

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED  
FEDERAL  
CAMPAIGN CENTER

Office Use Only

1. NAME OF COMMITTEE (In full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines.

12FE4M5

MINNESOTA SENATE MAJORITY CAMPAIGN

ADDRESS (number and street)

P.O. BOX 45327

Check if different than previously reported. (ACC)

ST. PAUL

MINN

55165

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00310352

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(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)

(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)

(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) 80-Day POST-Election Report for the:

General (80G)

Runoff (80R)

Special (80S)

Election on

In the State of

5. Covering Period

07/01/2002

through

09/30/2002

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

Richard S. Cohen

Signature of Treasurer

[Handwritten Signature]

Date

10/11/2002

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

Office Use Only

FEC FORM 3X (Revised 1/01)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Revised 1/01)

Write or Type Committee Name

MINNESOTA SENATE MAJORITY CLERKS

Report Covering the Period:

From:

07 01 2002

To:

12 31 2002

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">0</span>		<span style="border: 1px solid black; padding: 2px;">0</span>
(b) Cash on Hand at Beginning of Reporting Period .....	<span style="border: 1px solid black; padding: 2px;">0</span>	
(c) Total Receipts (from Line 1B) .....	<span style="border: 1px solid black; padding: 2px;">23,445.00</span>	<span style="border: 1px solid black; padding: 2px;">23,445.00</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	<span style="border: 1px solid black; padding: 2px;">23,445.00</span>	<span style="border: 1px solid black; padding: 2px;">23,445.00</span>
7. Total Disbursements (from Line 8C) .....	<span style="border: 1px solid black; padding: 2px;">10,098.25</span>	<span style="border: 1px solid black; padding: 2px;">10,098.25</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">13,346.75</span>	<span style="border: 1px solid black; padding: 2px;">13,346.75</span>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0</span>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0</span>	

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)

Write or Type Committee Name

Report Covering the Period:

From:

07 01 2002

To:

09 30 2002

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) .....	625000	
(ii) Unitemized .....	1119500	
(iii) TOTAL (add Lines 11(a)(i) and (ii)) .....	1744500	1744500
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs) .....	600000	600000
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 32, page 4) .....	2344500	2344500
12. Transfers From Affiliated/Other Party Committees .....		
13. All Loans Received .....		
14. Loan Repayments Received .....		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 32, page 4) .....		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees .....		
17. Other Federal Receipts (Dividends, Interest, etc.) .....		
18. Transfers from Nonfederal Account for Joint Activity .....		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18) .....	2344500	2344500
20. Total Federal Receipts (subtract Line 16 from Line 19) .....	2344500	2344500

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....		
(ii) Non-Federal Share .....		
(b) Other Federal Operating Expenditures .....	9825	9825
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	9825	9825
22. Transfers to Affiliated/Other Party Committees .....	10,000.00	10,000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees .....		
24. Independent Expenditures (use Schedule E) .....		
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. §441a(d)) (use Schedule F) .....		
26. Loan Repayments Made .....		
27. Loans Made .....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....		
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs) .....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....		
29. Other Disbursements .....		
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 29(d), and 29) .....	10,098.25	10,098.25
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30) .....		

III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) (from Line 11(d), page 3) .....	23,445.00	23,445.00
33. Total Contribution Refunds (from Line 28(d)) .....		
34. Net Contributions (other than loans) (subtract Line 33 from Line 32) .....	23,445.00	23,445.00
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	9825	9825
36. Offsets to Operating Expenditures (from Line 15, page 3) .....		
37. Net Operating Expenditures (subtract Line 36 from Line 35) .....	9825	9825

SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE	OF
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17	

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)

