

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

McCollum for Congress

ADDRESS (number and street)

P.O. Box 14131

Check if different  
than previously  
reported. (ACC)

St. Paul

MN

55114

2. FEC IDENTIFICATION NUMBER ▼

C

C00354688

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

MN

04

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)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the  
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y

01 / 01 / 2014

through

M M / D D / Y Y Y Y

03 / 31 / 2014

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

Mary Pat Lee

Signature of Treasurer

Mary Pat Lee

[Electronically Filed]

Date

M M / D D / Y Y Y Y

04 / 12 / 2014

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 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 76

Write or Type Committee Name

**McCollum for Congress**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	144652.00	499304.62
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	144652.00	499304.62
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	54661.67	350415.70
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	593.35
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	54661.67	349822.35
8. Cash on Hand at Close of Reporting Period (from Line 27).....	214079.21	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

**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 3 (Revised 12/2003)

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Write or Type Committee Name

**McCollum for Congress**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	4

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date
**11. CONTRIBUTIONS (other than loans) FROM:**

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

49815.00

170429.62

(ii) Unitemized.....

4087.00

38625.00

(iii) TOTAL of contributions from individuals ▶

53902.00

209054.62

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

90750.00

290250.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

144652.00

499304.62

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0.00

0.00

**13. LOANS:**

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....**

0.00

593.35

**15. OTHER RECEIPTS (Dividends, Interest, etc.) .....**

0.00

5.09

**16. TOTAL RECEIPTS** (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

144652.00

499903.06

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 76

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	54661.67	350415.70
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	16255.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	54661.67	366670.70

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	124088.88
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	144652.00
25. SUBTOTAL (add Line 23 and Line 24).....	268740.88
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	54661.67
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	214079.21

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

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

FOR LINE NUMBER:

PAGE 5 OF 76

(check only one)

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**John P. Abraham PhD**

Mailing Address 4232 29th Ave

City

Minneapolis

State

MN

Zip Code

55406

FEC ID number of contributing  
federal political committee.

C

Name of Employer

University of St. Thomas

Occupation

Professor

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		18		2014

Transaction ID : C9437749

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**John Apitz**

Mailing Address 1831 Hunter Ln

City

Mendota Heights

State

MN

Zip Code

55118-4110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Messerli &amp; Kramer, P.A.

Occupation

Government Affairs

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2014

Transaction ID : C9395315

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Ford Watson Bell**

Mailing Address 7412 Brickyard Road

City

Potomac

State

MD

Zip Code

20854

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Association of Museums

Occupation

Non-profit executive

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		21		2014

Transaction ID : C9226760

Amount of Each Receipt this Period

500.00

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

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

1000.00

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

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

FOR LINE NUMBER:

PAGE 6 OF 76

(check only one)

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kjell Bergh**

Mailing Address 4950 Neal Ave N

City Stillwater State MN Zip Code 55082-1071

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

Name of Employer Borton Volvo Occupation President

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt

M M	D D	Y Y Y Y
02	26	2014

Transaction ID : C9395332

Amount of Each Receipt this Period

100.00
--------

**B.** Full Name (Last, First, Middle Initial)  
**Kjell Bergh**

Mailing Address 4950 Neal Ave N

City Stillwater State MN Zip Code 55082-1071

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

Name of Employer Borton Volvo Occupation President

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt

M M	D D	Y Y Y Y
02	26	2014

Transaction ID : C9395333

Amount of Each Receipt this Period

400.00
--------

**C.** Full Name (Last, First, Middle Initial)  
**Bonnie I. Beverly**

Mailing Address 1548 Fairmount Ave

City Saint Paul State MN Zip Code 55105-2316

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

Name of Employer Regions Hospital Occupation Registered Nurse

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date 255.00

Date of Receipt

M M	D D	Y Y Y Y
03	20	2014

Transaction ID : C9441448

Amount of Each Receipt this Period

65.00
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**SUBTOTAL** of Receipts This Page (optional).....

