

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

12FE4M5

FRIENDS OF MARGARET ENGBRETSON

ADDRESS (number and street) 128 VADNAIS AVE

Check if different than previously reported. (ACC)

BALSAM LAKE

WI

54810

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00669143

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

WI

07

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)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y 2018

through

M M /

D D /

Y Y Y Y 2018

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

Schlacks, Deborah, , ,

Type or Print Name of Treasurer

Schlacks, Deborah, , ,

Signature of Treasurer

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y 2018

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

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
FRIENDS OF MARGARET ENGBRETSON

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	14868.21	28573.39
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	14868.21	28573.39
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	17591.65	22599.38
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	17591.65	22599.38
8. Cash on Hand at Close of Reporting Period (from Line 27).....	5992.76	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	2890.85	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

FRIENDS OF MARGARET ENGEBRETSON

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5743.22	10048.22
(ii) Unitemized	9124.99	18525.17
(iii) TOTAL of contributions from individuals	14868.21	28573.39
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	14868.21	28573.39
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	18.75
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	14868.21	28592.14

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	17591.65	22599.38
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	17591.65	22599.38

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	8716.20
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	14868.21
25. SUBTOTAL (add Line 23 and Line 24).....	23584.41
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	17591.65
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	5992.76

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

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

FOR LINE NUMBER: PAGE 5 OF 47
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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)
FRIENDS OF MARGARET ENGEBRETSON

A. Full Name (Last, First, Middle Initial)
ActBlue Technical Services
Mailing Address PO Box 441146

City Somerville State MA Zip Code 02144

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

Name of Employer Occupation

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 01 / 2018

Transaction ID : SA11AI.5004

Amount of Each Receipt this Period
 300.00

Memo Item
 Total earmarked through conduit; PAC limit not affected.

B. Full Name (Last, First, Middle Initial)
ActBlue Technical Services
Mailing Address PO Box 441146

City Somerville State MA Zip Code 02144

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

Name of Employer Occupation

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 08 / 2018

Transaction ID : SA11AI.5003

Amount of Each Receipt this Period
 955.00

Memo Item
 Total earmarked through conduit; PAC limit not affected.

C. Full Name (Last, First, Middle Initial)
ActBlue Technical Services
Mailing Address PO Box 441146

City Somerville State MA Zip Code 02144

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

Name of Employer Occupation

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 15 / 2018

Transaction ID : SA11AI.5002

Amount of Each Receipt this Period
 1160.00

Memo Item
 Total earmarked through conduit; PAC limit not affected.

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 6 OF 47	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MARGARET ENGEBRETSON

A. Full Name (Last, First, Middle Initial)
ActBlue Technical Services

Mailing Address PO Box 441146

City Somerville	State MA	Zip Code 02144
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FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2018

Transaction ID : SA11AI.5001

Amount of Each Receipt this Period
 110.00

Memo Item
 Total earmarked through conduit; PAC limit not affected.

B. Full Name (Last, First, Middle Initial)
ActBlue Technical Services

Mailing Address PO Box 441146

City Somerville	State MA	Zip Code 02144
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FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 29 / 2018

Transaction ID : SA11AI.5000

Amount of Each Receipt this Period
 30.00

Memo Item
 Total earmarked through conduit; PAC limit not affected.

C. Full Name (Last, First, Middle Initial)
ActBlue Technical Services

Mailing Address PO Box 441146

City Somerville	State MA	Zip Code 02144
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FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 06 / 2018

Transaction ID : SA11AI.4999

Amount of Each Receipt this Period
 50.00

Memo Item
 Total earmarked through conduit; PAC limit not affected.

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

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

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

FOR LINE NUMBER: PAGE 7 OF 47
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MARGARET ENGEBRETSON

A. Full Name (Last, First, Middle Initial)
ActBlue Technical Services
Mailing Address PO Box 441146

City: Somerville State: MA Zip Code: 02144

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

Name of Employer: Occupation:

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 05 / 13 / 2018
Transaction ID : SA11AI.4998

Amount of Each Receipt this Period: 186.00

Memo Item
 Total earmarked through conduit; PAC limit not affected.

B. Full Name (Last, First, Middle Initial)
ActBlue Technical Services
Mailing Address PO Box 441146

City: Somerville State: MA Zip Code: 02144

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

Name of Employer: Occupation:

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 05 / 20 / 2018
Transaction ID : SA11AI.4997

Amount of Each Receipt this Period: 330.00

Memo Item
 Total earmarked through conduit; PAC limit not affected.

C. Full Name (Last, First, Middle Initial)
ActBlue Technical Services
Mailing Address PO Box 441146

City: Somerville State: MA Zip Code: 02144

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

Name of Employer: Occupation:

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 05 / 27 / 2018
Transaction ID : SA11AI.4996

Amount of Each Receipt this Period: 325.00

Memo Item
 Total earmarked through conduit; PAC limit not affected.

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER: PAGE 8 OF 47
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MARGARET ENGEBRETSON

A. Full Name (Last, First, Middle Initial)
ActBlue Technical Services

Mailing Address PO Box 441146

City Somerville State MA Zip Code 02144

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

Name of Employer Occupation

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 03 / 2018

Transaction ID : SA11AI.4995

Amount of Each Receipt this Period
621.00

Memo Item
Total earmarked through conduit; PAC limit not affected.

B. Full Name (Last, First, Middle Initial)
ActBlue Technical Services

Mailing Address PO Box 441146

City Somerville State MA Zip Code 02144

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

Name of Employer Occupation

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 10 / 2018

Transaction ID : SA11AI.4994

Amount of Each Receipt this Period
1425.00

Memo Item
Total earmarked through conduit; PAC limit not affected.

C. Full Name (Last, First, Middle Initial)
ActBlue Technical Services

Mailing Address PO Box 441146

City Somerville State MA Zip Code 02144

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

Name of Employer Occupation

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 17 / 2018

Transaction ID : SA11AI.4993

Amount of Each Receipt this Period
243.00

Memo Item
Total earmarked through conduit; PAC limit not affected.

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER: PAGE 9 OF 47
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MARGARET ENGEBRETSON

A. Full Name (Last, First, Middle Initial)
ActBlue Technical Services
Mailing Address PO Box 441146

City Somerville	State MA	Zip Code 02144
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FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 24 / 2018

Transaction ID : SA11AI.4990

Amount of Each Receipt this Period

1300.00

 Memo Item
 Total earmarked through conduit; PAC limit not affected.

B. Full Name (Last, First, Middle Initial)
ActBlue Technical Services
Mailing Address PO Box 441146

City Somerville	State MA	Zip Code 02144
--------------------	-------------	-------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2018

Transaction ID : SA11AI.4992

Amount of Each Receipt this Period

918.00

 Memo Item
 Total earmarked through conduit; PAC limit not affected.