MINNESOTA SENATE MAJORITY CLERKS

A. Full Name (Last, First, Middle Initial)  
**BROTHERHOOD OF LOCOMOTIVE ENGINEERS**

Mailing Address  
**137D DUTARIO STREET**

City **Cleveland** State **OH** Zip Code **44113**

FEC ID number of contributing federal political committee: **C00099234**

Name of Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) \_\_\_\_\_

Aggregate Year-to-Date  
**5000.00**

Date of Receipt  
**07 15 2002**

Amount of Each Receipt this Period  
**5000.00**

B. Full Name (Last, First, Middle Initial)  
**TRANSPORTATION POLITICAL EDUCATION FUND**

Mailing Address  
**3919 Central Ave NE**

City **Columbia Heights** State **MN** Zip Code **55421**

FEC ID number of contributing federal political committee: **C05001636**

Name of Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) \_\_\_\_\_

Aggregate Year-to-Date  
**5000.00**

Date of Receipt  
**07 15 2002**

Amount of Each Receipt this Period  
**5000.00**

C. Full Name (Last, First, Middle Initial)  
**UNITED FOOD & COMMERCIAL WORKERS**

Mailing Address  
**1775 K Street NW**

City **WASHINGTON** State **DC** Zip Code **20006**

FEC ID number of contributing federal political committee: **C00002766**

Name of Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) \_\_\_\_\_

Aggregate Year-to-Date  
**5000.00**

Date of Receipt  
**08 07 2002**

Amount of Each Receipt this Period  
**5000.00**

SUBTOTAL of Receipts This Page (optional) **6000.00**

TOTAL This Period (see page this line number only) **6000.00**

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

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

FOR LINE NUMBER:		PAGE 1 OF 2	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**MINNESOTA SENATE MAJORITY CAUCUS**

**A.** Full Name (Last, First, Middle Initial)  
**AMES, Richard**

Mailing Address  
**14420 CRD 5**

City **Burnsville** State **MN** Zip Code **55306**

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

Name of Employer: **AMES CONSTRUCTION** Occupation: **OWNER**

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date: **5,000.00**

Date of Receipt: **07/15/2002**

Amount of Each Receipt this Period: **5,000.00**

**B.** Full Name (Last, First, Middle Initial)  
**ANDERSON, JOHN**

Mailing Address  
**5385 Culture Road**

City **Golden Valley** State **MN** Zip Code **55426**

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

Name of Employer: **SELF** Occupation: **RECTOR**

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date: **5,000.00**

Date of Receipt: **09/24/2002**

Amount of Each Receipt this Period: **5,000.00**

**C.** Full Name (Last, First, Middle Initial)  
**CHRISTENSEN, Robert**

Mailing Address  
**701 4th AV SGT 00**

City **MINNEAPOLIS** State **MN** Zip Code **55415**

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

Name of Employer: **DUNKLEY, BENNETT** Occupation: **ATTORNEY**

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date: **2,500.00**

Date of Receipt: **08/29/2002**

Amount of Each Receipt this Period: **2,500.00**

SUBTOTAL of Receipts This Page (optional) **12,500.00**

TOTAL This Period (last page this line number only) **12,500.00**

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

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

FOR LINE NUMBER: PAGE 2 OF 3

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19	<input type="checkbox"/> 20

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NAME OF COMMITTEE (in Full)  
**MINNESOTA SENATE MAJORITY CAUCUS**

**A. Diouen, Susan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: **6714 STEVENS AVE S**  
 City: **Richfield** State: **MN** Zip Code: **55423**  
 Date of Receipt: **09 24 2002**  
 Amount of Each Receipt this Period: **250.00**  
 FEC ID number of contributing federal political committee: **C**  
 Name of Employer: **AN Realtors** Occupation: **Lobbyist**  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date: **250.00**

**B. Erickson, James**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: **3701 ARBOTT AVE S**  
 City: **Minneapolis** State: **MN** Zip Code: **55410**  
 Date of Receipt: **07 15 2002**  
 Amount of Each Receipt this Period: **250.00**  
 FEC ID number of contributing federal political committee: **C**  
 Name of Employer: **Self** Occupation: **Consultant**  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date: **250.00**

**C. FLAHERTY Timothy**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: **3211 Crestmoor Dr**  
 City: **Woodbury** State: **MN** Zip Code: **55125**  
 Date of Receipt: **07 15 2002**  
 Amount of Each Receipt this Period: **250.00**  
 FEC ID number of contributing federal political committee: **C**  
 Name of Employer: **FLAHERTY, Kathleen** Occupation: **ATTORNEY**  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date: **250.00**

SUBTOTAL of Receipts This Page (optional) **750.00**  
 TOTAL This Period (last page this line number only) **750.00**

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

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

FOR LINE NUMBER: (check only one)		PAGE 3 OF 4	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**MINNESOTA SENATE MAJORITY MEMBERS**

**A.** Full Name (Last, First, Middle Initial)  
**FLAHERTY, Timothy**

Mailing Address  
**3211 Crestwood Ave**

City **Woodbury** State **MN** Zip Code **55125**

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

Name of Employer  
**FLAHERTY'S KITCHEN** Occupation  
**ATTORNEY**

Receipt For:  
 Primary  General  
 Other (specify) **▼**

Aggregate Year-to-Date  
**500.00**

Date of Receipt  
**09 / 18 / 2002**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**HARPER WILLIAM**

