

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

Follow the North Star Fund

ADDRESS (number and street)
 #125
 Check if different than previously reported. (ACC)

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

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 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 / / 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 / / in the State of

5. Covering Period / / through / /

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

Halbach, Gerald, , ,

Type or Print Name of Treasurer

Signature of Treasurer Halbach, Gerald, , , [Electronically Filed] Date / /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office Use Only									
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Follow the North Star Fund

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2017"/>	<input type="text" value="45723.17"/>	<input type="text" value="45723.17"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="691.73"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="207409.11"/>	<input type="text" value="330742.44"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="208100.84"/>	<input type="text" value="376465.61"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="138836.15"/>	<input type="text" value="307200.92"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="69264.69"/>	<input type="text" value="69264.69"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Follow the North Star Fund

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

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).....	98250.00	133250.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	98250.00	133250.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	105833.00	194166.33
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	204083.00	327416.33
12. Transfers From Affiliated/Other Party Committees.....	3326.11	3326.11
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	207409.11	330742.44
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	207409.11	330742.44

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	68836.15	152200.92
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	68836.15	152200.92
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	62500.00	147500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	7500.00	7500.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	138836.15	307200.92
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	138836.15	307200.92

DETAILED SUMMARY PAGE
of Disbursements

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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)	204083.00	327416.33
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	204083.00	327416.33
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	68836.15	152200.92
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	68836.15	152200.92

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 48
	<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)
Follow the North Star Fund

A. Azzam, Nancy, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2300 Noble Ave. N
 City Golden Valley State MN Zip Code 55422
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 10 / 05 / 2017
Transaction ID : C22576174
 Amount of Each Receipt this Period 1250.00
 Memo Item

B. Brooks, James, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11100 Santa Monica Blvd Ste 400
 City Los Angeles State CA Zip Code 90025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Producer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 19 / 2017
Transaction ID : C22546336
 Amount of Each Receipt this Period 5000.00
 Memo Item

C. Burgos, Tonio, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 Broadway Ste 1504
 City New York State NY Zip Code 10006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Tonio Burgos & Associates Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 11 / 06 / 2017
Transaction ID : C22654519
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	7250.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 48
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Follow the North Star Fund

A. Carsey, Marcia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11601 Wilshire Blvd, #1840
 City Los Angeles State CA Zip Code 90025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Carey-Werner Occupation (for Individual) Producer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2017
Transaction ID : C22537860
 Amount of Each Receipt this Period
 5000.00
 Memo Item

B. Forster, Barbara, Louise, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 901 S. Second St Unit 603
 City Minneapolis State MN Zip Code 55401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2017
Transaction ID : C22676654
 Amount of Each Receipt this Period
 5000.00
 Memo Item

C. George, William, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2284 W Lake Of The Isles Pkwy
 City Minneapolis State MN Zip Code 55405-2434
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 24 / 2017
Transaction ID : C22540836
 Amount of Each Receipt this Period
 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	11000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Follow the North Star Fund

A. Haselow, Robert, E, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6408 Interlachen Blvd
 City Edina State MN Zip Code 55436-1002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Methodist Hospital Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2017
Transaction ID : C22669246
 Amount of Each Receipt this Period
 5000.00
 Memo Item

B. Hendrickson, Lawrence, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 901 S 2nd St Unit 603
 City Minneapolis State MN Zip Code 55415-2119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Insurance Agent Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 20 / 2017
Transaction ID : C22687496
 Amount of Each Receipt this Period
 1000.00
 Memo Item

C. Hornidge, Ann-Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 79 Wilsondale St
 City Dover State MA Zip Code 02030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Mintz Levin Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2017
Transaction ID : C22546341
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	6250.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Follow the North Star Fund

A. Huss, Alvin, John, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 59 West 4th Street
 Apt 21A
 City Saint Paul State MN Zip Code 55102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 20 / 2017
Transaction ID : C22687494
 Amount of Each Receipt this Period
 5000.00
 Memo Item

B. Huss, Ruth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 59 West 4th Street
 Apt 21A
 City Saint Paul State MN Zip Code 55102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 20 / 2017
Transaction ID : C22687495
 Amount of Each Receipt this Period
 5000.00
 Memo Item

C. Lawrence, James, Arthur, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4415 East Lake Harriet Parkway
 City Minneapolis State MN Zip Code 55419
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CEO/ Chairman Occupation (for Individual) Rothschild North America/Great North S
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2017
Transaction ID : C22687492
 Amount of Each Receipt this Period
 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	15000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Follow the North Star Fund

A. Lawrence, Mary, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4415 East Lake Harriet Parkway
 City Minneapolis State MN Zip Code 55419
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) University of Minnesota Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 28 / 2017
Transaction ID : C22687493
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. Lee, Barbara, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 Mount Auburn St Ste 3
 City Boston State MA Zip Code 02138-5752
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Philanthropist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 19 / 2017
Transaction ID : C22673900
 Amount of Each Receipt this Period 5000.00
 Memo Item