C. Full Name (Last, First, Middle Initial)
Boortz, Brian, , ,
Mailing Address 2099 190th St.

City Centuria	State WI	Zip Code 54824
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FEC ID number of contributing federal political committee. **C**

Name of Employer Water Gremlin Co.	Occupation Engineering change coordinator
---------------------------------------	--

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 19 / 2018

Transaction ID : SA11AI.5144

Amount of Each Receipt this Period

500.00

 Memo Item
 contribution earmarked through ActBlue

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 OF 47	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)
FRIENDS OF MARGARET ENGEBRETSON

Full Name (Last, First, Middle Initial) A. Costerisan, Richard, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 07 / 2018	
Mailing Address 23328 Nyren R, PO Box 545			Transaction ID : SA11AI.5116	
City Siren	State WI	Zip Code 54872	Amount of Each Receipt this Period _____ 500.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item contribution earmarked through ActBlue	
Name of Employer not employed		Occupation not employed		
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 500.00		

Full Name (Last, First, Middle Initial) B. Engebretson, Amy, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 09 / 2018	
Mailing Address 170 Sargent Ave			Transaction ID : SA11AI.4806	
City St. Paul	State MN	Zip Code 56105	Amount of Each Receipt this Period _____ 5.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item contribution earmarked through ActBlue	
Name of Employer Adefric & Toppin Women's Spec.		Occupation physician		
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 830.00		

Full Name (Last, First, Middle Initial) C. Engebretson, Amy, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 30 / 2018	
Mailing Address 170 Sargent Ave			Transaction ID : SA11AI.5093	
City St. Paul	State MN	Zip Code 56105	Amount of Each Receipt this Period _____ 100.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item contribution earmarked through ActBlue	
Name of Employer Adefric & Toppin Women's Spec.		Occupation physician		
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 930.00		

SUBTOTAL of Receipts This Page (optional)..... ▶	_____ 605.00
TOTAL This Period (last page this line number only)..... ▶	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 OF 47	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
FRIENDS OF MARGARET ENGEBRETSON

Full Name (Last, First, Middle Initial) Engebretson, Amy, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 08 / 2018	
Mailing Address 170 Sargent Ave			Transaction ID : SA11AI.5119	
City St. Paul	State MN	Zip Code 56105	Amount of Each Receipt this Period _____ 50.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item contribution earmarked through ActBlue	
Name of Employer Adefric & Toppin Women's Spec.		Occupation physician		
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 980.00		

Full Name (Last, First, Middle Initial) Engebretson, Amy, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 15 / 2018	
Mailing Address 170 Sargent Ave			Transaction ID : SA11AI.5133	
City St. Paul	State MN	Zip Code 56105	Amount of Each Receipt this Period _____ 25.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item contribution earmarked through ActBlue	
Name of Employer Adefric & Toppin Women's Spec.		Occupation physician		
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 1005.00		

Full Name (Last, First, Middle Initial) Engebretson, Amy, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 19 / 2018	
Mailing Address 170 Sargent Ave			Transaction ID : SA11AI.5143	
City St. Paul	State MN	Zip Code 56105	Amount of Each Receipt this Period _____ 200.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item contribution earmarked through ActBlue	
Name of Employer Adefric & Toppin Women's Spec.		Occupation physician		
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 1205.00		

SUBTOTAL of Receipts This Page (optional)..... ▶	_____ 275.00
TOTAL This Period (last page this line number only)..... ▶	_____

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

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

FOR LINE NUMBER: PAGE 12 OF 47
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MARGARET ENGEBRETSON

A. Full Name (Last, First, Middle Initial)
Engebretson, Amy, , ,
Mailing Address 170 Sargent Ave

City St. Paul State MN Zip Code 56105

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

Name of Employer Adefric & Toppin Women's Spec. Occupation physician

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1230.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 28 / 2018

Transaction ID : SA11AI.5177

Amount of Each Receipt this Period
25.00

Memo Item contribution earmarked through ActBlue

B. Full Name (Last, First, Middle Initial)
Gessert, Charles, , ,
Mailing Address 4929 Lester River Rd

City Duluth State MN Zip Code 55804

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

Name of Employer none Occupation retired physician

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 14 / 2018

Transaction ID : SA11AI.4665

Amount of Each Receipt this Period
200.00

Memo Item contribution

C. Full Name (Last, First, Middle Initial)
Grittner, James, , ,
Mailing Address 2325 Hughitt Ave

City Superior State WI Zip Code 54880

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

Name of Employer none Occupation retired

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 14 / 2018

Transaction ID : SA11AI.4671

Amount of Each Receipt this Period
500.00

Memo Item contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 725.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 13 OF 47
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MARGARET ENGEBRETSON

Full Name (Last, First, Middle Initial) A. Gustavson, Elizabeth, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 25 / 2018		
Mailing Address 8005 Birch St, #229			Transaction ID : SA11AI.4673		
City Weston	State WI	Zip Code 54476	Amount of Each Receipt this Period _____ 300.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item contribution		
Name of Employer none		Occupation retired homemaker			
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 300.00			

Full Name (Last, First, Middle Initial) B. Heid, Jocelyn, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 01 / 2018		
Mailing Address 3028 East Superior St			Transaction ID : SA11AI.4782		
City Duluth	State MN	Zip Code 55812	Amount of Each Receipt this Period _____ 250.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item contribution earmarked through ActBlue		
Name of Employer not employed		Occupation not employed			
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 250.00			

Full Name (Last, First, Middle Initial) C. Hohl, Bernadette, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 22 / 2018		
Mailing Address 8588 E Co Rd L			Transaction ID : SA11AI.5049		
City Bennett	State WI	Zip Code 54873	Amount of Each Receipt this Period _____ 25.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item contribution earmarked through ActBlue		
Name of Employer Town of Bennett, Douglas Co		Occupation recycling manager			
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 225.00			

SUBTOTAL of Receipts This Page (optional)..... ▶	_____ 575.00
TOTAL This Period (last page this line number only)..... ▶	_____

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

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

FOR LINE NUMBER: (check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MARGARET ENGEBRETSON

A. Full Name (Last, First, Middle Initial)
Hohl, Bernadette, , ,

Mailing Address 8588 E Co Rd L

City Bennett	State WI	Zip Code 54873
-----------------	-------------	-------------------

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

Name of Employer Town of Bennett, Douglas Co	Occupation recycling manager
---	---------------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 30 / 2018

Transaction ID : SA11AI.5088

Amount of Each Receipt this Period
 _____ 25.00

Memo Item contribution earmarked through ActBlue

B. Full Name (Last, First, Middle Initial)
Hohl, Bernadette, , ,

Mailing Address 8588 E Co Rd L

City Bennett	State WI	Zip Code 54873
-----------------	-------------	-------------------

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

Name of Employer Town of Bennett, Douglas Co	Occupation recycling manager
---	---------------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 14 / 2018

Transaction ID : SA11AI.4688

Amount of Each Receipt this Period
 _____ 100.00

Memo Item contribution

C. Full Name (Last, First, Middle Initial)
Hughes, Derek, , ,

Mailing Address 8692 Falmouth Ave Apt. 2

City Playa Del Rey	State CA	Zip Code 90293
-----------------------	-------------	-------------------

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

Name of Employer self	Occupation consultant
--------------------------	--------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2018

Transaction ID : SA11AI.4784

Amount of Each Receipt this Period
 _____ 500.00

Memo Item contribution earmarked through ActBlue

SUBTOTAL of Receipts This Page (optional)..... ▶	_____ 625.00
TOTAL This Period (last page this line number only)..... ▶	_____

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

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

FOR LINE NUMBER: PAGE 15 OF 47
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MARGARET ENGEBRETSON

A. Full Name (Last, First, Middle Initial)
Johnson, Daniel, , ,
 Mailing Address 3652 Tamarack Lane
 City Eau Claire State WI Zip Code 54701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer none Occupation none
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 18 / 2018
Transaction ID : SA11AI.5141
 Amount of Each Receipt this Period
 250.00
 Memo Item contribution earmarked through ActBlue

