3000450X W.

FEC FORM 3X

1.

FE6AN026

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED

2013 JAN -3 AM 6: 46

NAME OF		
COMMITTEE	(in	full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5 MAIL CENTER

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L.	AXPAYERS L	EAGUE:	OF MIN	INESO	IA L	I DEK	1,1, F.UND
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	Check if different than previously reported. (ACC)	SAINT.	PAUL		<u> </u>	MN L	551041-
2.	FEC IDENTIFICATION NU	MBER ▼	CITY 🛦		S ⁻	TATE 🛦	ZIP CODE A
	C0033943	73.	3. IS THIS REPORT	51 W /6	EW OR	AM (A)	ENDED
4.	TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2) Mar 20 (M3)		May 20 (M5)	Lad pag	20 (M8) Nov 20 (M11) (Non-Election Year Only) 20 (M9) Dec 20 (M12)
	(a) Quarterly Reports:		tol .	gare.		Land page	(Non-Election Year Only)
	April 15 Quarterly Report (Q	1)	Apr 20 (M4)	ined.	ul 20 (M7)	33	20 (M10)
	July 15 Quarterly Report (Q	(C) 12-Da	y Election	Primary (12P		General (Sam S
	October 15 Quarterly Report (Q	Repor	t for the:	Convention (12C)	Special (1	28)
	January 31 Year-End Report (Y		Election on	V.M.	7		in the State of
	July 31 Mid-Year Report (Non-election Year Only) (MY)	POST	y -Election t for the:	General (300	i)	Runoff (3	0R) Special (30S)
	Termination Report (TER)	Пери	Election on		06	2012	in the State of
5.	Covering Period	0 18	2012	through		26	2012
I ce	ertify that I have examined thi		2.2 11	wledge and b	elief it is true	, correct and	complete.
Тур	e or Print Name of Treasurer	_ Tori	~ Kelly				
Signature of Treasurer Janua Kelly Date 12 10 2012							
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.							
1	Office Use _ Only					!	FEC FORM 3X Rev. 12/2004

12020004204

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name		
Report Covering the Period: From:	0 18 2012	o: 111 26 2012
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 202		00000
(b) Cash on Hand at Beginning of Reporting Period	5,0,0,0,0,0	
(c) Total Receipts (from Line 19)	1.00006	6.00.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	6.00000	6,00000
7. Total Disbursements (from Line 31)	254273	2.542,73
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	3.457.27	3,457.27
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	600	
Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		·
This committee has qualified as a multi-	candidate 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

Page 3

Write or Type Committee Name

Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 000,00 (i) Itemized (use Schedule A)..... (ii) Unitemized (iii) TOTAL (add Lines 11(a)(i) and (ii)......▶ (b) Political Party Committees (c) Other Political Committees (such as PACs)..... Total Contributions (add Lines (d) 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) 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 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... 17. Other Federal Receipts (Dividends, Interest, etc.)..... 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3) (b) Levin Funds (from Schedule H5) (c) Total Transfers (add 18(a) and 18(b)).. 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))....... 20. Total Federal Receipts (subtract Line 18(c) from Line 19)▶

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
21.	Operating Expenditures: (a) Allocated Federal/Non-Federal	Total This Fellou	Caleridar Year-to-Date		
	Activity (from Schedule H4)				
	(i) Federal Share	9.00	000		
	(ii) Non-Federal Share	000	000		
	(b) Other Federal Operating				
	Expenditures	42.73	42.73		
•	(c) Total Operating Expenditures	112 72	4773		
00	(add 21(a)(i), (a)(ii), and (b))▶	7/e + 5	72.72		
22.	Transfers to Affillated/Other Party Committees	808	000		
23.	Contributions to				
	Federal Candidates/Committees and Other Political Committees	2,5,00.00	25,00.00		
24.	Independent Expenditures		194		
25.	(use Schedule E) Coordinated Party Expenditures		i		
	(2 U.S.C. §441a(d)) (use Schedule F)	000	700		
	(use sofiedule i)				
26.	Loan Repayments Made	0.00	0.00		
		060			
27. 28	Loans Made Refunds of Contributions To:	L	0.00		
_0.	(a) Individuals/Persons Other Than Political Committees	000	000		
	man Fondeal Committees				
	(b) Political Party Committees	600	000		
	(c) Other Political Committees				
	(such as PACs)	000	000		
	(d) Total Contribution Refunds				
	(add Lines 28(a), (b), and (c))▶	0.00	0.00		
		2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			
29.	Other Disbursements	0.00	for the second s		
30.	Federal Election Activity (2 U.S.C. §431(20))		· .		
	(a) Allocated Federal Election Activity				
	(from Schedule H6)	600	framerican extress of the section of		
	(i) Federal Share				
	(ii) "Levin" Share	(100)	000		
	(b) Federal Election Activity Paid Entirely		templan hander i faren en anderskar en		
	With Federal Funds	0.00	000		
	(c) Total Federal Election Activity (add	Market and the second s			
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00			
31.	Total Disbursements (add Lines 21(c), 22,				
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	2542.73	2,592.73		
	Total Fadaval Diabusas	sammating and his constitution of the same statement of the same than the same statement of the same same to t	tamanan tamanikan sairi kitaran termatan militera Kitaran kit sebagai tama Takindan ki India		
32.	Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)				
	from Line 31)	2 547 73	7.547.73		
			Les services de la constant de la co		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

TIII	. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) (from Line 11(d), page 3)	2500.00	25000
34.	Total Contribution Refunds (from Line 28(d))	4 00,00	60.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	2500.00	2500.00
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	42.73	42.73
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	2,542,73	254273