Mailing Address  
**16276 Sucke Hill Dr S**

City **APPEL** State **MN** Zip Code **55004**

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

Name of Employer  
**HARPER LAW FIRM** Occupation  
**ATTORNEY**

Receipt For:  
 Primary  General  
 Other (specify) **▼**

Aggregate Year-to-Date  
**250.00**

Date of Receipt  
**09 / 29 / 2002**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**HEDSTROM, Mary Jane**

Mailing Address  
**4301 Hampton Rd**

City **Golden Valley** State **MN** Zip Code **55422**

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

Name of Employer  
**STATE OF MINNESOTA** Occupation  
**FISCAL ANALYST**

Receipt For:  
 Primary  General  
 Other (specify) **▼**

Aggregate Year-to-Date  
**250.00**

Date of Receipt  
**09 / 24 / 2002**

Amount of Each Receipt this Period  
**250.00**

SUBTOTAL of Receipts This Page (optional)	<b>750.00</b>
TOTAL This Period (last page this line number only)	



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

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

FOR LINE NUMBER: PAGE 7 OF 9  
(check only one)

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

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NAME OF COMMITTEE (in full)

MINNESOTA SENATE MAJORITY CLERKS

**A.** Full Name (Last, First, Middle Initial)  
Jorstad, David

Mailing Address  
240 Meadow Ln N

City Golden Valley State MN Zip Code 55127

FEC ID number of contributing federal political committee: C

Name of Employer: Sipkin, Gross, Von Heltem  
Occupation: Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000

Date of Receipt: 08/29/2002

Amount of Each Receipt this Period: 25000

**B.** Full Name (Last, First, Middle Initial)  
Kerth, A.M.

Mailing Address  
5225 Meadow Crossing Rd

City Rochester State MN Zip Code 55902

FEC ID number of contributing federal political committee: C

Name of Employer: Muff, Senger  
Occupation: Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50000

Date of Receipt: 07/11/2003

Amount of Each Receipt this Period: 50000

**C.** Full Name (Last, First, Middle Initial)  
Knapp, Joan

Mailing Address  
2193 Sargent Ave

City So Pan State MN Zip Code 55105

FEC ID number of contributing federal political committee: C

Name of Employer: Winthrop, Weinstein  
Occupation: Lobbyist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000

Date of Receipt: 07/15/2003

Amount of Each Receipt this Period: 25000

SUBTOTAL of Receipts This Page (optional) ..... 100000

TOTAL This Period (last page this line number only) ..... 100000

SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 OF 9  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)

MINNESOTA SENATE MAJORITY CAUCUS

A. Full Name (Last, First, Middle Initial)  
Kozak, Andrew

Mailing Address  
3104 Minnehaha Ave

City State Zip Code  
Minneapolis MN 55406

FEC ID number of contributing federal political committee.  
C

Name of Employer Occupation  
North Star Advisors Lobbyist

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) 250.00

Date of Receipt  
07 15 2002

Amount of Each Receipt this Period  
250.00

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

Mailing Address  
P.O. Box 877

City State Zip Code  
Moorhead MN 56501

FEC ID number of contributing federal political committee.  
C

Name of Employer Occupation  
Lee Hansen Law Office ATTORNEY

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) 250.00

Date of Receipt  
08 29 2002

Amount of Each Receipt this Period  
250.00

C. Full Name (Last, First, Middle Initial)  
Moshbacher, Ronald

Mailing Address  
Holt Park Ave

City State Zip Code  
Minneapolis MN 55404

FEC ID number of contributing federal political committee.  
C

Name of Employer Occupation  
Moshbacher Spence ATTORNEY

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) 250.00

Date of Receipt  
08 29 2002

Amount of Each Receipt this Period  
250.00

SUBTOTAL of Receipts This Page (optional) ▶

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

750.00

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

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

FOR LINE NUMBER: PAGE **1** OF **2**

(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (in Full)

