

**FEC
FORM 3X**

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

RECEIVED
FEC MAIL ROOM
2002 MAR -5 P 2:00

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines. 12FB4M5

MINNESOTA FIFTH CONGRESSIONAL DISTRICT
REPUBLICAN COMMITTEE

ADDRESS (number and street) 11730 NEW BRIGHTON BLVD
BOX 159
 Check if different than previously reported. (ACC) MINNEAPOLIS MN 55413

2. FEC IDENTIFICATION NUMBER C00319038

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

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

(b) Monthly Report Due On:

Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

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

Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)

Election on / / in the State of

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

General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period 01 / 01 / 2001 through 12 / 31 / 2001

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

Type or Print Name of Treasurer Andy L. Nielsen

Signature of Treasurer *Andy L. Nielsen* Date 02 / 09 / 2002

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/01)

Page 2

Write or Type Committee Name

C0039038

MINNESOTA FIFTH CONGRESSIONAL DISTRICT REPUBLICAN COMMITTEE

Report Covering the Period:

From:

To:

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="200"/>		<input type="text" value="42870"/>
(b) Cash on Hand at Beginning of Reporting Period	<input type="text" value="42870"/>	
(c) Total Receipts (from Line 18)	<input type="text" value="19490"/>	<input type="text" value="19490"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<input type="text" value="194770"/>	<input type="text" value="194770"/>
7. Total Disbursements (from Line 30)	<input type="text" value="98400"/>	<input type="text" value="98400"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<input type="text" value="96370"/>	<input type="text" value="96370"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="000"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="000"/>	

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
of Receipts**

FEC Form 3X (Revised 1/01)

Page 3

Write or Type Committee Name

000319038

MN 5th Congressional District Republican Committee

Report Covering the Period:

From:

01 01 2001

To:

12 31 2001

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	0.00	
(ii) Unitemized	1,119.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii))	1,119.00	1,119.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0,000.00	0,000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 32, page 4)	1,119.00	1,119.00
12. Transfers From Affiliated/Other Party Committees	00,000.00	00,000.00
13. All Loans Received	000.00	000.00
14. Loan Repayments Received	4,000.00	4,000.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 36, page 4)	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18)	1,519.00	1,519.00
20. Total Federal Receipts (subtract Line 16 from Line 19)	1,519.00	1,519.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Revised 1/01)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	000	000
(ii) Non-Federal Share	000	000
(b) Other Federal Operating Expenditures	000	000
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	000	000
22. Transfers to Affiliated/Other Party Committees	58400	58400
23. Contributions to Federal Candidates/Committees and Other Political Committees	000	000
24. Independent Expenditures (use Schedule E)	000	000
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. §441a(d)) (use Schedule F)	000	000
26. Loan Repayments Made	000	000
27. Loans Made	40000	40000
29. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	000	000
(b) Political Party Committees	000	000
(c) Other Political Committees (such as PACs)	000	000
(d) Total Contribution Refunds (add Lines 29(a), (b), and (c))	000	000
29. Other Disbursements	000	000
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 29(d), and 29)	98400	98400
31. Total Federal Disbursements (subtract Line 21(a)(i) from Line 30)	98400	98400

III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) (from Line 11(d), page 3)	000	000
33. Total Contribution Refunds (from Line 29(d))	000	000
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	000	000
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	000	000
36. Offsets to Operating Expenditures (from Line 15, page 3)	000	000
37. Net Operating Expenditures (subtract Line 36 from Line 35)	000	000

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)		PAGE / OF	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19	<input type="checkbox"/> 20

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) C00319038
NH 5th Cong. Dist. Repub. Committee

A. Full Name (Last, First, Middle Initial) *N/A*
 Mailing Address _____
 City _____ State _____ Zip Code _____
 FEC ID number of contributing federal political committee. C _____
 Name of Employer _____ Occupation _____
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ _____

Date of Receipt _____
 Amount of Each Receipt this Period _____

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) ▼
 Aggregate Year-to-Date ▼ _____

Date of Receipt _____
 Amount of Each Receipt this Period _____

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) ▼
 Aggregate Year-to-Date ▼ _____

Date of Receipt _____
 Amount of Each Receipt this Period _____

SUBTOTAL of Receipts This Page (optional) _____ ▶ 0.00
 TOTAL This Period (last page this line number only) _____ ▶ 00.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE	OF
	<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24
	<input checked="" type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 25
				<input type="checkbox"/> 28c
				<input type="checkbox"/> 29

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NAME OF COMMITTEE (in full) 00319038
MIN 5th Congressional District Republican Comm. Hce

Full Name (Last, First, Middle Initial) A. MN 5th Cong. Dist. Republ. Committee		Date of Disbursement 04/06/2001
Mailing Address 1730 New Brighton Blvd, Box 159		Amount of Each Disbursement this Period 400.00
City Minneapolis	State MN Zip Code 55413	
Purpose of Disbursement LOAN		Category/Type 009
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

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

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

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE OF

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

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.

