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 0.00 0.00 (subtract Line 6(b) from Line 6(a)) 7. Net Operating Expenditures (a) Total Operating Expenditures 0.00 0.00 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 0.00 0.00 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 103539.64 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 275000.00 Schedule C and/or Schedule D).....

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

PAGE 3 / 45 FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Gerson for Congress

04 2019 06 30 2019 Report Covering the Period: From: To:

	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. C	ONTRIBUTIONS (other than loans) FROM:		
(a)	Individuals/Persons Other Than Political Committees		
	(i) Itemized (use Schedule A)	0.00	0.00
	(ii) Unitemized	0.00	0.00
	(iii) TOTAL of contributions from individuals	0.00	0.00
(b)	•	0.00	0.00
(c)	Other Political Committees (such as PACs)	0.00	0.00
(d)		0.00	0.00
(e)	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	0.00
	RANSFERS FROM OTHER	0.00	0.00
	JTHORIZED COMMITTEES	, , , , , ,	, , ,
3. L((a)	•	0.00	
	Candidate	0.00	0.00
(b)		0.00	0.00
	(add Lines 13(a) and (b))	0.00	0.00
	FFSETS TO OPERATING (PENDITURES		
	efunds, Rebates, etc.)	0.00	0.00
	THER RECEIPTS ividends, Interest, etc.)	0.00	0.00
11	OTAL RECEIPTS (add Lines (e), 12, 13(c), 14, and 15) arry Total to Line 24, page 4)	0.00	0.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 05/2016)

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	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	0.00	0.00
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
 19	LOAN REPAYMENTS:		
	(a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00
	(b) Of All Other Loans	0.00	0.00
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00
20	REFUNDS OF CONTRIBUTIONS TO:		
20.	(a) Individuals/Persons Other		
	Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees	0.00	0.00
	(such as PACs)	0.00	0.00
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
21.	OTHER DISBURSEMENTS	0.00	0.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	0.00	0.00
	III. CASH SU	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPO	PRTING PERIOD	103539.64
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	0.00
25.	SUBTOTAL (add Line 23 and Line 24)		103539.64
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	0.00
	CASH ON HAND AT CLOSE OF REPORTIN		103539.64

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

PAGE 5
FOR LINE NUMBER: (check only one)

13a 13b

OF

		130
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4392
		I
LOAN SOURCE Full Name (Last, First, Mic Gerson, David, Adam, ,	ldle Initial)	☐ Memo Item
Mailing Address PO Box 1465		General Other (specify) ▼
City	State	ZIP Code ** Personal Funds of the Candidate
Burnsville	MN	55337 Personal Funds of the Candidate
Original Amount of Loan	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period
16554.96	,	0.00
TERMS Date Incurred	D	ate Due Interest Rate Secured: (If none, enter 0)
M05M / D29D / Y Ž01Ž Y	M M / D D	/ Y 1/Ĭ/20Ž0 Y 0.00
List All Endorsers or Guarantors (if any) to	o Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	•	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	•	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)		16554.96
TOTALS This Period (last page in this line only	r)	······································
Carry outstanding balance only to LINE 3, Sch	edule D, for this	line. If no Schedule D, carry forward to appropriate line of Summary.

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

PAGE 6
FOR LINE NUMBER: (check only one)

13a

			Detailed Guillinary	1 age	13b
NAME OF COMMITTEE (In Full)			Tran	nsaction ID : SC/10.4365	
Gerson for Congress					
LOAN SOURCE Full Name (Last, First, Mid	ddle Initial)		☐ Memo It	tem Election: 2012	
Gerson, David, Adam, ,			_	rimary	
				General	
Mailing Address PO Box 1465				Other (specify) \blacktriangledown	
City	State	ZIP Code	<u> </u>		
Burnsville	MN	55337		X Personal Funds	of the Candidate
Original Amount of Loan	Cumulative Pag	yment To D	ate I	Balance Outstanding at Clo	se of This Period
10000.00			0.00		10000.00
9 9	9	- 5	4	7	10000.00
TERMS Date Incurred		Date Due	Interest I (If none, e		Secured:
M07 ^M / D19 ^D / Y Ž01Ž Y	M M / D D	/ Y Y	NA ^Y Y	0.00 % (apr)	Yes X No
List All Endorsers or Guarantors (if any) t	o Loan Source				
1. Full Name (Last, First, Middle Initial)		1	Name of Employer		
Mailing Address		(Occupation		
		1	Amount		
City	ZIP Code		Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)		1	Name of Employer		
Mailing Address		(Occupation		
		1	Amount		
City State	ZIP Code	I	Guaranteed Outstanding:		
3. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address		(Occupation		
			Amount		
City	ZIP Code		Guaranteed Outstanding:		· .
4. Full Name (Last, First, Middle Initial)		1	Name of Employer		
Mailing Address		(Occupation		
			Amount		
City	ZIP Code	(Guaranteed Outstanding:		
SUBTOTALS This Period This Page (optional)			······•		10000.00
TOTALS This Period (last page in this line only	/)		······	, , ,	
Carry outstanding balance only to LINE 3, Sci	nedule D. for this	s line. If no	Schedule D. carry	forward to appropriate lin	e of Summarv