C. McGrath, Kathleen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16000 Ventura Blvd Ste 900
 City Encino State CA Zip Code 91436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CEO Occupation (for Individual) Bad Robot
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 16 / 2017
Transaction ID : C22540846
 Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	15000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 48
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Follow the North Star Fund

A. Messenger, Alida, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 Stagecoach Trl S
 City Afton State MN Zip Code 55001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Philanthropist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **12 / 31 / 2017**
Transaction ID : C22676655
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. Murphy, Edward, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 79 Wilsondale St
 City Dover State MA Zip Code 02030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 01 / 2017**
Transaction ID : C22546340
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Tyukody, Daniel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3004 N Poissetia Ave
 City Man State CA Zip Code 90266
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Greenberg Traurig LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **08 / 06 / 2017**
Transaction ID : C22550753
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	6250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 48
<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)
Follow the North Star Fund

A. Gallogly, Mark, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 Central Park West, Apt 25D
 City New York State NY Zip Code 10025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Centerbrigde Partners, LLP Occupation (for Individual) Investor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 26 / 2017
Transaction ID : C22676651A
 Amount of Each Receipt this Period 5000.00
 Memo Item
 * Earmarked Contribution: See Below

B. ACTBLUE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 382110
 City Cambridge State MA Zip Code 02238-2110
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 37500.00

Date of Receipt 12 / 31 / 2017
Transaction ID : C22676651AB
 Amount of Each Receipt this Period 5000.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Kratsch, Brenda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14255 Bataan St
 City Andover State MN Zip Code 55304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 21 / 2017
Transaction ID : C22676648A
 Amount of Each Receipt this Period 5000.00
 Memo Item
 * Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 13 OF 48
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Follow the North Star Fund

A. ACTBLUE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 382110
 City Cambridge State MA Zip Code 02238-2110
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 37500.00

Date of Receipt 12 / 24 / 2017
Transaction ID : C22676648AB
 Amount of Each Receipt this Period 5000.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

B. Kratsch, Charles, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14255 Bataan St NE
 City Andover State MN Zip Code 55304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 20 / 2017
Transaction ID : C22676647A
 Amount of Each Receipt this Period 5000.00
 Memo Item
 * Earmarked Contribution: See Below

C. ACTBLUE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 382110
 City Cambridge State MA Zip Code 02238-2110
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 37500.00

Date of Receipt 12 / 24 / 2017
Transaction ID : C22676647AB
 Amount of Each Receipt this Period 5000.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional)..... ▶ 5000.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Follow the North Star Fund

A. Kunin, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3939 East 46th Street
 City Minneapolis State MN Zip Code 55406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Beautopia LL Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 12 / 19 / 2017
Transaction ID : C22676646A
 Amount of Each Receipt this Period 2500.00
 Memo Item
 * Earmarked Contribution: See Below

B. ACTBLUE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 382110
 City Cambridge State MA Zip Code 02238-2110
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 37500.00

Date of Receipt 12 / 24 / 2017
Transaction ID : C22676646AB
 Amount of Each Receipt this Period 2500.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Smith, Bradford, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9665 Lake Washington Blvd NE
 City Bellevue State WA Zip Code 98004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Microsoft Corporation Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 22 / 2017
Transaction ID : C22676649A
 Amount of Each Receipt this Period 5000.00
 Memo Item
 * Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....	7500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 48
	<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)
Follow the North Star Fund

A. ACTBLUE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 382110

City Cambridge	State MA	Zip Code 02238-2110
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual) Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
37500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2017

Transaction ID : C22676649AB

Amount of Each Receipt this Period
5000.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Strickler, Elizabeth, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 300 Central Park W
Apt 25D

City New York	State NY	Zip Code 10024-1595
------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)
N/A Not Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	26	/	2017

Transaction ID : C22676650A

Amount of Each Receipt this Period
5000.00

Memo Item

* Earmarked Contribution: See Below

C. ACTBLUE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 382110

City Cambridge	State MA	Zip Code 02238-2110
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual) Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
37500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2017

Transaction ID : C22676650AB

Amount of Each Receipt this Period
5000.00

Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Follow the North Star Fund

A. Vorbrich, Mary Sue, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4309 Fremont Ave S
 City Minneapolis State MN Zip Code 55409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 29 / 2017
Transaction ID : C22676653A
 Amount of Each Receipt this Period 5000.00
 Memo Item
 * Earmarked Contribution: See Below

B. ACTBLUE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 382110
 City Cambridge State MA Zip Code 02238-2110
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 37500.00

Date of Receipt 12 / 31 / 2017
Transaction ID : C22676653AB
 Amount of Each Receipt this Period 5000.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Vorbrich, Peter, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4309 Fremont Ave S
 City Minneapolis State MN Zip Code 55409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CSM Corporation Occupation (for Individual) Chief Operating Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 29 / 2017
Transaction ID : C22676652A
 Amount of Each Receipt this Period 5000.00
 Memo Item
 * Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 17 OF 48
(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)
Follow the North Star Fund

A. ACTBLUE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 382110

City Cambridge	State MA	Zip Code 02238-2110
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual) Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
37500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 31 / 2017
Transaction ID : C22676652AB

Amount of Each Receipt this Period
5000.00

Memo Item

Note: Above Contribution earmarked through this organization.

