

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Eighth Congressional District Republican Party of Minnesota

Report Covering the Period: From:

MM	DD	YYYY
02	01	2009

 To:

MM	DD	YYYY
02	28	2009

**COLUMN A
This Period**

**COLUMN B
Calendar Year-to-Date**

6. (a) Cash on Hand January 1,	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>YYYY</td></tr><tr><td>2008</td></tr></table>	YYYY	2008	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>YYYY</td></tr><tr><td>4,956,91</td></tr></table>	YYYY	4,956,91
YYYY						
2008						
YYYY						
4,956,91						
(b) Cash on Hand at Beginning of Reporting Period.....	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>YYYY</td></tr><tr><td>6,768,24</td></tr></table>	YYYY	6,768,24			
YYYY						
6,768,24						
(c) Total Receipts (from Line 19).....	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>YYYY</td></tr><tr><td>9,990,8</td></tr></table>	YYYY	9,990,8	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>YYYY</td></tr><tr><td>3,100,08</td></tr></table>	YYYY	3,100,08
YYYY						
9,990,8						
YYYY						
3,100,08						
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>YYYY</td></tr><tr><td>7,767,32</td></tr></table>	YYYY	7,767,32	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>YYYY</td></tr><tr><td>8,056,99</td></tr></table>	YYYY	8,056,99
YYYY						
7,767,32						
YYYY						
8,056,99						
7. Total Disbursements (from Line 31).....	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>YYYY</td></tr><tr><td>1,735,54</td></tr></table>	YYYY	1,735,54	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>YYYY</td></tr><tr><td>2,025,21</td></tr></table>	YYYY	2,025,21
YYYY						
1,735,54						
YYYY						
2,025,21						
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>YYYY</td></tr><tr><td>6,031,78</td></tr></table>	YYYY	6,031,78	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>YYYY</td></tr><tr><td>6,031,78</td></tr></table>	YYYY	6,031,78
YYYY						
6,031,78						
YYYY						
6,031,78						
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>YYYY</td></tr><tr><td> </td></tr></table>	YYYY				
YYYY						
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>YYYY</td></tr><tr><td> </td></tr></table>	YYYY				
YYYY						

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

Write or Type Committee Name
Eighth Congressional District Republican Party of Minnesota

Report Covering the Period: From:

MM	DD	YY
02	01	2009

 To:

MM	DD	YY
02	28	2009

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).....

5 3 4 0 8

6 3 0 0 8

(ii) Unitemized.....

4 6 5 0 0

2 4 7 0 0 0

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

9 9 9 0 8

3 1 0 0 0 8

(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).....▶

9 9 9 0 8

3 1 0 0 0 8

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)).....▶

9 9 9 0 8

3 1 0 0 0 8

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

9 9 9 0 8

3 1 0 0 0 8

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DETAILED SUMMARY PAGE of Disbursements

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 7 3 5 5 4	2 0 2 5 2 1
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1 7 3 5 5 4	2 0 2 5 2 1
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 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 7 3 5 5 4	2 0 2 5 2 1
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1 7 3 5 5 4	2 0 2 5 2 1

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DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	9 9 9 0 8	3 1 0 0 0 8
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9 9 9 0 8	3 1 0 0 0 8
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1 7 3 5 5 4	2 0 2 5 2 1
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1 7 3 5 5 4	2 0 2 5 2 1

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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 1

(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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<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)
Eighth Congressional District Republican Party of Minnesota

Full Name (Last, First, Middle Initial) A. Britton, Ronald L.		Date of Receipt MM/DD/YYYY 02 / 02 / 2009
Mailing Address 303 Douglas Avenue		Amount of Each Receipt this Period 9 4 1 9
City Eveleth	State Zip Code MN 55734	
FEC ID number of contributing federal political committee. C		Contribution In-Kind - Phone book ads (Dex)
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1 9 0 1 9	

Full Name (Last, First, Middle Initial) B. Knutson for 5A		Date of Receipt MM/DD/YYYY 02 / 11 / 2009
Mailing Address 303 Douglas Avenue		Amount of Each Receipt this Period 4 3 9 8 9
City Eveleth	State Zip Code MN 55734	
FEC ID number of contributing federal political committee. C		Reimbursement for mailing
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4 3 9 8 9	

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

SUBTOTAL of Receipts This Page (optional).....▶	5 3 4 0 8
TOTAL This Period (last page this line number only).....▶	5 3 4 0 8

23030030530

**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 2				
	<input checked="" type="checkbox"/> 21b	<input 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"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Eighth Congressional District Republican Party of Minnesota

Full Name (Last, First, Middle Initial) Ronald Britton		Date of Disbursement MM / DD / YYYY 02 / 02 / 2009	
Mailing Address 303 Douglas Ave			
City Eveleth	State MN	Zip Code 55734	
Purpose of Disbursement In-kind contribution phone book ads		Amount of Each Disbursement this Period 9 4 1 9	
Candidate Name		Category/Type 0 0 1	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) USPS		Date of Disbursement MM / DD / YYYY 02 / 02 / 2009	
Mailing Address 231 1st ST S			
City Virginia	State MN	Zip Code 55792	
Purpose of Disbursement Annual permit renewal		Amount of Each Disbursement this Period 1 8 0 0 0	
Candidate Name		Category/Type 0 0 1	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) Range Office Supply		Date of Disbursement MM / DD / YYYY 02 / 03 / 2009	
Mailing Address 219 Chestnut St			
City Virginia	State MN	Zip Code 55792	
Purpose of Disbursement Paper and envelopes for fundraising		Amount of Each Disbursement this Period 4 4 9 9 5	
Candidate Name		Category/Type 0 0 3	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	7 2 4 1 4
TOTAL This Period (last page this line number only).....▶	

135050050531

**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 2 OF 2				
	<input checked="" type="checkbox"/> 21b	<input 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"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Eighth Congressional District Republican Party of Minnesota

Full Name (Last, First, Middle Initial) A. Range Office Supply		Date of Disbursement MM / DD / YYYY 02 / 06 / 2009	
Mailing Address 319 Chestnut St			
City Virginia	State MN	Zip Code 55792	
Purpose of Disbursement Laser and inkjet cartridges		Amount of Each Disbursement this Period 3 6 2 0 6	
Candidate Name		Category/Type 0 0 1	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement MM / DD / YYYY 02 / 11 / 2009	
Mailing Address 231 1st ST S			
City Virginia	State MN	Zip Code 55792	
Purpose of Disbursement Std mail mailed for local candidate (reimbursed before mailing)		Amount of Each Disbursement this Period 4 3 9 8 9	
Candidate Name		Category/Type 0 0 1	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY	
Mailing Address			
City	State	Zip Code	
Purpose of Disbursement		Amount of Each Disbursement this Period	
Candidate Name		Category/Type	
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).....▶	8 0 1 9 5
TOTAL This Period (last page this line number only).....▶	1 5 2 6 0 9

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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
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<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input checked="" type="checkbox"/> USPS Express Mail	Postmarked <i>3/10/09</i>
<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

Jms

PREPARER
(3/2005)

3/11/09

DATE PREPARED

25030050533