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

PAGE 7 C

13a

		13b
AME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4381
LOAN SOURCE Full Name (Last, First, Mailing Address PO Box 1465	Middle Initial)	☐ Memo Item Election: 2012 ## Primary General Other (specify) ▼
City Burnsville	State	ZIP Code 55337 Personal Funds of the Candidate
Original Amount of Loan 5000.00	Cumulative Pa	byment To Date Balance Outstanding at Close of This Period 0.00 5000.00
TERMS Date Incurred	M " M / D " D	Date Due Interest Rate (If none, enter 0) O / Y YNAY Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any)	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City	ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City	ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City	ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
City	ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional		, , , , , , , , , , , , , , , , , , , ,
	Schedule D. for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

PAGE 8 OF
FOR LINE NUMBER:
(check only one)

X 13a 13b

						130
AME OF COMMITTEE (In Full) Gerson for Congress					Transa	ction ID : SC/10.4468
LOAN SOURCE Full Name (Last, I Gerson, David, Adam, ,	First, Mid	ddle Initial)			Memo Item	x Primary
Mailing Address PO Box 1465						General Other (specify) ▼
City		State	ZIP Cod	de		Personal Funds of the Candidate
Burnsville		MN	55337			
Original Amount of Loan		Cumulative Pay	ment To	Date	Bal	ance Outstanding at Close of This Period
5	.00	9		0.00		5.00
TERMS Date Incurred		D	ate Due		Interest Rat (If none, enter	
^M 07 ^M / ^D 24 ^D / ^Y Ž01Ž	Υ	M M / D D	/ Y	YNA Y	С	% (apr) Yes X No
List All Endorsers or Guarantors	(if any) t	o Loan Source				
1. Full Name (Last, First, Middle Ir	nitial)			Name of Em	ployer	
Mailing Address				Occupation		
0''	0	710.0		Amount Guaranteed		
City	State	ZIP Code		Outstanding:		9 9
2. Full Name (Last, First, Middle Initial)				Name of Em	ployer	
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		7
3. Full Name (Last, First, Middle Ini	tial)			Name of Em	ployer	
Mailing Address				Occupation		
	I _	T		Amount Guaranteed		
City	State	ZIP Code		Outstanding:		7
4. Full Name (Last, First, Middle Ini	tial)			Name of Em	ployer	
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed		
City	State	ZIP Code		Outstanding:		9 9
SUBTOTALS This Period This Page (c	ptional).					5.00
FOTALS This Period (last page in this	line only	/)			▶	, ,
Carry outstanding balance only to LIN	NE 3, Sch	nedule D, for this	s line. If ı	no Schedule I	D, carry for	ward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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OF

LOAN SOURCE Full Name (Last, First, Middle Initial) Gerson, David, Adam, ,	☐ Memo Item Election: 2012 ▼ Primary General Other (specify) ▼		
	Other (specify) ▼		
Mailing Address PO Box 1465			
City State ZIP C	Y Personal Funds of the Candidate	 .e	
Burnsville MN 5533 Original Amount of Loan Cumulative Payment		_	
5000.00	0.00 5000.00		
TERMS Date Incurred Date Du	e Interest Rate Secured:		
M07M / D26D / Y Ž01Ž Y M M / D D /	YNA Y 0.00 % (apr) Yes X No	0	
List All Endorsers or Guarantors (if any) to Loan Source			
Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City State ZIP Code	Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
011	Amount Guaranteed		
City State ZIP Code	Outstanding:		
3. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City State ZIP Code	Amount Guaranteed		
	Outstanding:		
4. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City State ZIP Code	Amount Guaranteed		
City State ZIP Code	Outstanding:		
SUBTOTALS This Period This Page (optional)	5000.00		
TOTALS This Period (last page in this line only)	7 7 7 7		
Carry outstanding balance only to LINE 3, Schedule D, for this line.	f no Schedule D. carry forward to appropriate line of Summany	_	

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

FOR LINE NUMBER: (check only one)

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OF

		130
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID: SC/10.4389
LOAN SOURCE Full Name (Last, First, Mic Gerson, David, Adam, ,	Idle Initial)	☐ Memo Item Election: 2012 ✓ Primary
Mailing Address PO Box 1465		General Other (specify) ▼
City	State	ZIP Code
Burnsville	MN	55337 Personal Funds of the Candidate
Original Amount of Loan	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period
5000.00		0.00 5000.00
TERMS Date Incurred	D	ate Due Interest Rate Secured: (If none, enter 0)
M 08M / D01D / Y Z01Z Y	M M / D D	/ Y Yna Y Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any) to	o Loan Source	
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
	•	
SUBTOTALS This Period This Page (optional)		5000.00
TOTALS This Period (last page in this line only	y)	······································
Carry outstanding balance only to LINE 3, Sch	edule D, for this	line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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	13b