B.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

C.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	98250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 48
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Follow the North Star Fund

A. ACTION COMMITTEE. FOR RURAL ELECTRIFICATION. (ACRE)
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4301 WILSON BOULEVARD
 City ARLINGTON State VA Zip Code 22203
 FEC ID number of contributing federal political committee. **C** C00002972
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **07 / 10 / 2017**
Transaction ID : C22546337
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. AMERICAN ASSOCIATION FOR JUSTICE POLITICAL ACTION
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 6th Street, NW Suite 200
 City Washington State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C** C00024521
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **10 / 02 / 2017**
Transaction ID : C22576172
 Amount of Each Receipt this Period 5000.00
 Memo Item

C. American Dental PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1111 14TH STREET, NW SUITE 1100
 City WASHINGTON State DC Zip Code 20005
 FEC ID number of contributing federal political committee. **C** C00000729
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **12 / 19 / 2017**
Transaction ID : C22673894
 Amount of Each Receipt this Period 2500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 12500.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 48
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Follow the North Star Fund

A. AMERICAN FEDERATION OF STATE, COUNTY AND MUNICIPAL

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1625 L STREET NW

City WASHINGTON	State DC	Zip Code 20036
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00011114

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	02	/	2017

Transaction ID : C22576170

Amount of Each Receipt this Period
2500.00

Memo Item

B. BNSF RAILWAY COMPANY RAILPAC (BNSF RAILPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 961039

City FORT WORTH	State TX	Zip Code 76161
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00235739

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2017

Transaction ID : C22668042

Amount of Each Receipt this Period
2500.00

Memo Item

C. COMCAST CORP. POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1500 Market Street
35th Floor

City Philadelphia	State PA	Zip Code 19102
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	20	/	2017

Transaction ID : C22687497

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	7500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 48
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Follow the North Star Fund

A. DELOITTE FEDERAL POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 365

City WASHINGTON	State DC	Zip Code 20044
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00211318

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2017

Transaction ID : C22559597

Amount of Each Receipt this Period
2500.00

Memo Item

B. DGA-PAC THE POLITICAL ACTION COMMITTEE OF THE DIRE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7920 SUNSET BOULEVARD

City LOS ANGELES	State CA	Zip Code 90046
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00311944

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	19	/	2017

Transaction ID : C22673899

Amount of Each Receipt this Period
5000.00

Memo Item

C. Express Scripts Inc PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address ONE EXPRESS WAY

City ST. LOUIS	State MO	Zip Code 63121
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00365072

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	04	/	2017

Transaction ID : C22663184

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 21 OF 48
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Follow the North Star Fund

A. Express Scripts Inc PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address ONE EXPRESS WAY

City ST. LOUIS	State MO	Zip Code 63121
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00365072

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2017

Transaction ID : C22680261

Amount of Each Receipt this Period
2500.00

Memo Item

B. GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1299 PENNSYLVANIA AVE NW
SUITE 900

City WASHINGTON	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	19	/	2017

Transaction ID : C22546335

Amount of Each Receipt this Period
1000.00

Memo Item

C. GENERAL MOTORS COMPANY POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25 Massachusetts Avenue, NW
Suite 400

City Washington	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00076810

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	04	/	2017

Transaction ID : C22663185

Amount of Each Receipt this Period
1500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 22 OF 48
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Follow the North Star Fund

A. HILTON WORLDWIDE POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7930 JONES BRANCH DRIVE, STE 1100

City MCLEAN	State VA	Zip Code 22102
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00213074

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2017

Transaction ID : C22576173

Amount of Each Receipt this Period
5000.00

Memo Item

B. HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 101 Constitution Avenue NW Suite 500 West

City Washington	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		20		2017

Transaction ID : C22687526

Amount of Each Receipt this Period
2500.00

Memo Item

C. HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 101 Constitution Avenue NW Suite 500 West

City Washington	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		19		2017

Transaction ID : C22673896

Amount of Each Receipt this Period
1500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	9000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 23 OF 48
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Follow the North Star Fund

A. INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1125 17TH ST, NW

City WASHINGTON	State DC	Zip Code 20036
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00029504

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2017

Transaction ID : C22669244

Amount of Each Receipt this Period
5000.00

Memo Item

B. INTERNATIONAL UNION OF PAINTERS AND ALLIED TRADES POLITICAL ACTION TOGETHER POLITICAL COMM

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7234 PARKWAY DRIVE

City HANOVER	State MD	Zip Code 21076
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00000885

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		11		2017

Transaction ID : C22668038

Amount of Each Receipt this Period
5000.00

Memo Item

C. Ironworkers Pol. Action League

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1750 New York Ave. NW
Suite 400