B. Full Name (Last, First, Middle Initial)
Kienholz, Kathryn, , ,
 Mailing Address 2259 Antler Lake Ln
 City Milltown State WI Zip Code 54858
 FEC ID number of contributing federal political committee. **C**
 Name of Employer none Occupation retired
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 30 / 2018
Transaction ID : SA11AI.5087
 Amount of Each Receipt this Period
 100.00
 Memo Item contribution earmarked through ActBlue

C. Full Name (Last, First, Middle Initial)
Kienholz, Kathryn, , ,
 Mailing Address 2259 Antler Lake Ln
 City Milltown State WI Zip Code 54858
 FEC ID number of contributing federal political committee. **C**
 Name of Employer none Occupation retired
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 29 / 2018
Transaction ID : SA11AI.4699
 Amount of Each Receipt this Period
 600.00
 Memo Item contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 950.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 16 OF 47	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MARGARET ENGEBRETSON

A. Full Name (Last, First, Middle Initial)
Lafans, Ellen, , ,

Mailing Address 20325 SW Crystal Lane

City Cable	State WI	Zip Code 54821
---------------	-------------	-------------------

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

Name of Employer not employed	Occupation not employed
----------------------------------	----------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 14 / 2018

Transaction ID : SA11AI.4709

Amount of Each Receipt this Period
150.00

Memo Item contribution

B. Full Name (Last, First, Middle Initial)
Leaf, Gregory, , ,

Mailing Address 1016 Willow River Dr N

City Hudson	State WI	Zip Code 54016
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FEC ID number of contributing federal political committee. **C**

Name of Employer advertising executive	Occupation Group Leaf LLC
---	------------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
290.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 09 / 2018

Transaction ID : SA11AI.4805

Amount of Each Receipt this Period
5.00

Memo Item contribution earmarked through ActBlue

C. Full Name (Last, First, Middle Initial)
Leaf, Gregory, , ,

Mailing Address 1016 Willow River Dr N

City Hudson	State WI	Zip Code 54016
----------------	-------------	-------------------

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

Name of Employer advertising executive	Occupation Group Leaf LLC
---	------------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
295.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 09 / 2018

Transaction ID : SA11AI.5056

Amount of Each Receipt this Period
5.00

Memo Item contribution earmarked through ActBlue

SUBTOTAL of Receipts This Page (optional)..... ▶	160.00
TOTAL This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 17 OF 47
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MARGARET ENGEBRETSON

A. Full Name (Last, First, Middle Initial)
Leaf, Gregory, , ,
Mailing Address 1016 Willow River Dr N
City Hudson State WI Zip Code 54016
FEC ID number of contributing federal political committee. **C**
Name of Employer advertising executive Occupation Group Leaf LLC
Receipt For: 2018
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 09 / 2018
Transaction ID : SA11AI.5123
Amount of Each Receipt this Period
5.00
 Memo Item contribution earmarked through ActBlue

B. Full Name (Last, First, Middle Initial)
Luedke, Joyce, , ,
Mailing Address 714 Birch St.
City Rothschild State WI Zip Code 54474
FEC ID number of contributing federal political committee. **C**
Name of Employer none Occupation retired teacher
Receipt For: 2018
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 10 / 2018
Transaction ID : SA11AI.4724
Amount of Each Receipt this Period
200.00
 Memo Item contribution

C. Full Name (Last, First, Middle Initial)
Luedke, Joyce, , ,
Mailing Address 714 Birch St.
City Rothschild State WI Zip Code 54474
FEC ID number of contributing federal political committee. **C**
Name of Employer none Occupation retired teacher
Receipt For: 2018
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 25 / 2018
Transaction ID : SA11AI.4725
Amount of Each Receipt this Period
100.00
 Memo Item contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ **305.00**
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 18 OF 47
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MARGARET ENGEBRETSON

A. Full Name (Last, First, Middle Initial)
Sipress, Joel, , ,

Mailing Address 2023 E 4th St.

City Duluth	State MN	Zip Code 55812
----------------	-------------	-------------------

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

Name of Employer Univ. of Wisconsin-Superior	Occupation professor
---	-------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
295.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 18 / 2018

Transaction ID : SA11AI.5069

Amount of Each Receipt this Period
70.00

Memo Item
2023 E 4th St

B. Full Name (Last, First, Middle Initial)
Sipress, Joel, , ,

Mailing Address 2023 E 4th St.

City Duluth	State MN	Zip Code 55812
----------------	-------------	-------------------

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

Name of Employer Univ. of Wisconsin-Superior	Occupation professor
---	-------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
299.22

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 26 / 2018

Transaction ID : SA11AI.5038

Amount of Each Receipt this Period
4.22

Memo Item
In-kind - postal products from GoPostal

C. Full Name (Last, First, Middle Initial)
Sipress, Joel, , ,

Mailing Address 2023 E 4th St.

City Duluth	State MN	Zip Code 55812
----------------	-------------	-------------------

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

Name of Employer Univ. of Wisconsin-Superior	Occupation professor
---	-------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
698.22

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 29 / 2018

Transaction ID : SA11AI.5039

Amount of Each Receipt this Period
399.00

Memo Item
In-kind - mileage, campaign trip

SUBTOTAL of Receipts This Page (optional).....▶	473.22
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 19 OF 47
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MARGARET ENGEBRETSON

A. Full Name (Last, First, Middle Initial)
Smith-Johnson, Mary, , ,
 Mailing Address 1303 E 3rd St.
 City Superior State WI Zip Code 54880
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Duluth Public Schools Occupation teacher
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 14 / 2018
Transaction ID : SA11AI.4760
 Amount of Each Receipt this Period
 50.00
 Memo Item contribution

B. Full Name (Last, First, Middle Initial)
Tillotson, Janet, , ,
 Mailing Address 9304 E Calle de Valle Dr
 City Scottsdale State AZ Zip Code 85255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer not employed Occupation not employed
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 04 / 2018
Transaction ID : SA11AI.5109
 Amount of Each Receipt this Period
 500.00
 Memo Item contribution earmarked through ActBlue

C. Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Election Cycle-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).....▶	550.00
TOTAL This Period (last page this line number only).....▶	5743.22

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

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

FOR LINE NUMBER: PAGE 20 OF 47
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MARGARET ENGEBRETSON

A. Full Name (Last, First, Middle Initial)
Verizon

Mailing Address PO Box 4002

City Acworth State GA Zip Code 30101

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

Name of Employer Occupation

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 18 / 2018

Transaction ID : SA14.5222

Amount of Each Receipt this Period
 130.53

Memo Item
 duplicate payment resulted in credit of \$130.53 that will be used for July and August billings

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-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 (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-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).....▶	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 21 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MARGARET ENGBRETSON

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2018
Mailing Address PO Box 441146		FEC Identification Number C C00669143
City Somerville	State MA	Zip Code 02144
Purpose of Disbursement fee	Category/ Type 001	Amount of Each Disbursement this Period 11.86
Candidate Name FRIENDS OF MARGARET ENGBRETSON	Office Sought: <input checked="" type="checkbox"/> House <input 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: WI District: 07	Transaction ID : SB17.5020 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2018
Mailing Address PO Box 441146		FEC Identification Number C C00669143
City Somerville	State MA	Zip Code 02144
Purpose of Disbursement fee	Category/ Type 001	Amount of Each Disbursement this Period 37.75
Candidate Name FRIENDS OF MARGARET ENGBRETSON	Office Sought: <input checked="" type="checkbox"/> House <input 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: WI District: 07	Transaction ID : SB17.5019 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) c. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2018
Mailing Address PO Box 441146		FEC Identification Number C C00669143
City Somerville	State MA	Zip Code 02144
Purpose of Disbursement fee	Category/ Type 001	Amount of Each Disbursement this Period 45.98
Candidate Name FRIENDS OF MARGARET ENGBRETSON	Office Sought: <input checked="" type="checkbox"/> House <input 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: WI District: 07	Transaction ID : SB17.5018 <input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	95.59
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MARGARET ENGBRETSON