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4129
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Memo Item Election: 2012
Gerson, David, Adam, ,	Memo Item Clection: 2012	
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code Scool Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
5000.00		0.00 5000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M08M / D10D / Y Z01Ž Y	M M / D D	/ YNAY Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if an	y) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	•	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
CURTOTAL O This Deviced This Deve (aution	-10	
SUBTOTALS This Period This Page (option	aı)	5000.00
TOTALS This Period (last page in this line	only)	
Carry outstanding balance only to LINE 3,	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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X 13a

AME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial)	Transaction ID : SC/10.4470 Memo Item Election: 2012 Primary		
LOAN SOURCE Full Name (Last, First, Middle Initial)	IVICITIO ILCITI		
	IVICITIO ILCITI		
Gerson, David, Adam, ,	General		
Mailing Address PO Box 1465	Other (specify) ▼		
City State ZIP Coo	de Personal Funds of the Candidate		
Burnsville MN 55337	T crosman unus or the Garmadae		
Original Amount of Loan Cumulative Payment To	Date Balance Outstanding at Close of This Period		
6.00	0.00		
TERMS Date Incurred Date Due	Interest Rate Secured: (If none, enter 0)		
M08M / D10D / Y Ž01Ž Y M M / D D / Y	YNA Y O.00 % (apr) Yes X No		
List All Endorsers or Guarantors (if any) to Loan Source			
Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
	Amount		
City State ZIP Code	Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
	Amount		
City State ZIP Code	Guaranteed Outstanding:		
3. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
	Amount		
City State ZIP Code	Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
	Amount		
City State ZIP Code	Guaranteed Outstanding:		
SUBTOTALS This Period This Page (optional)	6.00		
FOTALS This Period (last page in this line only)	······································		
Carry outstanding balance only to LINE 3, Schedule D, for this line. If n	no Schedule D, carry forward to appropriate line of Summarv.		

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

FOR LINE NUMBER: (check only one)

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4130
LOAN SOURCE Full Name (Last, First, M	Middle Initial)	Memo Item Election: 2012
Gerson, David, Adam, ,	Memo Item Clection: 2012	
Mailing Address PO Box 1465 Other (specify) ▼		
City	State	ZIP Code Second Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
1000.00	,	0.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M08M / D17D / Y Ž01Ž Y	M M / D D	/ Y YNAY Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any)	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial) Name of Employer		
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial) Name of Employer		
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional	l)·····	1000.00
TOTALS This Period (last page in this line o	nly)	······································
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4131
LOAN SOURCE Full Name (Last, First, I	Middle Initial)	Memo Item Election: 2012
Gerson, David, Adam, ,	Memo Item Clection: 2012	
Mailing Address PO Box 1465 General Other (specify		
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
1000.00	l ,	0.00 1000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M08M / D20D / Y Ž01Ž Y	M M / D D	/ Y YNAY Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any) to Loan Source	
Full Name (Last, First, Middle Initial)	<u>, </u>	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial) Name of Employer		
Mailing Address		Occupation
	I	Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	-	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
CURTOTAL C This Deviced This Degre (entires	Λ.	
SUBTOTALS This Period This Page (optional		1000.00
TOTALS This Period (last page in this line of	nly)	······································
Carry outstanding balance only to LINE 3, 5	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4442
LOAN SOURCE Full Name (Last, First, N	liddle Initial)	Floation: 2044
Gerson, David, Adam, ,	☐ Memo Item	
Mailing Address PO Box 1465 General Other (specify) ▼		
City	State	ZIP Code Second Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
479.33	,	0.00 479.33
TERMS Date Incurred		Date Due Interest Rate Secured: (If none, enter 0)
M02M / D22D / Y Ž013 Y	M M / D D	/ Y 1/Ĭ/20Ž0 Y 0.00
List All Endorsers or Guarantors (if any)	to Loan Source	
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial) Name of Employer		
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional		
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TOTALS This Period (last page in this line or	nly)	······
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

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NAME OF COMMITTEE (In Full) Transaction ID: SC/10.4444 Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 3000.00 0.00 3000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 ^D25 ^D M 02M ž013 Y 1/1/2020 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 3000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4464
LOAN SOURCE Full Name (Last, First, N	liddle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item Clection: 2014	
Mailing Address PO Box 1465 Other (specify) ▼		
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
3000.00	,	0.00 3000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M03M / D26D / Y Ž013 Y	M M / D D	/ Y 1/1/2020 Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any)	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial) Name of Employer		
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial) Name of Employer		
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
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Use separate schedule(s) for each category of the Detailed Summary Page