City Washington	State DC	Zip Code 20006
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00027359

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2017

Transaction ID : C22669245

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	15000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 24 OF 48
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Follow the North Star Fund

A. KPMG PARTNERS/PRINCIPALS AND EMPLOYEES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1801 K STREET, NW

City WASHINGTON	State DC	Zip Code 20006
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00280222

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	02	/	2017

Transaction ID : C22576168

Amount of Each Receipt this Period
2000.00

Memo Item

B. LABORERS' INTERNATIONAL UNION OF NORTH AMERICA (LI

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 905 16th St., N.W.
Second Floor

City Washington	State DC	Zip Code 20006
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00007922

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	02	/	2017

Transaction ID : C22576171

Amount of Each Receipt this Period
5000.00

Memo Item

C. MARRIOTT INTERNATIONAL, INC. POLITICAL ACTION COMM

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10400 Fernwood Road

City Bethesda	State MD	Zip Code 20817
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00284810

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2017

Transaction ID : C22559599

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	12000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 25 OF 48
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Follow the North Star Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. MEDTRONIC INC. MEDICAL TECHNOLOGY FUND

Mailing Address 950 F STREET NW SUITE 500

City WASHINGTON	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00311878

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	19	/	2017

Transaction ID : C22673895

Amount of Each Receipt this Period
5000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLIT

Mailing Address 1325 Massachusetts Ave. NW

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	10	/	2017

Transaction ID : C22546338

Amount of Each Receipt this Period
1000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLIT

Mailing Address 1325 Massachusetts Ave. NW

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2017

Transaction ID : C22571711

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	7000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 26 OF 48
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Follow the North Star Fund

A. NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLIT
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1325 Massachusetts Ave. NW
 City Washington State DC Zip Code 20005
 FEC ID number of contributing federal political committee. **C** C00238725
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **12 / 19 / 2017**
Transaction ID : C22673898
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL AC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1101 King Street Suite 600
 City Alexandria State VA Zip Code 22314
 FEC ID number of contributing federal political committee. **C** C00144766
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **07 / 10 / 2017**
Transaction ID : C22546339
 Amount of Each Receipt this Period 2500.00
 Memo Item

C. NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL AC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1101 King Street Suite 600
 City Alexandria State VA Zip Code 22314
 FEC ID number of contributing federal political committee. **C** C00144766
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **10 / 02 / 2017**
Transaction ID : C22576169
 Amount of Each Receipt this Period 2500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	6000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 27 OF 48
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Follow the North Star Fund

A. NATIONAL FRATERNAL ORDER OF POLICE PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 328 MASSACHUSETTS AVENUE NE

City WASHINGTON	State DC	Zip Code 20002
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00382556

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2017

Transaction ID : C22669249

Amount of Each Receipt this Period
5000.00

Memo Item

B. SABRE INC. POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1250 Connecticut Avenue NW Suite 825

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

FEC ID number of contributing federal political committee. **C** C00325811

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2017

Transaction ID : C22669248

Amount of Each Receipt this Period
1500.00

Memo Item

C. SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P O BOX 500

City RENVILLE	State MN	Zip Code 56284
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00166348

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2017

Transaction ID : C22680264

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	11500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 28 OF 48
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Follow the North Star Fund

A. THRIVENT FINANCIAL FOR LUTHERANS-EMPLOYEE POLITICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address POST OFFICE BOX 1892

City APPLETON	State WI	Zip Code 54912
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00121319

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
833.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2017

Transaction ID : C22669247

Amount of Each Receipt this Period
833.00

Memo Item

B. TOYOTA MOTOR NORTH AMERICA INC PAC AKA TOYOTA/LEXUS PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 601 THIRTEENTH STREET NW
STE 910 S

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00542365

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2017

Transaction ID : C22669250

Amount of Each Receipt this Period
2000.00

Memo Item

C. UBS Americas Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 400 ATLANTIC STREET
C/O PER DYRVIK

City STAMFORD	State CT	Zip Code 06901
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FEC ID number of contributing federal political committee. **C** C00012245

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2017

Transaction ID : C22676656

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	7833.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)	PAGE 29 OF 48
<input type="checkbox"/> 11a	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input checked="" type="checkbox"/> 11b	<input type="checkbox"/> 15
<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Follow the North Star Fund

A. UNION PACIFIC CORP. FUND FOR EFFECTIVE GOVERNMENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 700 13TH STREET NW, SUITE 350

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00010470

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 19 / 2017

Transaction ID : C22673897

Amount of Each Receipt this Period
2500.00

Memo Item

B.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

C.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	105833.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 30 OF 48
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Follow the North Star Fund

A. MIDWEST NORTH STARS
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 583144

City MINNEAPOLIS	State MN	Zip Code 55458
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00639369