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2018
Mailing Address PO Box 441146		FEC Identification Number C C00669143
City Somerville	State MA	Zip Code 02144
Purpose of Disbursement fee	Category/ Type 001	Amount of Each Disbursement this Period 4.36
Candidate Name FRIENDS OF MARGARET ENGBRETSON	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.5017
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: WI District: 07	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2018
Mailing Address PO Box 441146		FEC Identification Number C C00669143
City Somerville	State MA	Zip Code 02144
Purpose of Disbursement fee	Category/ Type 001	Amount of Each Disbursement this Period 3.81
Candidate Name FRIENDS OF MARGARET ENGBRETSON	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.5016
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: WI District: 07	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) c. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2018
Mailing Address PO Box 441146		FEC Identification Number C C00669143
City Somerville	State MA	Zip Code 02144
Purpose of Disbursement fee	Category/ Type 001	Amount of Each Disbursement this Period 1.98
Candidate Name FRIENDS OF MARGARET ENGBRETSON	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.5015
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: WI District: 07	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	10.15
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MARGARET ENGBRETSON

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2018
Mailing Address PO Box 441146		FEC Identification Number C C00669143
City Somerville	State MA	Zip Code 02144
Purpose of Disbursement banquet fee paid via ActBlue, reimbursed to M Engbretson 5/11		Category/ Type 003
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Amount of Each Disbursement this Period 35.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4969
State: WI District: 07		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2018
Mailing Address PO Box 441146		FEC Identification Number C C00669143
City Somerville	State MA	Zip Code 02144
Purpose of Disbursement fee		Category/ Type 001
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Amount of Each Disbursement this Period 7.36
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.5014
State: WI District: 07		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) c. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2018
Mailing Address PO Box 441146		FEC Identification Number C C00669143
City Somerville	State MA	Zip Code 02144
Purpose of Disbursement fee		Category/ Type 001
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Amount of Each Disbursement this Period 13.05
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.5013
State: WI District: 07		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	55.41
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 47			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MARGARET ENGBRETSON

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services			Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2018		
Mailing Address PO Box 441146			FEC Identification Number C C00669143		
City Somerville	State MA	Zip Code 02144	Amount of Each Disbursement this Period 12.86		
Purpose of Disbursement fee		Category/ Type 001	Transaction ID : SB17.5012		
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Memo Item <input type="checkbox"/>			
Office Sought: <input checked="" type="checkbox"/> House <input 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: WI	District: 07				

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services			Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2018		
Mailing Address PO Box 441146			FEC Identification Number C C00669143		
City Somerville	State MA	Zip Code 02144	Amount of Each Disbursement this Period 24.57		
Purpose of Disbursement fee		Category/ Type 001	Transaction ID : SB17.5010		
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Memo Item <input type="checkbox"/>			
Office Sought: <input checked="" type="checkbox"/> House <input 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: WI	District: 07				

Full Name (Last, First, Middle Initial) c. ActBlue Technical Services			Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2018		
Mailing Address PO Box 441146			FEC Identification Number C C00669143		
City Somerville	State MA	Zip Code 02144	Amount of Each Disbursement this Period 56.32		
Purpose of Disbursement fee		Category/ Type 001	Transaction ID : SB17.5009		
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Memo Item <input type="checkbox"/>			
Office Sought: <input checked="" type="checkbox"/> House <input 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: WI	District: 07				

SUBTOTAL of Disbursements This Page (optional).....▶	93.75
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 47			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MARGARET ENGBRETSON

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services			Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2018		
Mailing Address PO Box 441146			FEC Identification Number C C00669143		
City Somerville	State MA	Zip Code 02144	Amount of Each Disbursement this Period 9.62		
Purpose of Disbursement fee		Category/ Type 001	Transaction ID : SB17.5008		
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Memo Item <input type="checkbox"/>			
Office Sought: <input checked="" type="checkbox"/> House <input 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: WI	District: 07				

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services			Date of Disbursement M M / D D / Y Y Y Y 06 / 21 / 2018		
Mailing Address PO Box 441146			FEC Identification Number C C00669143		
City Somerville	State MA	Zip Code 02144	Amount of Each Disbursement this Period 378.00		
Purpose of Disbursement tickets to cmpg dinners/events reimbursed to M Engbretson 6/21		Category/ Type 002	Transaction ID : SB17.4973		
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Memo Item <input checked="" type="checkbox"/>			
Office Sought: <input checked="" type="checkbox"/> House <input 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: WI	District: 07				

Full Name (Last, First, Middle Initial) c. ActBlue Technical Services			Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2018		
Mailing Address PO Box 441146			FEC Identification Number C C00669143		
City Somerville	State MA	Zip Code 02144	Amount of Each Disbursement this Period 51.37		
Purpose of Disbursement fee		Category/ Type 001	Transaction ID : SB17.5007		
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Memo Item <input type="checkbox"/>			
Office Sought: <input checked="" type="checkbox"/> House <input 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: WI	District: 07				

SUBTOTAL of Disbursements This Page (optional).....▶	60.99
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MARGARET ENGBRETSON

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2018
Mailing Address PO Box 441146		FEC Identification Number C C00669143
City Somerville	State MA	Zip Code 02144
Purpose of Disbursement fee	Category/ Type 001	Amount of Each Disbursement this Period 36.34
Candidate Name FRIENDS OF MARGARET ENGBRETSON	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.5006
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: WI District: 07	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Amazon		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2018
Mailing Address PO Box 81226		FEC Identification Number C C00669143
City Seattle	State WA	Zip Code 98108
Purpose of Disbursement Blackberry purchased by Margaret Engbretson--see assoc. entry	Category/ Type 001	Amount of Each Disbursement this Period 586.56
Candidate Name FRIENDS OF MARGARET ENGBRETSON	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4953
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: WI District: 07	<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) c. Copy Shop		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2018
Mailing Address 2071 Glacier Dr, Ste 4		FEC Identification Number C C00669143
City St. Croix Falls	State WI	Zip Code 54024
Purpose of Disbursement photocopying (see Kristin Hansen entry for 6/16)	Category/ Type 001	Amount of Each Disbursement this Period 232.10
Candidate Name FRIENDS OF MARGARET ENGBRETSON	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4928
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: WI District: 07	<input checked="" type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	36.34
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 47			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
FRIENDS OF MARGARET ENGBRETSON

Full Name (Last, First, Middle Initial) A. Copy Shop		Date of Disbursement MM / DD / YYYY 06 / 21 / 2018
Mailing Address 2071 Glacier Dr, Ste 4		FEC Identification Number C C00669143
City St. Croix Falls	State WI	Zip Code 54024
Purpose of Disbursement printing nomination sheets, reimbursed to M Engbretson 6/21		Category/ Type 001
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Amount of Each Disbursement this Period 25.85
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4985 <input checked="" type="checkbox"/> Memo Item
State: WI District: 07		