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4502
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item Clection: 2014	
Mailing Address PO Box 1465 Other (specify) ▼		
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
4000.00	J,	0.00 4000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
^M 04 ^M / □18□ / Y Ž013 Y	M M / D D	/ Y 1½1/2Ŏ Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any) to Loan Source	
Full Name (Last, First, Middle Initial)	,	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial) Name of Employer		
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	1	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
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Carry outstanding balance only to LINE 3,	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4545
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item Clection: 2014	
Mailing Address PO Box 1465	Other (specify)	
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
4000.00		0.00 4000.00
TERMS Date Incurred	[Date Due Interest Rate Secured: (If none, enter 0)
M 05M / D13D / Y Z013 Y	M M / D D	/ Y 1Ў1/2Ŏ Y 0.00
List All Endorsers or Guarantors (if any) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial) Name of Employer		
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial) Name of Employer		
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
CURTOTAL C. This Deviced This Daws (antisys	N.	
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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4591
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item Clection: 2014	
Mailing Address PO Box 1465 Other (specify)		
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
5000.00	,	0.00 5000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M06 ^M / D10 ^D / Y Z013 Y	M M / D D	/ Y 1/1/20 Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial) Name of Employer		
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
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Carry outstanding balance only to LINE 3, S	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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OF

		100	
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4622	
LOAN SOURCE Full Name (Last, First, N	liddle Initial)	Floation: 2044	
Gerson, David, Adam, ,	☐ Memo Item		
Mailing Address PO Box 1465	Other (specify) ———————————————————————————————————		
City	State	ZIP Code F5007 Personal Funds of the Candidate	
Burnsville	MN	55337	
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period	
131.12		0.00 131.12	
TERMS Date Incurred	[Date Due Interest Rate Secured: (If none, enter 0)	
M06 ^M / D30 ^D / Y Ž013 Y	M M / D D	/ Y 1/1/20 Y 0.00	
List All Endorsers or Guarantors (if any)	to Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City	ZIP Code	Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)	·	Name of Employer	
Mailing Address		Occupation	
		Amount Guaranteed	
City	ZIP Code	Outstanding:	
3. Full Name (Last, First, Middle Initial)	3. Full Name (Last, First, Middle Initial) Name of Employer		
Mailing Address		Occupation	
		Amount	
City	ZIP Code	Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initial) Name of Employer			
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	
SUBTOTALS This Period This Page (optional			
GODICIALS THIS PERIOD THIS Page (optional)	131.12	
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Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.	

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OF

		100	
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5169	
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Memo Item Election: 2014	
Gerson, David, Adam, ,	Memo Item Clection: 2014		
Mailing Address PO Box 1465 Other (specify)			
City	State	ZIP Code F5007 Personal Funds of the Candidate	
Burnsville	MN	55337	
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period	
5000.00		0.00 5000.00	
TERMS Date Incurred	Γ	Date Due Interest Rate Secured:	
M07 ^M / D05 ^D / Y 2013 Y	M M / D D	0.00 % (apr) Yes X No	
List All Endorsers or Guarantors (if any	/) to Loan Source		
1. Full Name (Last, First, Middle Initial)	,	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	ZIP Code	Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount Guaranteed	
City	ZIP Code	Outstanding:	
3. Full Name (Last, First, Middle Initial)	3. Full Name (Last, First, Middle Initial) Name of Employer		
Mailing Address		Occupation	
		Amount	
City	ZIP Code	Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initial) Name of Employer			
Mailing Address		Occupation	
		Amount	
City	ZIP Code	Guaranteed Outstanding:	
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Transaction ID: SC/10.5170 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 ^D29^D M 07M ž013 1/1/20 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5172
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item Clection: 2014	
Mailing Address PO Box 1465	Other (specify)	
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
5000.00	,	0.00 5000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M08M / D19D / Y 2013 Y	M M / D D	/ Y 1/1/20 Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any)	to Loan Source	
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	1	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial) Name of Employer		
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial) Name of Employer		
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
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Use separate schedule(s) for each category of the Detailed Summary Page

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5173
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item Election: 2014	
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
5000.00		0.00 5000.00
TERMS Date Incurred	Г	Date Due Interest Rate Secured: (If none, enter 0)
M09M / D12D / Y Ž01Š Y	M M / D D	/
List All Endorsers or Guarantors (if any	/) to Loan Source	
Full Name (Last, First, Middle Initial)	,	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	1	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	•	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
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Carry outstanding balance only to LINE 3,	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

