

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

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2004 JUL 17 10:00 AM OFFICE 610

1. NAME OF COMMITTEE (In full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5

Taxpayers League of Minnesota Liberty Fund

ADDRESS (number and street) P.O. Box 130353

Check if different than previously reported. (ACC) St. Paul MN 55113-0003

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C000339473

3. IS THIS REPORT NEW OR AMENDED

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

04 01 2004

through

06 30 2004

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

Marleen Smith

Signature of Treasurer

Marleen Smith

Date

07 15 2004

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5457g.

Office Use Only

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name

Taxpayers League of Minnesota Liberty Fund

Report Covering the Period:

From:

04 01 2004

To:

06 30 2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <u>2004</u>		<u>667</u>
(b) Cash on Hand at Beginning of Reporting Period	<u>8575</u>	
(c) Total Receipts (from Line 19)	<u>2000</u>	<u>12000</u>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<u>10575</u>	<u>12667</u>
7. Total Disbursements (from Line 31)	<u>10365</u>	<u>12457</u>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<u>210</u>	<u>210</u>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<u>0</u>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<u>55844</u>	



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 (Rev. 02/2003)

Page 3

Write or Type Committee Name

Taxpayers League of Minnesota Liberty Fund

Report Covering the Period:

From:

04 07 2004

To:

06 30 2004

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)

[Empty box]

(ii) Unitemized

2000

(iii) TOTAL (add Lines 11(a)(i) and (ii)

2000

12000

(b) Political Party Committees

[Empty box]

(c) Other Political Committees (such as PACs)

[Empty box]

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)

[Empty box]

[Empty box]

12. Transfers From Affiliated/Other Party Committees

[Empty box]

[Empty box]

13. All Loans Received

[Empty box]

[Empty box]

14. Loan Repayments Received

[Empty box]

[Empty box]

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)

[Empty box]

[Empty box]

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees

[Empty box]

[Empty box]

17. Other Federal Receipts (Dividends, Interest, etc.)

[Empty box]

[Empty box]

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3)

[Empty box]

[Empty box]

(b) Levin Funds (from Schedule H5)

[Empty box]

[Empty box]

(c) Total Transfers (add 18(a) and 18(b))

[Empty box]

[Empty box]

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))

2000

12000

20. Total Federal Receipts (subtract Line 18(c) from Line 19)

2000

12000

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share		
(ii) Non-Federal Share		
(b) Other Federal Operating Expenditures	1,036.5	124.57
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1,036.5	124.57
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees		
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (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. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule HB)		
(i) Federal Share		
(ii) "Levin" Share		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	1,036.5	124.57
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	1,036.5	124.57

**SCHEDULE D (FEC Form 3X)
DEBTS AND OBLIGATIONS**

Excluding Loans

NAME OF COMMITTEE (In Full)
Taxpayers League of Minnesota Liberty Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <i>Church Offset St. Paul</i>	Nature of Debt (Purpose): <i>Letterhead, Envelopes</i>
Mailing Address <i>1983 Sloan Place, Suite 11</i>	
City State Zip Code <i>St. Paul MN 55117</i>	

Outstanding Balance Beginning This Period <i>503.84</i>	Payment This Period <i>0</i>	Outstanding Balance at Close of This Period <i>503.84</i>
Amount Incurred This Period <i>0</i>		

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <i>Smith, Marleen</i>	Nature of Debt (Purpose): <i>Postage</i>
Mailing Address <i>900 Scenic Ct</i>	
City State Zip Code <i>Shoreview MN 55126</i>	

Outstanding Balance Beginning This Period <i>409.5</i>	Payment This Period <i>0</i>	Outstanding Balance at Close of This Period <i>546.0</i>
Amount Incurred This Period <i>136.5</i>		


C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <i>Trimble & Assoc.</i>	Nature of Debt (Purpose): <i>Attorney fees</i>
Mailing Address <i>11700 Wayzata Blvd.</i>	
City State Zip Code <i>Minneapolis MN 55305</i>	

Outstanding Balance Beginning This Period <i>900.00</i>	Payment This Period <i>900.00</i>	Outstanding Balance at Close of This Period <i>0</i>
Amount Incurred This Period <i>0</i>		

1) SUBTOTALS This Period This Page (optional)	<i>558.44</i>
2) TOTALS This Period (last page this line number only)	<i>558.44</i>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	<i>558.44</i>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

Federal Election Commission
**ENVELOPE REPLACEMENT PAGE
 FOR INCOMING DOCUMENTS**

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

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
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	Delivery Confirmation™ Label <input type="checkbox"/>
<input checked="" type="checkbox"/> USPS Express Mail	Postmarked 7/15/04
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
 PREPARER	7/16/04 DATE PREPARED