Full Name (Last, First, Middle Initial) B. Democratic Party of Wisconsin		Date of Disbursement MM / DD / YYYY 05 / 18 / 2018
Mailing Address 15 N Pinckney St		FEC Identification Number C C00669143
City Madison	State WI	Zip Code 53703
Purpose of Disbursement table rental at state convention (reimbursed to Kristin Hansen--see entry under her name)		Category/ Type 003
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Amount of Each Disbursement this Period 390.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4947 <input checked="" type="checkbox"/> Memo Item
State: WI District: 07		

Full Name (Last, First, Middle Initial) C. EasyITGuys		Date of Disbursement MM / DD / YYYY 04 / 14 / 2018
Mailing Address 344 N Washington St		FEC Identification Number C C00669143
City St Croix Falls	State WI	Zip Code 54024
Purpose of Disbursement computer security monthly charge (part of nontravel reimbursement to M Engbretson on 4/14)		Category/ Type 001
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Amount of Each Disbursement this Period 26.36
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4959 <input checked="" type="checkbox"/> Memo Item
State: WI District: 07		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MARGARET ENGBRETSON

Full Name (Last, First, Middle Initial) A. EasyITGuys			Date of Disbursement MM / DD / YYYY 05 / 11 / 2018	
Mailing Address 344 N Washington St			FEC Identification Number C C00669143	
City St Croix Falls	State WI	Zip Code 54024	Amount of Each Disbursement this Period 26.36	
Purpose of Disbursement computer security monthly fee, reimbursed to M Engbretson, 5/11		Category/ Type 001	Transaction ID : SB17.4967	
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Disbursement For: 2018		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: WI District: 07	<input checked="" type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) B. EasyITGuys			Date of Disbursement MM / DD / YYYY 06 / 21 / 2018	
Mailing Address 344 N Washington St			FEC Identification Number C C00669143	
City St Croix Falls	State WI	Zip Code 54024	Amount of Each Disbursement this Period 49.13	
Purpose of Disbursement monthly fees for computer security, reimbursed to M Engbretson 6/21		Category/ Type 001	Transaction ID : SB17.4983	
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Disbursement For: 2018		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: WI District: 07	<input checked="" type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) C. ENGBRETSON, MARGARET RUTH, , ,			Date of Disbursement MM / DD / YYYY 04 / 14 / 2018	
Mailing Address 128 VADNAIS LANE			FEC Identification Number C C00669143	
City BALSAM LAKE	State WI	Zip Code 54810	Amount of Each Disbursement this Period 586.56	
Purpose of Disbursement reimbursement for purchase of Blackberry from Amazon (see memo)		Category/ Type 001	Transaction ID : SB17.4956	
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Disbursement For: 2018		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: WI District: 07	<input type="checkbox"/> Memo Item			

SUBTOTAL of Disbursements This Page (optional).....▶	586.56
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MARGARET ENGBRETSON

Full Name (Last, First, Middle Initial) A. ENGBRETSON, MARGARET RUTH, , ,			Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2018	
Mailing Address 128 VADNAIS LANE			FEC Identification Number C C00669143	
City BALSAM LAKE	State WI	Zip Code 54810	Amount of Each Disbursement this Period 128.95	
Purpose of Disbursement domain name reimbursement (purchased from GoDaddy)		Category/ Type 001	Transaction ID : SB17.4957	
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input 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: WI District: 07				

Full Name (Last, First, Middle Initial) B. ENGBRETSON, MARGARET RUTH, , ,			Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2018	
Mailing Address 128 VADNAIS LANE			FEC Identification Number C C00669143	
City BALSAM LAKE	State WI	Zip Code 54810	Amount of Each Disbursement this Period 564.57	
Purpose of Disbursement reimbursement travel expense, 1/25-2/21 closing date		Category/ Type 002	Transaction ID : SB17.4958	
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input 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: WI District: 07				

Full Name (Last, First, Middle Initial) C. ENGBRETSON, MARGARET RUTH, , ,			Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2018	
Mailing Address 128 VADNAIS LANE			FEC Identification Number C C00669143	
City BALSAM LAKE	State WI	Zip Code 54810	Amount of Each Disbursement this Period 55.36	
Purpose of Disbursement reimbursement of non-travel expenses 1/25-2/21 closing date (see assoc. memos for GoDaddy & EasyITG)		Category/ Type 001	Transaction ID : SB17.4963	
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input 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: WI District: 07				

SUBTOTAL of Disbursements This Page (optional).....▶	748.88
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 47
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MARGARET ENGBRETSON

Full Name (Last, First, Middle Initial) A. ENGBRETSON, MARGARET RUTH, , ,		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2018
Mailing Address 128 VADNAIS LANE		FEC Identification Number C C00669143
City BALSAM LAKE	State WI	Zip Code 54810
Purpose of Disbursement repaid candidate for purchase of domain name from Go Daddy (See memo in disbursements section.)		001
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Category/Type
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2018	Amount of Each Disbursement this Period 53.68
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Transaction ID : SB17.5029
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: WI	District: 07	

Full Name (Last, First, Middle Initial) B. ENGBRETSON, MARGARET RUTH, , ,		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2018
Mailing Address 128 VADNAIS LANE		FEC Identification Number C C00669143
City BALSAM LAKE	State WI	Zip Code 54810
Purpose of Disbursement repaid candidate for phone (Amazon) and domain name (Go Daddy) (See memos in disbursements section.)		001
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Category/Type
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2018	Amount of Each Disbursement this Period 661.80
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Transaction ID : SB17.5030
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: WI	District: 07	

Full Name (Last, First, Middle Initial) C. ENGBRETSON, MARGARET RUTH, , ,		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2018
Mailing Address 128 VADNAIS LANE		FEC Identification Number C C00669143
City BALSAM LAKE	State WI	Zip Code 54810
Purpose of Disbursement travel expense reimbursement, 3/23-4/28 closing date		002
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Category/Type
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2018	Amount of Each Disbursement this Period 1208.05
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Transaction ID : SB17.4965
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: WI	District: 07	

SUBTOTAL of Disbursements This Page (optional).....▶	1923.53
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 31 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MARGARET ENGBRETSON

Full Name (Last, First, Middle Initial) A. ENGBRETSON, MARGARET RUTH, , ,		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2018
Mailing Address 128 VADNAIS LANE		FEC Identification Number C C00669143
City BALSAM LAKE	State WI	Zip Code 54810
Purpose of Disbursement reimbursement nontravel expense 3/23-4/19 closing date (See assoc memos for each.)		Amount of Each Disbursement this Period 111.14
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Transaction ID : SB17.4966
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2018	<input type="checkbox"/> Memo Item
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify) ▼	
State: WI	District: 07	

Full Name (Last, First, Middle Initial) B. ENGBRETSON, MARGARET RUTH, , ,		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2018
Mailing Address 128 VADNAIS LANE		FEC Identification Number C C00669143
City BALSAM LAKE	State WI	Zip Code 54810
Purpose of Disbursement repaid candidate for travel expenses, 2/10 to 2/21 closing date		Amount of Each Disbursement this Period 564.57
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Transaction ID : SB17.5031
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2018	<input type="checkbox"/> Memo Item
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify) ▼	
State: WI	District: 07	

Full Name (Last, First, Middle Initial) C. ENGBRETSON, MARGARET RUTH, , ,		Date of Disbursement M M / D D / Y Y Y Y 06 / 21 / 2018
Mailing Address 128 VADNAIS LANE		FEC Identification Number C C00669143
City BALSAM LAKE	State WI	Zip Code 54810
Purpose of Disbursement reimbursement travel expense 3/23 to 4/23 closing date (See assoc memos for ActBlue & Hotwire)		Amount of Each Disbursement this Period 1159.17
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Transaction ID : SB17.4972
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2018	<input type="checkbox"/> Memo Item
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify) ▼	
State: WI	District: 07	