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OF

		100			
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5174			
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Memo Item Election: 2014			
Gerson, David, Adam, ,	Memo Item Election: 2014				
Mailing Address PO Box 1465	Mailing Address PO Box 1465				
City	State	ZIP Code F5007 Personal Funds of the Candidate			
Burnsville	MN	55337			
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period			
3000.00		0.00 3000.00			
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)			
M09M / D30D / Y 2013 Y	M M / D D	/ Y 1ÿ1/2ŏ Y 0.00 % (apr) Yes X No			
List All Endorsers or Guarantors (if any) to Loan Source				
Full Name (Last, First, Middle Initial)	,	Name of Employer			
Mailing Address		Occupation			
		Amount			
City State	ZIP Code	Guaranteed Outstanding:			
2. Full Name (Last, First, Middle Initial)	'	Name of Employer			
Mailing Address		Occupation			
		Amount			
City	ZIP Code	Guaranteed Outstanding:			
3. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
		Amount			
City	ZIP Code	Guaranteed Outstanding:			
4. Full Name (Last, First, Middle Initial)	•	Name of Employer			
Mailing Address		Occupation			
		Amount			
City State	ZIP Code	Guaranteed Outstanding:			
CURTOTAL C This Deviced TV D	-0				
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Carry outstanding balance only to LINE 3,	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.			

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Transaction ID: SC/10.5202 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) M 10^M 0.00 D04D ž013 1/1/20 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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FOR LINE NUMBER: (check only one)

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5203
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item Clection: 2014	
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
5000.00		0.00 5000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M10 ^M / D16 ^D / Y Ž01Š	M M / D D	/ Y 1ÿ1/2ŏ Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any) to Loan Source	
1. Full Name (Last, First, Middle Initial)	,	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)	·	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	<u>'</u>	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
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			Detailed Guillinary I	age	13b
NAME OF COMMITTEE (In Full)			Trans	saction ID : SC/10.5204	
Gerson for Congress					
LOAN SOURCE Full Name (Last, First, N	liddle Initial)		☐ Memo Ite	m Election: 2014	
Gerson, David, Adam, ,				rimary	
				General	
Mailing Address PO Box 1465				Other (specify)	
City	State	ZIP Code	;		0 "1.
Burnsville	MN	55337		Personal Funds of the	Candidate
Original Amount of Loan	Cumulative Pa	ayment To D	ate B	alance Outstanding at Close of	This Period
5000.00			0.00	500	00.00
TERMS Date Incurred	[Date Due	Interest R		d:
M10 ^M / P23 ^D / Y Z013 Y	M M / D D) / Y 1)	(If none, er	0.00	
				% (apr) Yes	s X No
List All Endorsers or Guarantors (if any)	to Loan Source				
1. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address		(Occupation		
		<u> </u>	Amount		
City	ZIP Code		Guaranteed Outstanding:	, , ,	
2. Full Name (Last, First, Middle Initial)		1	Name of Employer		
Mailing Address		•	Occupation		
			Amount		
City	ZIP Code		Guaranteed Outstanding:		
3. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address		(Occupation		
			Amount		_
City	ZIP Code	I .	Guaranteed Outstanding:	. , ,	
4. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address		(Occupation		
			Amount		
City State	ZIP Code		Guaranteed		
Old College	Zii Godo	(Outstanding:	7 7 7 7	
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Carry outstanding balance only to LINE 3. S	criedule D, for thi	is line. It no	o ochequie Di carry to	orwaru to appropriate line of S	ummary.

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5205
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item Clection: 2014	
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
5000.00	,	0.00 5000.00
TERMS Date Incurred	[Date Due Interest Rate Secured: (If none, enter 0)
M11M / D04D / Y Ž01Š Y	M M / D D	/ Y 1//1/20 Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
CURTOTAL C. This Desired This Desire (asking		
SUBTOTALS This Period This Page (optional	11)	5000.00
TOTALS This Period (last page in this line of	only)	······
Carry outstanding balance only to LINE 3,	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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OF

		130
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5206
		I
LOAN SOURCE Full Name (Last, First, Mic Gerson, David, Adam, ,	ddle Initial)	☐ Memo Item
Mailing Address PO Box 1465		General Other (specify) ▼
City	State	ZIP Code
Burnsville	MN	55337 Personal Funds of the Candidate
Original Amount of Loan	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period
4000.00	2	0.00 4000.00
TERMS Date Incurred	С	ate Due Interest Rate Secured: (If none, enter 0)
M11M / D13D / Y Ž01Š Y	M M / D D	/ Y 1/1/20 Y 0.00
List All Endorsers or Guarantors (if any) t	o Loan Source	
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	-	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)		4000.00
TOTALS This Period (last page in this line only	/)	······································
Carry outstanding balance only to LINE 3, Sci	nedule D, for this	line. If no Schedule D, carry forward to appropriate line of Summary.