CD0319038

NAME OF COMMITTEE (In Full)

MN 5th Congressional Dist. Republican Committee

Full Name (Last, First, Middle Initial)

Date of Disbursement

10 / 21 / 2001

A. MN 5th Cong. Dist. Republ. Comm: Hee

Mailing Address
1730 New Brighton Blvd, Box 159

City: Minneapolis State: MN Zip Code: 55412

Amount of Each Disbursement this Period

58,400

Purpose of Disbursement
Conciliatory Action - Return of Shared Activity

008
Category/Type

Candidate Name
Leads from 2000

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

State: District:

Date of Disbursement

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/Type

Amount of Each Disbursement this Period

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

State: District:

Date of Disbursement

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/Type

Amount of Each Disbursement this Period

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

State: District:

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE H1 (FEC Form 3X)

METHOD OF ALLOCATION FOR SHARED FEDERAL AND NON-FEDERAL ADMINISTRATIVE EXPENSES AND GENERIC VOTER DRIVE COSTS

NAME OF COMMITTEE (In Full) 000319038
 Minnesota Fifth Congressional District Republican Committee

USE ONLY ONE SECTION

A. NATIONAL PARTY COMMITTEES

FIXED FEDERAL PERCENTAGE (Check the appropriate line and enter % in box to right)..... %

Presidential Year (85%)

All Other Years (50%)

B. HOUSE AND SENATE PARTY CAMPAIGN COMMITTEES

MINIMUM FEDERAL PERCENTAGE (65%) (If checked, enter 65% in box to right)..... %

OR

FUNDS EXPENDED:

- Estimated Direct Candidate Support - Federal..... %
- Estimated Direct Candidate Support - Non-Federal..... %

ADJUSTMENTS TO FUNDS EXPENDED:

Actual Direct Candidate Support - Federal..... %

Actual Direct Candidate Support - Non-Federal..... %

NOTE: Funds expended must be used if the Federal proportion is greater than 85% in any year.

C. SEPARATE SEGREGATED FUNDS AND NON-CONNECTED COMMITTEES

FUNDS EXPENDED:

- Estimated Direct Candidate Support - Federal..... %
- Estimated Direct Candidate Support - Non-Federal..... %

ADJUSTMENTS TO FUNDS EXPENDED:

Actual Direct Candidate Support - Federal..... %

Actual Direct Candidate Support - Non-Federal..... %

D. STATE AND LOCAL PARTY COMMITTEES

BALLOT COMPOSITION

Check all Offices appearing on the next General Election Ballot:

1. President.....	<input checked="" type="checkbox"/>	(1 Point).....	<table border="1" style="width: 100px; height: 100px; text-align: center;"> <tr><td> </td></tr> <tr><td>1</td></tr> <tr><td>1</td></tr> <tr><td>3</td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td>1</td></tr> <tr><td>1</td></tr> <tr><td>1</td></tr> <tr><td>3</td></tr> <tr><td>6</td></tr> <tr><td> </td></tr> </table>		1	1	3			1	1	1	3	6	
1															
1															
3															
1															
1															
1															
3															
6															
2. U.S. Senate.....	<input checked="" type="checkbox"/>	(1 Point).....													
3. U.S. Congress.....	<input checked="" type="checkbox"/>	(1 Point).....													
4. SUBTOTAL - Federal (ADD 1, 2, AND 3)															
5. Governor.....	<input type="checkbox"/>	(1 Point).....													
6. Other Statewide Office(s).....	<input type="checkbox"/>	(1 or 2 Points).....													
7. State Senate.....	<input checked="" type="checkbox"/>	(1 Point).....													
8. State Representative.....	<input checked="" type="checkbox"/>	(1 Point).....													
9. Local Candidates.....	<input checked="" type="checkbox"/>	(1 or 2 Points).....													
10. Extra Non-Federal Point.....	<input checked="" type="checkbox"/>	(1 Point).....													
11. SUBTOTAL - Non-Federal (Add 5, 6, 7, 8, 9, and 10)															
12. TOTAL POINTS (Line 4 plus Line 11)															

FEDERAL ALLOCATION = Line 4 divided by Line 12..... 50%