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3326.11

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	20	/	2017

Transaction ID : C22687503

Amount of Each Receipt this Period
3326.11

Memo Item

B. Burgos, Tonio, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 115 Broadway
Ste 1504

City New York	State NY	Zip Code 10006
------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)
Tonio Burgos & Associates CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	30	/	2017

Transaction ID : C22687505

Amount of Each Receipt this Period
300.00

Memo Item

C. Little, William, E, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1107 5Th Avenue

City New York	State NY	Zip Code 10128-0145
------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)
Not employed Not employed

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	30	/	2017

Transaction ID : C22687504

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	3326.11
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 31 OF 48
(check only one)

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

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NAME OF COMMITTEE (In Full)
Follow the North Star Fund

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Zirkin, Nancy, , ,

Mailing Address 5630 Wisconsin Avenue

City Chevy Chase	State MD	Zip Code 20815-4458
---------------------	-------------	------------------------

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

Name of Employer (for Individual) LCCR	Occupation (for Individual) Lobbyist
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2017

Transaction ID : C22687506

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	3326.11

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)
Follow the North Star Fund

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services			Date of Disbursement MM / DD / YYYY 07 / 16 / 2017	
Mailing Address 14 Arrow Street			FEC Identification Number C [] Transaction ID : D669256 Amount of Each Disbursement this Period [] 197.50	
City Cambridge	State MA	Zip Code 02138	Category/Type []	
Purpose of Disbursement Credit Card Processing Fee			Candidate Name []	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>	
State: District:				
Full Name (Last, First, Middle Initial) B. ActBlue Technical Services			Date of Disbursement MM / DD / YYYY 08 / 06 / 2017	
Mailing Address 14 Arrow Street			FEC Identification Number C [] Transaction ID : D669257 Amount of Each Disbursement this Period [] 39.50	
City Cambridge	State MA	Zip Code 02138	Category/Type []	
Purpose of Disbursement Credit Card Processing Fee			Candidate Name []	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>	
State: District:				
Full Name (Last, First, Middle Initial) C. ActBlue Technical Services			Date of Disbursement MM / DD / YYYY 07 / 01 / 2017	
Mailing Address 14 Arrow Street			FEC Identification Number C [] Transaction ID : D669258 Amount of Each Disbursement this Period [] 19.76	
City Cambridge	State MA	Zip Code 02138	Category/Type []	
Purpose of Disbursement Credit Card Processing Fee			Candidate Name []	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>	
State: District:				
SUBTOTAL of Disbursements This Page (optional)..... ▶			[] 256.76	
TOTAL This Period (last page this line number only)..... ▶			[]	

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Follow the North Star Fund

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address 14 Arrow Street

City Cambridge State MA Zip Code 02138

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 05 / 2017

FEC Identification Number

C

Transaction ID : D675039

Amount of Each Disbursement this Period

49.38

Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address 14 Arrow Street

City Cambridge State MA Zip Code 02138

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 20 / 2017

FEC Identification Number

C

Transaction ID : D675538

Amount of Each Disbursement this Period

39.50

Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address 14 Arrow Street

City Cambridge State MA Zip Code 02138

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2017

FEC Identification Number

C

Transaction ID : D675539

Amount of Each Disbursement this Period

1481.25

Memo Item

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

1570.13

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Follow the North Star Fund

Full Name (Last, First, Middle Initial)

A. Campaign Compliance Solutions

Mailing Address 1170 Cushing Circle
#131

City Saint Paul State MN Zip Code 55108

Purpose of Disbursement
Compliance Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 27 / 2017

FEC Identification Number

C

Transaction ID : D669251

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Campaign Compliance Solutions

Mailing Address 1170 Cushing Circle
#131

City Saint Paul State MN Zip Code 55108

Purpose of Disbursement
Compliance Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 04 / 2017

FEC Identification Number

C

Transaction ID : D669252

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Campaign Compliance Solutions

Mailing Address 1170 Cushing Circle
#131

City Saint Paul State MN Zip Code 55108

Purpose of Disbursement
Compliance Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 01 / 2017

FEC Identification Number

C

Transaction ID : D675034

Amount of Each Disbursement this Period

2500.00

Memo Item

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

7500.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Follow the North Star Fund

Full Name (Last, First, Middle Initial)

A. Campaign Compliance Solutions

Mailing Address 1170 Cushing Circle
#131

City Saint Paul State MN Zip Code 55108

Purpose of Disbursement
Compliance Consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 21 / 2017

FEC Identification Number

C

Transaction ID : D675035

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Campaign Finance Consultants

Mailing Address 10 G St NE
Ste 570

City Washington State DC Zip Code 20002-4268

Purpose of Disbursement
Fundraising Consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 27 / 2017

FEC Identification Number

C

Transaction ID : D669249

Amount of Each Disbursement this Period

5110.16

Memo Item

Full Name (Last, First, Middle Initial)

C. Campaign Finance Consultants

Mailing Address 10 G St NE
Ste 570

City Washington State DC Zip Code 20002-4268

Purpose of Disbursement
Fundraising Consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 11 / 2017