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

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FOR LINE NUMBER: (check only one)

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OF

									130
AME OF COMMITTEE (In Full) Gerson for Congress					Trans	action II	D : SC/10.520)7	
LOAN SOURCE Full Name (Last, First, Middle Initial) Gerson, David, Adam, ,] Memo Ite	×	tion: 2014 Primary General	E.)	
Mailing Address PO Box 1465							Other (specif	y) ▼	
City Burnsville		State MN	ZIP Cod 55337	de		×	Personal Fu	unds of th	e Candidate
Original Amount of Loan		Cumulative Pay		Date	В:	alance C	Outstanding a	t Close o	f This Period
3000.0	0	,	,	0.00			7		000.00
TERMS Date Incurred		D	ate Due		Interest Ra (If none, en			Secui	red:
M11M / D19D / Y Ž013	Y	M M / D D	/ Y	1)1/20 Y		0.00	% (apr)	Y	res 🗶 No
List All Endorsers or Guarantors (if	anv) to	Loan Source							
1. Full Name (Last, First, Middle Init	• •			Name of Em	ployer				
Mailing Address				Occupation					
				Amount					
City	State	ZIP Code		Guaranteed Outstanding:		,			
2. Full Name (Last, First, Middle Initia	al)	1		Name of Employer					
Mailing Address				Occupation					
				Amount					
City	State	ZIP Code		Guaranteed Outstanding:		7	7		
3. Full Name (Last, First, Middle Initial	al)			Name of Em	ployer				
Mailing Address				Occupation					
				Amount					
City	State	ZIP Code		Guaranteed Outstanding:		7	7		
4. Full Name (Last, First, Middle Initial)				Name of Em	ployer				
Mailing Address			Occupation						
				Amount					_
City	State	ZIP Code		Guaranteed Outstanding:		7	- 9		
SUBTOTALS This Period This Page (op	tional)				. г				
TOTALS This Period (last page in this li						++	7	30	000.00
					•		7	7	
Carry outstanding balance only to LINE	3, Sch	edule D, for this	line. If	no Schedule I	D, carry fo	rward t	o appropriat	e line of	Summary.

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

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FOR LINE NUMBER: (check only one)

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OF

							130
AME OF COMMITTEE (In Full) Gerson for Congress					Transac	ction ID : SC/10.5208	
LOAN SOURCE Full Name (Last,	First, Mi	ddle Initial)			Memo Item	Election: 2014	
Gerson, David, Adam, ,	Gerson, David, Adam, ,					Primary General	
Mailing Address PO Box 1465						Other (specify)	
City		State	ZIP Cod	le			
Burnsville		MN	55337			Personal Funds of the Car	ndidate
Original Amount of Loan		Cumulative Pag	yment To	Date	Bala	ance Outstanding at Close of This	Period
4000	0.00	2	,	0.00		4000.00)
TERMS Date Incurred		D	Date Due		Interest Rate (If none, ente		
M11M / D29D / Y Z013	Y	M M / D D) / Y	1)1/20 Y	0	00 % (apr) Yes	x No
List All Endorsers or Guarantors	(if any) t	o Loan Source					
1. Full Name (Last, First, Middle I	nitial)			Name of Em	ployer		
Mailing Address				Occupation			,
0.4	04-4-	71D 0-4-		Amount Guaranteed			
City	State	ZIP Code		Outstanding:		9 9	
2. Full Name (Last, First, Middle In	itial)			Name of Em	ployer		
Mailing Address				Occupation			
O't.	01-1-	7ID 0-4-		Amount Guaranteed			
City	State	ZIP Code		Outstanding:		7 7	
3. Full Name (Last, First, Middle In	itial)			Name of Em	ployer		
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed			
City	State	ZIP Code		Outstanding:		9 9 9	
4. Full Name (Last, First, Middle In	itial)			Name of Em	ployer		
Mailing Address			Occupation				
01			Amount Guaranteed				
City	State	ZIP Code	Outstanding:		7		
SUBTOTALS This Period This Page (optional).					4000.00	
TOTALS This Period (last page in this	s line only	y)					
Carry outstanding balance only to LI	NE 3, Scl	hedule D, for this	s line. If r	o Schedule	D, carry for	ward to appropriate line of Sumi	mary.

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

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OF

						100	
AME OF COMMITTEE (In Full) Gerson for Congress					Transa	ction ID : SC/10.5209	
LOAN SOURCE Full Name (Last,	First, Mi	ddle Initial)			Memo Item	Election: 2014	
Gerson, David, Adam, ,					x Primary		
Mailing Address						General Other (specify) ▼	
Mailing Address PO Box 1465						Other (specify) •	
City		State	ZIP Cod	de		Borner Street	
Burnsville		MN	55337			Personal Funds of the Candidat	
Original Amount of Loan		Cumulative Pa	yment To	Date	Bala	ance Outstanding at Close of This Period	
4000	0.00	2		0.00)	4000.00	
TERMS Date Incurred		C	Date Due		Interest Rate (If none, ente		
M12M / D09D / Y Ž013	Y	M M / D D	/ Y	1)1/20 Y		.00	
List All Endorsers or Guarantors	(if any)	to Loan Source					
Full Name (Last, First, Middle I	, ,,	LO LOUIT GOUIGO		Name of Em	ployer		
Mailing Address				Occupation			
				Amount			
City	State	ZIP Code		Guaranteed Outstanding:		9 9	
2. Full Name (Last, First, Middle In	nitial)			Name of Employer			
Mailing Address				Occupation			
				Amount			
City	State	ZIP Code		Guaranteed Outstanding:		7	
3. Full Name (Last, First, Middle Ir	nitial)			Name of Em	ployer		
Mailing Address				Occupation			
				Amount			
City	State	ZIP Code		Guaranteed Outstanding:		7	
4. Full Name (Last, First, Middle Initial)				Name of Em	ployer		
Mailing Address			Occupation				
				Amount			
City	State	ZIP Code Guarar Outsta				9 9 9 9	
SUBTOTALS This Period This Page (optional).				▶	4000.00	
TOTALS This Period (last page in this	s line onl	y)			▶	, ,	
Carry outstanding balance only to LI	NE 3. Sc	hedule D. for this	s line. If	no Schedule	D, carry for	ward to appropriate line of Summary.	
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Use separate schedule(s) for each category of the Detailed Summary Page

