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**FEC
 FORM 3X**

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

Office Use Only

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

ADDRESS (number and street) **▼** **C00114314 060906 N 215
 RON LAWRENCE
 NATIONAL ASSOCIATION OF LETTER
 CARRIERS OF UNITED STATES OF
 11581 ILEX ST NW
 COON RAPIDS MN 55448**

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ **C00114314** CITY ▲ STATE ▲ ZIP CODE ▲

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

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:	(b) Monthly Report Due On:	Feb 20 (M2)	May 20 (M5)	Aug 20 (M8)	Nov 20 (M11) <small>(Non-Election Year Only)</small>
<input type="checkbox"/> April 15 Quarterly Report (Q1)	Mar 20 (M3)		Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12) <small>(Non-Election Year Only)</small>
<input checked="" type="checkbox"/> October 15 Quarterly Report (Q3)	Apr 20 (M4)		Jul 20 (M7)	Oct 20 (M10)	Jan 31 (YE)
<input type="checkbox"/> January 31 Year-End Report (YE)					
<input type="checkbox"/> July 31 Mid-Year Report (Non-election Year Only) (MY)					
<input type="checkbox"/> Termination Report (TER)					

(c) 12-Day PRE-Election Report for the:	Primary (12P)	General (12G)	Runoff (12R)
Report for the: Convention (12C) Special (12S)			
Election on _____ in the State of _____			

(d) 30-Day POST-Election Report for the:	General (30G)	Runoff (30R)	Special (30S)
Report for the: _____			
Election on _____ in the State of _____			

5. Covering Period **07 01 2017** through **09 30 2017**

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 **Ron Lawrence**

Signature of Treasurer *Ron Lawrence* Date **10 02 2017**

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

Office Use Only												FEC FORM 3X
												Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

PALGNALC

Report Covering the Period: From:

07 / 01 / 2017

To:

09 / 30 / 2017

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2017		925219
(b) Cash on Hand at Beginning of Reporting Period.....	1752036	
(c) Total Receipts (from Line 19).....	7400	1009617
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	1759436	1934836
7. Total Disbursements (from Line 31).....	110000	285000
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	1649436	1649436
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	— 0 —	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	— 0 —	

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

NOT FOR FILING

**DETAILED SUMMARY PAGE
of Receipts**

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

PALGNALC

Report Covering the Period: From:

07 / **01** / **2017**

To:

09 / **30** / **2017**

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).....		
(ii) Unitemized.....	7400	10,096.17
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	7400	10,096.17
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)..... ▶	7400	10,096.17
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))..... ▶	7400	10,096.17
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	7400	10,096.17

NON-FEDERAL ACCOUNT

**DETAILED SUMMARY PAGE
of Disbursements**

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Page 4

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		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	- 0 -	- 0 -
22. Transfers to Affiliated/Other Party Committees	- 0 -	- 0 -
23. Contributions to Federal Candidates/Committees and Other Political Committees	- 0 -	100000
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations)	1,100,000	1,854,000
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(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)) ..	1,100,000	2,854,000
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	1,100,000	2,854,000

NOT FOR FILING

**DETAILED SUMMARY PAGE
of Disbursements**

FEC Form 3X (Rev. 05/2016)

Page 5

III. 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)	7400	1009617
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)		
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))		
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)		

NON-FEDERAL CAMPAIGN DISBURSEMENTS

**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"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 2 <input type="checkbox"/> 6

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)
PAL9NALC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

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

NON-FEDERAL CAMPAIGN

**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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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)

PALGNALL

Full Name (Last, First, Middle Initial)

A. **Abdi Warsame Vol. Comm.**

Date of Disbursement

07 03 2017

Mailing Address

620-20TH Ave So

City

MPLS

State

Zip Code

MN

44354-2875

FEC Identification Number

C

Purpose of Disbursement

Fund Raiser

Candidate Name

Abdi Warsame

Category/
Type

Amount of Each Disbursement this Period

600.00

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: **MN**

District:

MPLS City Council

Memo Item

Full Name (Last, First, Middle Initial)

B. **MATT Little For MN Senate**

Date of Disbursement

09 13 2017

Mailing Address

P.O. Box 650

City

Lakeville

State

Zip Code

MN

55044-2876

FEC Identification Number

C

Purpose of Disbursement

Fund Raiser

Candidate Name

MATT Little

Category/
Type

Amount of Each Disbursement this Period

500.00

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: **MN**

District: **5B**

Memo Item

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M / D D / Y Y Y Y

Mailing Address

City

State

Zip Code

FEC Identification Number

C

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:

Memo Item

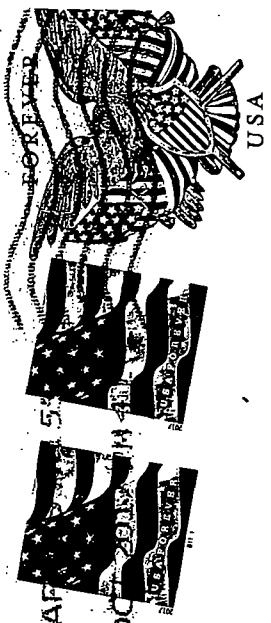
SUBTOTAL of Disbursements This Page (optional).....▶

1,100.00

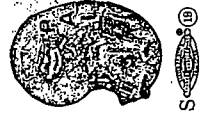
TOTAL This Period (last page this line number only).....▶

1,100.00

UNIVERSITY MICROFILMS INTERNATIONAL



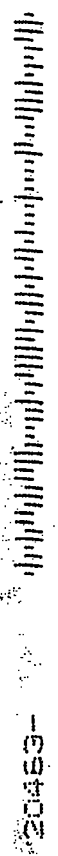
9
POLITICAL ACTION LEAGUE
Ron Lawrence, Treasurer
11581 Ilex Street N.W.
Coon Rapids, MN 55448-2316



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FEC MAIL CENTER
2017 OCT 10 AM 9:03

FEDERAL ELECTON COMMISSION
999 E STREET NW
WASHINGTON, DC
20463

ATTN: Nicole Miller



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

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<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<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 *MP*
 (3/2015)

10/10/2017
 DATE PREPARED

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