FEC Identification Number

C

Transaction ID : D669250

Amount of Each Disbursement this Period

5171.28

Memo Item

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

10781.44

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Follow the North Star Fund

Full Name (Last, First, Middle Initial)

A. Campaign Finance Consultants

Mailing Address 10 G St NE
Ste 570

City Washington State DC Zip Code 20002-4268

Purpose of Disbursement
Fundraising Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 01 / 2017

FEC Identification Number

C

Transaction ID : D675031

Amount of Each Disbursement this Period

5101.78

Memo Item

Full Name (Last, First, Middle Initial)

B. Campaign Finance Consultants

Mailing Address 10 G St NE
Ste 570

City Washington State DC Zip Code 20002-4268

Purpose of Disbursement
Fundraising Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 21 / 2017

FEC Identification Number

C

Transaction ID : D675032

Amount of Each Disbursement this Period

15358.32

Memo Item

Full Name (Last, First, Middle Initial)

C. Melzer Investment Co

Mailing Address c/o Anderson Property Management 6

City Edina State MN Zip Code 55436

Purpose of Disbursement
Rent

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2017

FEC Identification Number

C

Transaction ID : D675020

Amount of Each Disbursement this Period

400.00

Memo Item

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

20860.10

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Follow the North Star Fund

A. Melzer Investment Co

Full Name (Last, First, Middle Initial)

Mailing Address c/o Anderson Property Management 6

City Edina State MN Zip Code 55436

Purpose of Disbursement Rent

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 01 / 2017

FEC Identification Number: C

Transaction ID : D675021

Amount of Each Disbursement this Period: 400.00

Memo Item

B. Melzer Investment Co

Full Name (Last, First, Middle Initial)

Mailing Address c/o Anderson Property Management 6

City Edina State MN Zip Code 55436

Purpose of Disbursement Rent

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 31 / 2017

FEC Identification Number: C

Transaction ID : D675023

Amount of Each Disbursement this Period: 400.00

Memo Item

C. Melzer Investment Co

Full Name (Last, First, Middle Initial)

Mailing Address c/o Anderson Property Management 6

City Edina State MN Zip Code 55436

Purpose of Disbursement Rent

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 28 / 2017

FEC Identification Number: C

Transaction ID : D675024

Amount of Each Disbursement this Period: 400.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1200.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Follow the North Star Fund

Full Name (Last, First, Middle Initial) A. Melzer Investments, Inc		Date of Disbursement MM / DD / YYYY 07 / 01 / 2017	
Mailing Address 328 E Hennepin Ave		FEC Identification Number C [] Transaction ID : D669253 Amount of Each Disbursement this Period [] 400.00	
City Minneapolis	State MN	Zip Code 55414	Category/ Type []
Purpose of Disbursement Rent		Candidate Name	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:			

Full Name (Last, First, Middle Initial) B. Melzer Investments, Inc		Date of Disbursement MM / DD / YYYY 08 / 01 / 2017	
Mailing Address 328 E Hennepin Ave		FEC Identification Number C [] Transaction ID : D669254 Amount of Each Disbursement this Period [] 400.00	
City Minneapolis	State MN	Zip Code 55414	Category/ Type []
Purpose of Disbursement Rent		Candidate Name	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:			

Full Name (Last, First, Middle Initial) C. Merchant Services		Date of Disbursement MM / DD / YYYY 07 / 03 / 2017	
Mailing Address 7300 Chapman Highway		FEC Identification Number C [] Transaction ID : D669245 Amount of Each Disbursement this Period [] 132.99	
City Knoxville	State TN	Zip Code 37920	Category/ Type []
Purpose of Disbursement Credit Card Processing Fees		Candidate Name	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:			

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

932.99

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)

Follow the North Star Fund

Full Name (Last, First, Middle Initial)

A. Merchant Services

Mailing Address 7300 Chapman Highway

City
Knoxville

State
TN

Zip Code
37920

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	2			2	0	1	7		

FEC Identification Number

C []

Transaction ID : D669246

Amount of Each Disbursement this Period

[] 132.99

Memo Item

Full Name (Last, First, Middle Initial)

B. Merchant Services

Mailing Address 7300 Chapman Highway

City
Knoxville

State
TN

Zip Code
37920

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	5			2	0	1	7		

FEC Identification Number

C []

Transaction ID : D675013

Amount of Each Disbursement this Period

[] 132.99

Memo Item

Full Name (Last, First, Middle Initial)

C. Merchant Services

Mailing Address 7300 Chapman Highway

City
Knoxville

State
TN

Zip Code
37920

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	2			2	0	1	7		

FEC Identification Number

C []

Transaction ID : D675014

Amount of Each Disbursement this Period

[] 247.97

Memo Item

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

[] 513.95

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

[]

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Follow the North Star Fund

Full Name (Last, First, Middle Initial)