SCHEDULE B (FEC Form 3X)

SCHEDULE B	(FEC Form 3X)		FOR LINE	NUMBER: PAGE / OF 1
ITEMIZED DIS	BURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
		Detailed Sunimary Page	21b	22 23 24 25 26 28a 28b 28c 29 30b
Any information conic	ed from such Reports and Staten	nents may not be sold or us		on for the purpose of soliciting contributions
				solicit contributions from such committee.
NAME OF COMM				- /
1 1	1 Jea / 000.	e of MN	Libert	y Furt
Full Name (Last.	On Yers League First, Middle Initial)	~ 07 /V/V	J, 00/ F	1
A. (,	1 R V			Date of Disbursement
<u> </u>	1Chor Dank	•		178 / 321 / 3374
Mailing Address	o Concordia	ave		110 27 6012
City S. C		State Zip Code	122-12	
	Paul MN	55/04-5	358	
Purpose of Disbut		inclusioners	aar	Amount of Each Disbursement this Period
Candidate Name	nk account Serup f	res / Cricars	Category/	112 7 2
			Type	42.73
Office Sought:	House Disbursen			
	Senate President	Primary General Other (specify) ▼		
State:	District:	Carol (openity)		
, ,	First, Middle Initial)			
В.				Date of Disbursement
Mailing Address				W M / D D / Y Y Y Y
waning Address	•			Landonia Residente de la Constantina del Constantina del Constantina de la Constanti
City		State Zip Code		
Purpose of Dishur	Purpose of Disbursement			
Candidate Name Category/ Type			Amount of Each Disbursement this Period	
			to some anternal and hour transferment and anternal	
				insensitive unitime Diametre in this of the safter antimetal describing
Office Sought:	House Disbursen	nent For: Primary General		
	President	Other (specify)		
State:	District:			
	First, Middle Initial)			
C.				Date of Disbursement
Mailing Address				N°N°, O'D', V'V'V'CY
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City	\$	State Zip Code		
Purpose of Disbu	rsement	· · · · · · · · · · · · · · · · · · ·		
			Amount of Each Disbursement this Period	
Candidate Name			Category/	And the second s
Office Sought:	House Disburser	nent For:	Туре	
	Senate	Primary General	į.	
	President	Other (specify)		
State:	District:			
OUDTOTAL - (D)	was an anti- Danie / who had			42 73
SORIGIAL OF DISD	ursements This Page (optional)		<u> </u>	and the state of t
TOTAL This Period	(last page this line number only)			42.73

SCHEDUL	ΕB	(FEC	Form	3X)
ITEMIZED	DISE	BURSE	MENT	'S

SCHEDULE B (FEC FUIII 3X)	Line concepts school-left)	FOR LINE N	IUMBER:	PAGE OF		
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only		24 🗀 25 22		
	Detailed Summary Page	21b 27	22 23 28a 28b	24 25 26 30b		
Any information copied from such Reports and Statem			n for the purpose of so	liciting contributions		
or for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full)	e and address of any political	committee to	SOIICIL GUITITOUTIONS TON	sich committee.		
	[]		$c \mid l$			
/ Taxpayers League	ot MIV L	16erty	rund	- <u>-</u>		
Full Name (Last, First, Middle Initial)		'	Date of Disbursemen	,		
			THE THE	/ X X Y X		
Mailing Address 6448 Main Street,	Suite 6		10 19	2012		
Mailing Address 6448 Main Street, City North Branch MA Purpose of Disbursement Political Contr Candidate Name Chip Cravaa	State Zip Code // 55056					
Purpose of Disbursement	1	att	Amount of Each Dish			
Candidate Name	ibution,		Amount of Each Disb	ursement this Period		
<u>Chip</u> Cravaa	cK	Category/ Type	Bar Armilian A imilian dia	,5,00 <u>.0</u> ,0		
Office Sought. House Disbursen	nent For: Primary General					
President	Other (specify)			•		
State: MN District: 4th	• • • •					
Full Name (Last, First, Middle Initial)			Date of Dishurses			
Mailing Address 2	ress		Date of Disbursemen	·		
Mailing Address P.O. Box 429			10 19	2012		
	state Zip Code			·		
Purpose of Disbursement	56201					
Political Contr	ibution 1	911	Amount of Each Disbursement			
Candidate Name		Category/	2000 00			
Office Sought: House Disburser	neot For	Туре	hastender that our			
	Primary General					
State: M District: 7+h	Other (specify) ▼		•			
Full Name (Last, First, Middle Initial)				· · · · · · · · · · · · · · · · · · ·		
C.			Date of Disbursemen	***************************************		
Mailing Address			M M / D D			
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Purpose of Disbursement			Amount of Facts Dist			
Candidate Name		Category/	Amount of Each Disb	ursement this Period		
Office Sought: House Disburserr	nent For:	Туре		This is the second		
<u> </u>	Primary General					
State: District:	Other (specify) ▼					
Ciais. District.						
SUBTOTAL of Disbursements This Page (optional)		······		2,500.00		
TOTAL This Period (last page this line number only).				2,500.00		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE OF / Use separate schedule(s) (check only one) for each category o! the **X** 11a 11b 11c 12 Detailed Summary Page 13 16 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) Full Name (Last, Date of Receipt Mailing Address Drive City Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Occupation Name of Employer - employed Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Date of Receipt B. Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) w Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) SUBTOTAL of Receipts This Page (optional).....

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

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DATE PREPARED

(3/2005)

PREPARER