SUBTOTAL of Disbursements This Page (optional).....▶	1834.88
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 47			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
FRIENDS OF MARGARET ENGBRETSON

Full Name (Last, First, Middle Initial) A. ENGBRETSON, MARGARET RUTH, , ,			Date of Disbursement M M / D D / Y Y Y Y 06 / 21 / 2018		
Mailing Address 128 VADNAIS LANE			FEC Identification Number C C00669143		
City BALSAM LAKE	State WI	Zip Code 54810	Amount of Each Disbursement this Period 812.69		
Purpose of Disbursement reimbursement nontravel expenses 3/23-4/23 closing date (see assoc. memos)		Category/ Type 001	Transaction ID : SB17.4978		
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Memo Item <input type="checkbox"/>			
Office Sought: <input checked="" type="checkbox"/> House <input 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: WI District: 07					

Full Name (Last, First, Middle Initial) B. ENGBRETSON, MARGARET RUTH, , ,			Date of Disbursement M M / D D / Y Y Y Y 06 / 21 / 2018		
Mailing Address 128 VADNAIS LANE			FEC Identification Number C C00669143		
City BALSAM LAKE	State WI	Zip Code 54810	Amount of Each Disbursement this Period 1055.40		
Purpose of Disbursement repaid candidate for travel expenses incurred 4/23 closing date (see memos)		Category/ Type 002	Transaction ID : SB17.5032		
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Memo Item <input type="checkbox"/>			
Office Sought: <input checked="" type="checkbox"/> House <input 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: WI District: 07					

Full Name (Last, First, Middle Initial) C. ENGBRETSON, MARGARET RUTH, , ,			Date of Disbursement M M / D D / Y Y Y Y 06 / 21 / 2018		
Mailing Address 128 VADNAIS LANE			FEC Identification Number C C00669143		
City BALSAM LAKE	State WI	Zip Code 54810	Amount of Each Disbursement this Period 112.14		
Purpose of Disbursement repaid candidate for non-travel expenses 4/23 closing date (see memos)		Category/ Type 001	Transaction ID : SB17.5033		
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Memo Item <input type="checkbox"/>			
Office Sought: <input checked="" type="checkbox"/> House <input 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: WI District: 07					

SUBTOTAL of Disbursements This Page (optional).....▶	1980.23
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 33 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MARGARET ENGBRETSON

Full Name (Last, First, Middle Initial) A. Facebook		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2018
Mailing Address 1 Hacker Way		FEC Identification Number C C00669143
City Menlo Park	State CA	Zip Code 94205
Purpose of Disbursement ads (see corresponding entry for Joel Sipress)		Amount of Each Disbursement this Period 201.93
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Transaction ID : SB17.4919
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: WI District: 07	Category/Type 004	

Full Name (Last, First, Middle Initial) B. Google		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2018
Mailing Address 1600 Amphitheatre Pkwy		FEC Identification Number C C00669143
City Mountainview	State CA	Zip Code 94043
Purpose of Disbursement G Suite monthly fee, reimbursed to M Engebretson 5/11		Amount of Each Disbursement this Period 21.78
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Transaction ID : SB17.4970
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: WI District: 07	Category/Type 001	

Full Name (Last, First, Middle Initial) c. Google		Date of Disbursement M M / D D / Y Y Y Y 06 / 21 / 2018
Mailing Address 1600 Amphitheatre Pkwy		FEC Identification Number C C00669143
City Mountainview	State CA	Zip Code 94043
Purpose of Disbursement monthly fee, G Suite, reimbursed to M Engebretson 6/21		Amount of Each Disbursement this Period 58.05
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Transaction ID : SB17.4979
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: WI District: 07	Category/Type 001	

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MARGARET ENGBRETSON

A. Group Leaf

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 546

City Hudson State WI Zip Code 54016

Purpose of Disbursement name badges Category/Type 003

Candidate Name **FRIENDS OF MARGARET ENGBRETSON**

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

State: WI District: 07

Date of Disbursement: 04 / 14 / 2018

FEC Identification Number: C C00669143

Amount of Each Disbursement this Period: 45.03

Transaction ID : SB17.4930

Memo Item

B. Group Leaf

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 546

City Hudson State WI Zip Code 54016

Purpose of Disbursement name stickers Category/Type 003

Candidate Name **FRIENDS OF MARGARET ENGBRETSON**

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

State: WI District: 07

Date of Disbursement: 05 / 11 / 2018

FEC Identification Number: C C00669143

Amount of Each Disbursement this Period: 45.52

Transaction ID : SB17.4931

Memo Item

c. Group Leaf

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 546

City Hudson State WI Zip Code 54016

Purpose of Disbursement yard signs Category/Type 004

Candidate Name **FRIENDS OF MARGARET ENGBRETSON**

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

State: WI District: 07

Date of Disbursement: 05 / 11 / 2018

FEC Identification Number: C C00669143

Amount of Each Disbursement this Period: 422.00

Transaction ID : SB17.4932

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 512.55

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MARGARET ENGBRETSON

Full Name (Last, First, Middle Initial) A. Group Leaf		Date of Disbursement
Mailing Address PO Box 546		M M / D D / Y Y Y Y 05 / 23 / 2018
City Hudson	State WI	Zip Code 54016
Purpose of Disbursement t-shirts	Category/ Type 004	FEC Identification Number C C00669143
Candidate Name FRIENDS OF MARGARET ENGBRETSON	Disbursement For: 2018	Amount of Each Disbursement this Period 458.05
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4933
State: WI District: 07		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Group Leaf		Date of Disbursement
Mailing Address PO Box 546		M M / D D / Y Y Y Y 06 / 29 / 2018
City Hudson	State WI	Zip Code 54016
Purpose of Disbursement 2nd quarter agency services	Category/ Type 004	FEC Identification Number C C00669143
Candidate Name FRIENDS OF MARGARET ENGBRETSON	Disbursement For: 2018	Amount of Each Disbursement this Period 1500.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4905
State: WI District: 07		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. Hansen, Kristin, , ,		Date of Disbursement
Mailing Address 1510 Gabriel Dr. #4		M M / D D / Y Y Y Y 05 / 18 / 2018
City Waukesha	State WI	Zip Code 53188
Purpose of Disbursement May director fee	Category/ Type 001	FEC Identification Number C C00669143
Candidate Name FRIENDS OF MARGARET ENGBRETSON	Disbursement For: 2018	Amount of Each Disbursement this Period 1000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4941
State: WI District: 07		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	2958.05
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 36 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MARGARET ENGBRETSON

Full Name (Last, First, Middle Initial) A. Hansen, Kristin, , ,			Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2018	
Mailing Address 1510 Gabriel Dr. #4			FEC Identification Number C C00669143	
City Waukesha	State WI	Zip Code 53188	Amount of Each Disbursement this Period 330.81	
Purpose of Disbursement reimbursement of hotel expense (see Holiday Inn Express St. Croix Falls memo)		Category/ Type 002	Transaction ID : SB17.4943	
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input 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: WI District: 07				