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		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5210
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item Clection: 2014	
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
3000.00		0.00 3000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M12M / D16D / Y Ž013 Y	M M / D D	/ Y 1ÿ1/2ŏ Y 0.00
List All Endorsers or Guarantors (if any	/) to Loan Source	
Full Name (Last, First, Middle Initial)	,	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	-	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (option		
CODICIALS This Fellou This Fage (option	ai)	3000.00
TOTALS This Period (last page in this line	only)	······································
Carry outstanding balance only to LINE 3,	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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Transaction ID: SC/10.5542 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 3000.00 0.00 3000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D08D M01M ž014 1/1/20 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 3000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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Transaction ID: SC/10.5543 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 ^D16^D M 01M ž014 1/1/20 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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					1	130				
	AME OF COMMITTEE (In Full) Gerson for Congress				Trans	saction ID : SC/10.5544				
		Circh Mile	- - :4:- \			Tet ii				
	LOAN SOURCE Full Name (Last, First, Middle Initial) Gerson, David, Adam, , Mailing Address PO Box 1465 City State ZIP Co Burnsville MN 55337 Original Amount of Loan Cumulative Payment To				☐ Memo Ite	x Primary				
						General Other (specify) ▼				
					de	Personal Funds of the Candidate				
						reisonal runds of the Candidate				
					Date Balance Outstanding at Close of Thi					
	10000	0.00	7		0.00					
	TERMS Date Incurred		D	ate Due	Interest F (If none, e					
	M02 ^M / D26 ^D / Y Ž014	Υ	M M / D D	/ Y	1ÿ1/2Ŏ ^Y	0.00 % (apr) Yes X No				
	List All Endorsers or Guarantors	(if any) to	o Loan Source							
	1. Full Name (Last, First, Middle I	nitial)			Name of Employer					
	Mailing Address				Occupation					
					Amount					
	City	State	ZIP Code		Guaranteed Outstanding:	, , , , , , ,				
	Full Name (Last, First, Middle Initial) Mailing Address				Name of Employer					
					Occupation					
					Amount					
	City	State	ZIP Code		Guaranteed Outstanding:	, , , , , , , ,				
	Full Name (Last, First, Middle Initial) Mailing Address				Name of Employer					
					Occupation					
					Amount					
	City	State	ZIP Code		Guaranteed Outstanding:					
	Full Name (Last, First, Middle Initial) Mailing Address				Name of Employer					
					Occupation					
					Amount					
	City	State	ZIP Code		Guaranteed Outstanding:	9 9				
		•	•							
S	SUBTOTALS This Period This Page (optional)————————————————————————————————————									
T	TOTALS This Period (last page in this line only)									
	Carry outstanding balance only to LI	NE 3, Sch	edule D, for this	s line. If	no Schedule D, carry f	orward to appropriate line of Summary.				
	<u> </u>	,	,		. , .					

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

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						•				I3D
AME OF COMMITTEE (In Full) Gerson for Congress					Trans	saction I	D : SC/10.558	37		
LOAN SOURCE Full Name (Last, Finderson, David, Adam, , Mailing Address PO Box 1465			Memo Ite	Elec	ction: 2014 Primary General Other (speci	fy) ▼				
City		State MN	ZIP Cod	le		×	Personal Fu	unds of th	he Candi	idate
Burnsville			55337							
Original Amount of Loan		Cumulative Pay	ment To			alance (Outstanding a			eriod
391.0	0		7	0.00			2	9	391.00	
TERMS Date Incurred		D	ate Due		Interest R (If none, er			Secu	ıred:	
M10M / D28D / Y Ž014	Y	M M / D D	/ Y	YNA Y		0.00	% (apr)		Yes x	No
List All Endorsers or Guarantors (if	any) to	Loan Source								
1. Full Name (Last, First, Middle Init	tial)			Name of Em	ployer					
Mailing Address				Occupation Amount						
City State ZIP Code				Guaranteed Outstanding:						
2. Full Name (Last, First, Middle Initi	al)			Name of Employer						
Mailing Address				Occupation						
				Amount						
City	State	ZIP Code		Guaranteed Outstanding:		7	- 7			
3. Full Name (Last, First, Middle Initial)				Name of Employer						
Mailing Address				Occupation						
				Amount					_	
City	State	ZIP Code		Guaranteed Outstanding:		-,				
Full Name (Last, First, Middle Initial) Mailing Address				Name of Employer						
				Occupation						
				Amount						
City	State	ZIP Code		Guaranteed Outstanding:		7	7			
CURTOTAL C This Deviced This Dags (or	tional\									$\overline{}$
SUBTOTALS This Period This Page (optional)										
**OTALS This Period (last page in this line only)										
Carry outstanding balance only to LINE	3, Sch	edule D, for this	line. If r	no Schedule	D, carry fo	orward t	to appropriat	te line of	Summa	ary.