A. Merchant Services

Mailing Address 7300 Chapman Highway

City Knoxville State TN Zip Code 37920

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 02 / 2017

FEC Identification Number

C

Transaction ID : D675015

Amount of Each Disbursement this Period

147.98

Memo Item

Full Name (Last, First, Middle Initial)

B. Merchant Services

Mailing Address 7300 Chapman Highway

City Knoxville State TN Zip Code 37920

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 04 / 2017

FEC Identification Number

C

Transaction ID : D675016

Amount of Each Disbursement this Period

147.98

Memo Item

Full Name (Last, First, Middle Initial)

C. New Partners Consulting

Mailing Address 1250 I St NW
Ste 200

City Washington State DC Zip Code 20005-5994

Purpose of Disbursement
Fundraising Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 01 / 2017

FEC Identification Number

C

Transaction ID : D675027

Amount of Each Disbursement this Period

4000.00

Memo Item

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

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

4295.96

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Follow the North Star Fund

A. New Partners Consulting

Full Name (Last, First, Middle Initial)

Mailing Address 1250 I St NW
Ste 200

City Washington State DC Zip Code 20005-5994

Purpose of Disbursement Fundraising Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
10 / 30 / 2017

FEC Identification Number: C

Transaction ID : D675028

Amount of Each Disbursement this Period: 4000.00

Memo Item

B. New Partners Consulting

Full Name (Last, First, Middle Initial)

Mailing Address 1250 I St NW
Ste 200

City Washington State DC Zip Code 20005-5994

Purpose of Disbursement Fundraising Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
12 / 21 / 2017

FEC Identification Number: C

Transaction ID : D675029

Amount of Each Disbursement this Period: 8000.00

Memo Item

C. New Partners Consulting

Full Name (Last, First, Middle Initial)

Mailing Address 1250 I St NW
Ste 200

City Washington State DC Zip Code 20005-5994

Purpose of Disbursement Fundraising Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 20 / 2017

FEC Identification Number: C

Transaction ID : D669247

Amount of Each Disbursement this Period: 4000.00

Memo Item

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

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

16000.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Follow the North Star Fund

Full Name (Last, First, Middle Initial) A. New Partners Consulting		Date of Disbursement MM / DD / YYYY 08 / 06 / 2017
Mailing Address 1250 I St NW Ste 200		FEC Identification Number C [] Transaction ID : D669248 Amount of Each Disbursement this Period 4000.00
City Washington	State DC	Zip Code 20005-5994
Purpose of Disbursement Fundraising Consulting		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. NGP VAN		Date of Disbursement MM / DD / YYYY 07 / 07 / 2017
Mailing Address 1101 15th St NW Ste 500		FEC Identification Number C [] Transaction ID : D669255 Amount of Each Disbursement this Period 300.00
City Washington	State DC	Zip Code 20005-5006
Purpose of Disbursement Database		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. NGP VAN		Date of Disbursement MM / DD / YYYY 09 / 08 / 2017
Mailing Address 1101 15th St NW Ste 500		FEC Identification Number C [] Transaction ID : D675037 Amount of Each Disbursement this Period 300.00
City Washington	State DC	Zip Code 20005-5006
Purpose of Disbursement Database		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	4600.00
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Follow the North Star Fund

Full Name (Last, First, Middle Initial) A. NGP VAN		Date of Disbursement MM / DD / YYYY 12 / 13 / 2017
Mailing Address 1101 15th St NW Ste 500		FEC Identification Number C Transaction ID : D675038 Amount of Each Disbursement this Period 300.00
City Washington	State DC	
Zip Code 20005-5006		Memo Item <input type="checkbox"/>
Purpose of Disbursement Database	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

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

SUBTOTAL of Disbursements This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	68811.33

**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"/> 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)
Follow the North Star Fund

A. BEN CARDIN FOR SENATE

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 21093

City
CATONSVILLE

State
MD

Zip Code
21228

Purpose of Disbursement
Contribution

Candidate Name

CARDIN, BENJAMIN L, , ,

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: MD District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			19			20	17		

FEC Identification Number

C C00411587

Transaction ID : D675045

Amount of Each Disbursement this Period

5000.00

Memo Item

B. BILL NELSON FOR U S SENATE

Full Name (Last, First, Middle Initial)

Mailing Address 972 W WHITMIRE DRIVE

City
MELBOURNE

State
FL

Zip Code
32935

Purpose of Disbursement
Contribution

Candidate Name

NELSON, BILL, , ,

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: FL District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
09			29			20	17		

FEC Identification Number

C C00344051

Transaction ID : D672624

Amount of Each Disbursement this Period

5000.00

Memo Item

C. Democratic Senatorial Campaign Committee

Full Name (Last, First, Middle Initial)

Mailing Address 120 Maryland Ave NE

City
Washington

State
DC

Zip Code
20002-5610

Purpose of Disbursement
Contribution to Building Fund

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			19			20	17		

FEC Identification Number

C C00042366

Transaction ID : D675046

Amount of Each Disbursement this Period

15000.00

Memo Item

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

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

25000.00

**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"/> 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)
Follow the North Star Fund