Full Name (Last, First, Middle Initial) B. Hansen, Kristin, , ,			Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2018	
Mailing Address 1510 Gabriel Dr. #4			FEC Identification Number C C00669143	
City Waukesha	State WI	Zip Code 53188	Amount of Each Disbursement this Period 390.00	
Purpose of Disbursement table rental at state Democratic Party convention--reimbursement		Category/ Type 003	Transaction ID : SB17.4946	
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input 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: WI District: 07				

Full Name (Last, First, Middle Initial) C. Hansen, Kristin, , ,			Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2018	
Mailing Address 1510 Gabriel Dr. #4			FEC Identification Number C C00669143	
City Waukesha	State WI	Zip Code 53188	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement June director fee		Category/ Type 001	Transaction ID : SB17.4907	
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input 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: WI District: 07				

SUBTOTAL of Disbursements This Page (optional).....▶	1720.81
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 47			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
FRIENDS OF MARGARET ENGBRETSON

Full Name (Last, First, Middle Initial) A. Hansen, Kristin, , ,			Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2018		
Mailing Address 1510 Gabriel Dr. #4			FEC Identification Number C C00669143		
City Waukesha	State WI	Zip Code 53188	Amount of Each Disbursement this Period 232.10		
Purpose of Disbursement photocopy reimbursement (see memo for Copy Shop)		Category/ Type 001	Transaction ID : SB17.4927		
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Memo Item <input type="checkbox"/>			
Office Sought: <input checked="" type="checkbox"/> House <input 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: WI District: 07					

Full Name (Last, First, Middle Initial) B. Hansen, Kristin, , ,			Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2018		
Mailing Address 1510 Gabriel Dr. #4			FEC Identification Number C C00669143		
City Waukesha	State WI	Zip Code 53188	Amount of Each Disbursement this Period 596.96		
Purpose of Disbursement reimbursement: mileage (\$288.90), Wausau hotel (\$162.42), Minocqua hotel (\$145.64)		Category/ Type 002	Transaction ID : SB17.4934		
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Memo Item <input type="checkbox"/>			
Office Sought: <input checked="" type="checkbox"/> House <input 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: WI District: 07					

Full Name (Last, First, Middle Initial) c. Holiday Inn Express			Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2018		
Mailing Address 2190 US-8			FEC Identification Number C C00669143		
City St. Croix Falls	State WI	Zip Code 54024	Amount of Each Disbursement this Period 330.81		
Purpose of Disbursement hotel expense (reimbursed to Kristin Hansen)		Category/ Type 002	Transaction ID : SB17.4944		
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Memo Item <input checked="" type="checkbox"/>			
Office Sought: <input checked="" type="checkbox"/> House <input 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: WI District: 07					

SUBTOTAL of Disbursements This Page (optional).....▶	829.06
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 47			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MARGARET ENGBRETSON

Full Name (Last, First, Middle Initial) A. Honsa-Binder Printing		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2018
Mailing Address 320 Spruce St		FEC Identification Number C C00669143
City St.Paul	State MN	Zip Code 55101
Purpose of Disbursement card, advertising		004
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Amount of Each Disbursement this Period 180.74
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4923
State: WI District: 07		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Hotwire		Date of Disbursement M M / D D / Y Y Y Y 06 / 21 / 2018
Mailing Address 655 Montgomery St, Ste 600		FEC Identification Number C C00669143
City Sann Francisco	State CA	Zip Code 94111
Purpose of Disbursement hotel expense for 7th CD Convention, reimbursed to M Engbretson 6/21		002
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Amount of Each Disbursement this Period 184.14
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4976
State: WI District: 07		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. L2		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2018
Mailing Address 18912 North Creek Pkwy Suite 102		FEC Identification Number C C00669143
City Bothell	State WA	Zip Code 98011
Purpose of Disbursement email addresses		003
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Amount of Each Disbursement this Period 250.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4909
State: WI District: 07		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	430.74
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 39 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MARGARET ENGBRETSON

Full Name (Last, First, Middle Initial) A. Litzenberg, Andrew, , ,			Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2018	
Mailing Address 5332 S 98th St			FEC Identification Number C C00669143	
City Hales Corners	State WI	Zip Code 53130	Amount of Each Disbursement this Period 916.63	
Purpose of Disbursement May manager fee (11 days, prorated)		Category/ Type 001	Transaction ID : SB17.4939	
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input 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: WI District: 07				

Full Name (Last, First, Middle Initial) B. Litzenberg, Andrew, , ,			Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2018	
Mailing Address 5332 S 98th St			FEC Identification Number C C00669143	
City Hales Corners	State WI	Zip Code 53130	Amount of Each Disbursement this Period 125.12	
Purpose of Disbursement reimbursement of travel expense (hotel)		Category/ Type 002	Transaction ID : SB17.4940	
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input 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: WI District: 07				

Full Name (Last, First, Middle Initial) C. Litzenberg, Andrew, , ,			Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2018	
Mailing Address 5332 S 98th St			FEC Identification Number C C00669143	
City Hales Corners	State WI	Zip Code 53130	Amount of Each Disbursement this Period 1250.00	
Purpose of Disbursement manager fee, 6-1 to 6-15		Category/ Type 001	Transaction ID : SB17.4912	
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input 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: WI District: 07				

SUBTOTAL of Disbursements This Page (optional).....▶	2291.75
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MARGARET ENGBRETSON

Full Name (Last, First, Middle Initial) A. Litzenberg, Andrew, , ,		Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2018	
Mailing Address 5332 S 98th St		FEC Identification Number C C00669143	
City Hales Corners	State WI	Zip Code 53130	Amount of Each Disbursement this Period 509.07
Purpose of Disbursement mileage reimbursement, 6/1 to 6/14		Category/ Type 002	Transaction ID : SB17.4935
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Memo Item <input type="checkbox"/>	
Office Sought: <input checked="" type="checkbox"/> House <input 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: WI District: 07			

Full Name (Last, First, Middle Initial) B. Litzenberg, Andrew, , ,		Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2018	
Mailing Address 5332 S 98th St		FEC Identification Number C	
City Hales Corners	State WI	Zip Code 53130	Amount of Each Disbursement this Period 35.00
Purpose of Disbursement Marathon Co. dinner event--reimbursement		Category/ Type 003	Transaction ID : SB17.4936
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input 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: District:			

Full Name (Last, First, Middle Initial) C. Litzenberg, Andrew, , ,		Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2018	
Mailing Address 5332 S 98th St		FEC Identification Number C C00669143	
City Hales Corners	State WI	Zip Code 53130	Amount of Each Disbursement this Period 17.50
Purpose of Disbursement reimbursement for stamps		Category/ Type 001	Transaction ID : SB17.4937
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Memo Item <input type="checkbox"/>	
Office Sought: <input checked="" type="checkbox"/> House <input 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: WI District: 07			

SUBTOTAL of Disbursements This Page (optional).....▶	561.57
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 47			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MARGARET ENGBRETSON

Full Name (Last, First, Middle Initial) A. Nation Builder			Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2018		
Mailing Address 520 S Grand Ave			FEC Identification Number C C00669143		
City Los Angeles	State CA	Zip Code 90071	Amount of Each Disbursement this Period 29.00		
Purpose of Disbursement website monthly fee (part of nontravel reimbursement to M Engebretson 4/14)		Category/ Type 003	Transaction ID : SB17.4961		
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Disbursement For: 2018			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: WI District: 07	<input checked="" type="checkbox"/> Memo Item				