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						•			130
AME OF COMMITTEE (In Full) Gerson for Congress					Trans	action II	D : SC/10.560	08	
LOAN SOURCE Full Name (Last, Gerson, David, Adam, , Mailing Address PO Box 1465			Memo Iter	x	tion: 2016 Primary General Other (speci	fy) ▼			
		I a. .	l =:= a ·						
City Burnsville		State MN	ZIP Code 55337			×	Personal Fu	unds of th	ne Candidate
Original Amount of Loan		Cumulative Pay		to	D.	olanaa C) utotonding a	t Class s	of This Darie
3500	Therit to ba	0.00		alalice C	outstanding a	-	500.00		
TERMS Date Incurred		D	ate Due		Interest Ra			Secu	ıred:
^M 03 ^M / ^D 04 ^D / Y Ž01Š	Υ	M M / D D	/ Y YN	A ^Y		0.00	% (apr)		Yes 🗶 No
List All Endorsers or Guarantors	(if any) t	o Loan Source							
1. Full Name (Last, First, Middle II	nitial)		Na	ame of Emp	ployer				
Mailing Address			O	ccupation					
	T -	T		Amount Guaranteed					$\overline{}$
City State ZIP Code				Outstanding:					
2. Full Name (Last, First, Middle In	itial)	1	Na	Name of Employer Occupation					
Mailing Address									
City	State	ZIP Code	G	mount uaranteed utstanding:		7	-,		
3. Full Name (Last, First, Middle In	itial)		Na	Name of Employer Occupation					
Mailing Address			0						
City	State	ZIP Code	G	mount uaranteed utstanding:		,			
4. Full Name (Last, First, Middle Initial) Mailing Address				Name of Employer Occupation					
								C'h.	04-4-
City	State	ZIP Code		utstanding:		7	7	- W	
UBTOTALS This Period This Page (optional)									
FOTALS This Period (last page in this					▶		7	7	-
Carry outstanding balance only to LII	NE 3, Sch	nedule D, for this	line. If no	Schedule [D, carry fo	rward t	o appropria	te line of	Summary.

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		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5867
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2016
Gerson, David, Adam, ,	madio miliary	Memo Item Clection: 2016
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code Second Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
5000.00		0.00 5000.00
TERMS Date Incurred]	Date Due Interest Rate Secured: (If none, enter 0)
M08M / D12D / Y Ž01Š Y	M M / D D	/ Y YNA Y O.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any)	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	1	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
CURTOTAL C This Deviced This Dane (subtiness	n	
SUBTOTALS This Period This Page (optional		5000.00
TOTALS This Period (last page in this line o	nly)	······································
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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13b Transaction ID: SC/10.5980 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2016 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 10000.00 0.00 10000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D08D M09M Ž015 YNA Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 10000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.6013
LOAN SOURCE Full Name (Last, First, I	Middle Initial)	Memo Item Election: 2016
Gerson, David, Adam, ,	viidale iriitalij	Memo Item Clection: 2016
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
33932.59		0.00 33932.59
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M09M / D30D / Y Ž01Š Y	M M / D D	/ Y YNAY Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	<u> </u>	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	·	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional		
SOBIOTALS THIS PERIOD THIS Page (options		33932.59
TOTALS This Period (last page in this line of	only)	
Carry outstanding balance only to LINE 3,	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.6284
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2016
Gerson, David, Adam, ,	viidale iiitialy	Memo Item Clection: 2016
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
50000.00	J,	0.00 50000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M12M / D23D / Y Ž01Š Y	M M / D D	0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
	I	Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional	.h	
ODDIVIALS This Period This Page (optional		50000.00
TOTALS This Period (last page in this line of	nly)	······································
Carry outstanding balance only to LINE 3, 5	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

PAGE FOR LINE NUMBER: (check only one)

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×	13a
	13b

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Transaction ID: SC/10.6765 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2016 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 25000.00 0.00 25000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D30 D M 03M ž016 YNA Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 25000.00 TOTALS This Period (last page in this line only)..... 275000.00 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.