Full Name (Last, First, Middle Initial) A. DONNELLY FOR INDIANA		Date of Disbursement MM / DD / YYYY 09 / 29 / 2017
Mailing Address 1050 17TH ST NW STE 590		FEC Identification Number C C00393652 Transaction ID : D672627 Amount of Each Disbursement this Period 5000.00
City WASHINGTON	State DC	
Purpose of Disbursement Contribution	Zip Code 20036	Memo Item <input type="checkbox"/>
Candidate Name DONNELLY, JOSEPH S, , ,	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IN District: 00		

Full Name (Last, First, Middle Initial) B. DOUG JONES FOR SENATE COMMITTEE		Date of Disbursement MM / DD / YYYY 12 / 06 / 2017
Mailing Address PO BOX 131025		FEC Identification Number C C00640623 Transaction ID : D672628 Amount of Each Disbursement this Period 5000.00
City BIRMINGHAM	State AL	
Purpose of Disbursement Contribution	Zip Code 35213	Memo Item <input type="checkbox"/>
Candidate Name JONES, DOUG, , ,	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2017 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special	
State: AL District: 00		

Full Name (Last, First, Middle Initial) C. FEINSTEIN FOR SENATE		Date of Disbursement MM / DD / YYYY 09 / 29 / 2017
Mailing Address 1801 AVENUE OF THE STARS SUITE 829		FEC Identification Number C C00315176 Transaction ID : D672626 Amount of Each Disbursement this Period 5000.00
City LOS ANGELES	State CA	
Purpose of Disbursement Contribution	Zip Code 90067	Memo Item <input type="checkbox"/>
Candidate Name FEINSTEIN, DIANNE, , ,	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA District: 00		

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

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

15000.00

**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"/> 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)
Follow the North Star Fund

A. FRIENDS OF MAZIE HIRONO

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 677

City HONOLULU State HI Zip Code 96809

Purpose of Disbursement
Contribution

Candidate Name
HIRONO, MAZIE K, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: HI District: 00

Date of Disbursement
MM / DD / YYYY
09 / 29 / 2017

FEC Identification Number
C C00420760
Transaction ID : D672625
Amount of Each Disbursement this Period
2500.00

Memo Item

B. HEIDI FOR SENATE

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1577

City BISMARCK State ND Zip Code 58502

Purpose of Disbursement
Contribution

Candidate Name
HEITKAMP, HEIDI, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: ND District: 00

Date of Disbursement
MM / DD / YYYY
12 / 19 / 2017

FEC Identification Number
C C00505552
Transaction ID : D675043
Amount of Each Disbursement this Period
5000.00

Memo Item

C. MARTIN HEINRICH FOR SENATE

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 25763

City ALBUQUERQUE State NM Zip Code 87125

Purpose of Disbursement
Contribution

Candidate Name
HEINRICH, MARTIN TREVOR, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: NM District: 00

Date of Disbursement
MM / DD / YYYY
09 / 29 / 2017

FEC Identification Number
C C00434563
Transaction ID : D672623
Amount of Each Disbursement this Period
5000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 12500.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)
Follow the North Star Fund

A. MONTANANS FOR TESTER

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1135

City HELENA State MT Zip Code 59624

Purpose of Disbursement
Contribution

Candidate Name
TESTER, JON, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: MT District: 00

Date of Disbursement
MM / DD / YYYY
09 / 29 / 2017

FEC Identification Number
C C00412304
Transaction ID : D672622
Amount of Each Disbursement this Period
5000.00

Memo Item

B. WHITEHOUSE FOR SENATE

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 40280

City PROVIDENCE State RI Zip Code 02940

Purpose of Disbursement
Contribution

Candidate Name
WHITEHOUSE, SHELDON II, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: RI District: 00

Date of Disbursement
MM / DD / YYYY
12 / 19 / 2017

FEC Identification Number
C C00410803
Transaction ID : D675044
Amount of Each Disbursement this Period
5000.00

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY

FEC Identification Number
C
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	10000.00
TOTAL This Period (last page this line number only).....▶	62500.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Follow the North Star Fund

A. Take Action Minnesota

Full Name (Last, First, Middle Initial)

Mailing Address 1821 University Ave W
Ste S137

City Saint Paul State MN Zip Code 55104-2891

Purpose of Disbursement Event Sponsorship

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 20 / 2017

FEC Identification Number: C
Transaction ID : D675040
Amount of Each Disbursement this Period: 2500.00

Memo Item

B. WOMENWINNING FEDERAL PAC

Full Name (Last, First, Middle Initial)

Mailing Address 2610 UNIVERSITY AVE W
STE 325

City SAINT PAUL State MN Zip Code 55114

Purpose of Disbursement Contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 21 / 2017

FEC Identification Number: C
C00282327
Transaction ID : D675041
Amount of Each Disbursement this Period: 5000.00

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	7500.00
TOTAL This Period (last page this line number only).....▶	7500.00