Full Name (Last, First, Middle Initial) B. Nation Builder			Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2018		
Mailing Address 520 S Grand Ave			FEC Identification Number C C00669143		
City Los Angeles	State CA	Zip Code 90071	Amount of Each Disbursement this Period 29.00		
Purpose of Disbursement website monthly fee, reimbursed to M Engebretson 5/11		Category/ Type 001	Transaction ID : SB17.4968		
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Disbursement For: 2018			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: WI District: 07	<input checked="" type="checkbox"/> Memo Item				

Full Name (Last, First, Middle Initial) c. Nation Builder			Date of Disbursement M M / D D / Y Y Y Y 06 / 21 / 2018		
Mailing Address 520 S Grand Ave			FEC Identification Number C C00669143		
City Los Angeles	State CA	Zip Code 90071	Amount of Each Disbursement this Period 29.00		
Purpose of Disbursement website monthly fee, reimbursed to M Engebretson 6/21		Category/ Type 001	Transaction ID : SB17.4982		
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Disbursement For: 2018			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: WI District: 07	<input checked="" type="checkbox"/> Memo Item				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MARGARET ENGBRETSON

Full Name (Last, First, Middle Initial) A. Sipress, Joel, , ,			Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2018	
Mailing Address 2023 E 4th St.			FEC Identification Number C C00669143	
City Duluth	State MN	Zip Code 55812	Amount of Each Disbursement this Period 201.93	
Purpose of Disbursement reimbursement for Facebook ads (see memo)		Category/ Type 004	Transaction ID : SB17.4918	
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input 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: WI	District: 07			

Full Name (Last, First, Middle Initial) B. Sipress, Joel, , ,			Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2018	
Mailing Address 2023 E 4th St.			FEC Identification Number C	
City Duluth	State MN	Zip Code 55812	Amount of Each Disbursement this Period 4.22	
Purpose of Disbursement In-kind - postal products from GoPostal		Category/ Type	Transaction ID : SB17.5041	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input 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:	District:			

Full Name (Last, First, Middle Initial) C. Sipress, Joel, , ,			Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2018	
Mailing Address 2023 E 4th St.			FEC Identification Number C	
City Duluth	State MN	Zip Code 55812	Amount of Each Disbursement this Period 399.00	
Purpose of Disbursement In-kind - mileage, campaign trip		Category/ Type	Transaction ID : SB17.5040	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input 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:	District:			

SUBTOTAL of Disbursements This Page (optional).....▶	605.15
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 43 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MARGARET ENGBRETSON

Full Name (Last, First, Middle Initial) A. Verizon			Date of Disbursement M M / D D / Y Y Y Y 06 / 21 / 2018	
Mailing Address PO Box 4002			FEC Identification Number C C00669143	
City Acworth	State GA	Zip Code 30101	Amount of Each Disbursement this Period 300.96	
Purpose of Disbursement charges for Jan-Mar, paid in Mar&Apr, closing date 4/23, reimbursed to M Engbretson 6/21		Category/ Type 001	Transaction ID : SB17.4980	
Candidate Name FRIENDS OF MARGARET ENGBRETSON		Disbursement For: 2018		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: WI District: 07	<input checked="" type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) B.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	Memo Item	
Candidate Name		Disbursement For:		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<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.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	Memo Item	
Candidate Name		Disbursement For:		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<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).....▶	0.00
TOTAL This Period (last page this line number only).....▶	17335.99

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
FRIENDS OF MARGARET ENGEBRETSON

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor ENGBRETSON, MARGARET RUTH, , ,			Nature of Debt (Purpose): outstanding amt. of candidate advance for domain name expense
Mailing Address 128 VADNAIS LANE			
City BALSAM LAKE	State WI	Zip Code 54810	

Outstanding Balance Beginning This Period <input type="text" value="53.68"/>	Transaction ID : SD10.4621	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="53.68"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor ENGBRETSON, MARGARET RUTH, , ,			Nature of Debt (Purpose): amt. outstanding of candidate advance for phone and domain name expense
Mailing Address 128 VADNAIS LANE			
City BALSAM LAKE	State WI	Zip Code 54810	

Outstanding Balance Beginning This Period <input type="text" value="661.80"/>	Transaction ID : SD10.4622	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="661.80"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor ENGBRETSON, MARGARET RUTH, , ,			Nature of Debt (Purpose): owed to candidate for campaign travel expenses
Mailing Address 128 VADNAIS LANE			
City BALSAM LAKE	State WI	Zip Code 54810	

Outstanding Balance Beginning This Period <input type="text" value="564.57"/>	Transaction ID : SD10.4623	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="564.57"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 45 OF 47
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

FRIENDS OF MARGARET ENGEBRETSON

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor ENGBRETSON, MARGARET RUTH, , ,			Nature of Debt (Purpose): owed to candidate for campaign travel expenses
Mailing Address 128 VADNAIS LANE			
City BALSAM LAKE	State WI	Zip Code 54810	

Outstanding Balance Beginning This Period <input type="text" value="1055.40"/>		Transaction ID : SD10.4626	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1055.40"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor ENGBRETSON, MARGARET RUTH, , ,			Nature of Debt (Purpose): owed to candidate for gsuite, computer security, website, event, and phone expenses
Mailing Address 128 VADNAIS LANE			
City BALSAM LAKE	State WI	Zip Code 54810	

Outstanding Balance Beginning This Period <input type="text" value="112.14"/>		Transaction ID : SD10.4627	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="112.14"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor ENGBRETSON, MARGARET RUTH, , ,			Nature of Debt (Purpose): candidate travel expenses, 4/22 to 5/24
Mailing Address 128 VADNAIS LANE			
City BALSAM LAKE	State WI	Zip Code 54810	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID : SD10.5034	
Amount Incurred This Period <input type="text" value="1378.19"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1378.19"/>	

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="1378.19"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)

FRIENDS OF MARGARET ENGEBRETSON

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor ENGBRETSON, MARGARET RUTH, , ,			Nature of Debt (Purpose): candidate non-travel expenses, 4/22 to 5/24 closing date
Mailing Address 128 VADNAIS LANE			
City BALSAM LAKE	State WI	Zip Code 54810	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID : SD10.5035	
Amount Incurred This Period <input type="text" value="254.94"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="254.94"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor ENGBRETSON, MARGARET RUTH, , ,			Nature of Debt (Purpose): candidate travel expenses, 5/25 to 6/23 closing date
Mailing Address 128 VADNAIS LANE			
City BALSAM LAKE	State WI	Zip Code 54810	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID : SD10.5036	
Amount Incurred This Period <input type="text" value="657.08"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="657.08"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor ENGBRETSON, MARGARET RUTH, , ,			Nature of Debt (Purpose): candidate non-travel expenses, 5/25 to 6/23 closing date
Mailing Address 128 VADNAIS LANE			
City BALSAM LAKE	State WI	Zip Code 54810	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID : SD10.5037	
Amount Incurred This Period <input type="text" value="338.55"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="338.55"/>	

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="1250.57"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 9 10

NAME OF COMMITTEE (In Full)

FRIENDS OF MARGARET ENGEBRETSON

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Litzenberg, Andrew, , ,			Nature of Debt (Purpose): travel expenses for June 1-15 2018 for campaign worker
Mailing Address 5332 S 98th St			
City Hales Corners	State WI	Zip Code 53130	

Outstanding Balance Beginning This Period		Transaction ID : SD10.5232	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
262.09	0.00	262.09	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

1) SUBTOTALS This Period This Page (optional)	262.09
2) TOTALS This Period (last page this line number only)	2890.85
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	2890.85