**MINNESOTA SENATE MAJORITY CAUCUS**

**A.** Full Name (Last, First, Middle Initial)  
**PETERSON, PAUL**

Mailing Address  
**7900 Somerset Rd**

City **Woodbury** State **MN** Zip Code **55125**

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

Name of Employer: **PAUL PETERSON LTD** Occupation: **ATTORNEY**

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date: **250.00**

Date of Receipt: **08/29/2002**

Amount of Each Receipt this Period: **250.00**

**B.** Full Name (Last, First, Middle Initial)  
**FRANK, PAULA**

Mailing Address  
**2455 County Road 24**

City **Long Lake** State **MN** Zip Code **55356**

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

Name of Employer: **Best Buy** Occupation:

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date: **250.00**

Date of Receipt: **09/18/2002**

Amount of Each Receipt this Period: **250.00**

**C.** Full Name (Last, First, Middle Initial)  
**RUBIN, KATHLEEN**

Mailing Address  
**8415 Duluth St**

City **Golden Valley** State **MN** Zip Code **55446**

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

Name of Employer: **DATA METRICS** Occupation:

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date: **250.00**

Date of Receipt: **07/15/2002**

Amount of Each Receipt this Period: **250.00**

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

**750.00**

SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 OF 8  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (in Full)

MINNESOTA Secure Majority Caucus

A. Full Name (Last, First, Middle Initial) Tilley, Eamon

Mailing Address 9085 ALVANO AVE

City Forest Grove Heights State MN Zip Code 55777

FEC ID number of contributing federal political committee: C

Date of Receipt: 07 / 15 / 2002

Amount of Each Receipt this Period: 250.00

Name of Employer: Cantor Hill Assoc Occupation: Lobbyist

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date: 250.00

B. Full Name (Last, First, Middle Initial) VAN DYCK, SHARON

Mailing Address 2600 MONTGOMERY AVE

City ST LOUIS PARK State MN Zip Code 55414

FEC ID number of contributing federal political committee: C

Date of Receipt: 08 / 29 / 2002

Amount of Each Receipt this Period: 250.00

Name of Employer: Schubel Goetz & Sioban Occupation: ATTORNEY

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date: 250.00

C. Full Name (Last, First, Middle Initial) Wilson, Kingsley

Mailing Address 17 S. 1st St #A704

City MINNEAPOLIS State MN Zip Code 55404

FEC ID number of contributing federal political committee: C

Date of Receipt: 07 / 15 / 2002

Amount of Each Receipt this Period: 250.00

Name of Employer: ALLIED CHARITIES Occupation: Lobbyist

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date: 250.00

SUBTOTAL of Receipts This Page (optional) \_\_\_\_\_

TOTAL This Period (last page this line number only) \_\_\_\_\_

750.00

SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 3 OF 8	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	<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)

Minnesota Senate Minority Council

Full Name (Last, First, Middle Initial) A. Zordan, Bruce		Date of Receipt 07 / 15 / 2007
Mailing Address 4490 Devonshire Dr		Amount of Each Receipt this Period 250.00
City Youngstown	State OH	
FEC ID number of contributing federal political committee C		Aggregate Year-to-Date 250.00
Name of Employer B.S. Allen Co	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B.		Date of Receipt
Mailing Address		
City	State	Zip Code
FEC ID number of contributing federal political committee C		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C.		Date of Receipt
Mailing Address		
City	State	Zip Code
FEC ID number of contributing federal political committee C		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶

250.00

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

6250.00

**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 1 OF 1							
	<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"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 29a

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NAME OF COMMITTEE (in Full)  
**MINNESOTA SENATE MAJORITY CAUCUS**

**A.**

Full Name (Last, First, Middle Initial)  
**MINNESOTA DEMOCRATIC FARMER LABOR PARTY**

Date of Disbursement  
**08 21 2002**

Mailing Address  
**255 EAST PLATO BND**

City  
**ST PAUL** State  
**MN** Zip Code  
**55107**

Purpose of Disbursement  
**TRANSFER**

Candidate Name  
**008** Category/Type

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

State: \_\_\_\_\_ District: \_\_\_\_\_

Amount of Each Disbursement this Period  
**10000.00**

**B.**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: \_\_\_\_\_ District: \_\_\_\_\_

Amount of Each Disbursement this Period

**C.**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: \_\_\_\_\_ District: \_\_\_\_\_

Amount of Each Disbursement this Period


SUBTOTAL of Disbursements This Page (optional) **10000.00**

TOTAL This Period (see page this line number only) **10000.00**

## Federal Election Commission

### ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt 10/15/09
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 PREPARER	10/15/09 DATE PREPARED