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

565.00
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# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

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

Mailing Address **7613 Range Rd**

City	State	Zip Code
Alexandria	VA	22306-2425

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**Self-employed**

Occupation  
**Attorney**

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

**1500.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		21		2014

Transaction ID : **C9226766**

Amount of Each Receipt this Period

**1000.00**

B. Full Name (Last, First, Middle Initial)  
**Cherokee Nation**

Mailing Address **P.O. Box 948**

City	State	Zip Code
Tahlequah	OK	74464

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

**5200.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		19		2014

Transaction ID : **C9380526**

Amount of Each Receipt this Period

**2100.00**

C. Full Name (Last, First, Middle Initial)  
**Cherokee Nation**

Mailing Address **P.O. Box 948**

City	State	Zip Code
Tahlequah	OK	74464

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

**5200.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		19		2014

Transaction ID : **C9380527**

Amount of Each Receipt this Period

**2600.00**

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

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

**5700.00**

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**John Cowles III**

Mailing Address 475 Grand HI

City

Saint Paul

State

MN

Zip Code

55102-2612

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Unity Avenue Associates

Occupation

President

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		20		2014

Transaction ID : C9441450

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**J. Michael Dady**

Mailing Address 1415 Summit Ave

City

Saint Paul

State

MN

Zip Code

55105-2240

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Dady and Garner

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		18		2014

Transaction ID : C9438743

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**John S. Dahler**

Mailing Address 1602 Mississippi River Blvd S

City

Saint Paul

State

MN

Zip Code

55116-1825

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		18		2014

Transaction ID : C9437732

Amount of Each Receipt this Period

150.00

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

700.00

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



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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**Yang Dao**

Mailing Address 5808 80th Ave N

City

Brooklyn Park

State

MN

Zip Code

55443-2105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

University of MN

Occupation

Retired Professor

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		26		2014

Transaction ID : C9395346

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Kelly Doran**

Mailing Address 7803 Glenroy Road, Suite 200

City

Bloomington

State

MN

Zip Code

55439

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Doran Companies

Occupation

Chief Manager

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		18		2014

Transaction ID : C9438742

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**Matthew Entenza**

Mailing Address 672 Summit Ave., #302

City

St. Paul

State

MN

Zip Code

55105-3467

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		20		2014

Transaction ID : C9441416

Amount of Each Receipt this Period

250.00

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

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

2000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 76

(check only one)

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**Doug Franchot**Mailing Address 2040 West Wayzata Blvd  
Ste 317

City	State	Zip Code
Long Lake	MN	55356

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Franchot and Associates, Inc.Occupation  
Consultant

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		20		2014

Transaction ID : C9158474

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Jane C. Freeman**Mailing Address 3701 Bryant Ave S  
Apt 802

City	State	Zip Code
Minneapolis	MN	55409-1091

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		26		2014

Transaction ID : C9395378

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Susan L. Gehrz**

Mailing Address 2285 Folwell Ave

City	State	Zip Code
Falcon Heights	MN	55108-1307

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Friends of the Ramsey County LibraryOccupation  
Executive Director

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		20		2014

Transaction ID : C9380985

Amount of Each Receipt this Period

125.00

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

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

1375.00

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

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

FOR LINE NUMBER:

PAGE 11 OF 76

(check only one)

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**Peter L. Gove**

Mailing Address 14 Pearson Place

City

St. Paul

State

MN

Zip Code

55127

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Transaction ID : C9461748

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**William Gray**

Mailing Address 488 Holly Ave

City

Saint Paul

State

MN

Zip Code

55102-2206

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Information Requested

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		18		2014

Transaction ID : C9437739

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**Roger E. Green**

Mailing Address 1254 Donegal Drive

City

Woodbury

State

MN

Zip Code

55125

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		18		2014

Transaction ID : C9437730

Amount of Each Receipt this Period

200.00

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

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

550.00

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

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

FOR LINE NUMBER:

PAGE 12 OF 76

(check only one)

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**Kathleen Haug**

Mailing Address 2021 W. 49th St.

City

Minneapolis

State

MN

Zip Code

55419-5227

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		20		2014

Transaction ID : C9158480

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**Judith Hoffman**

Mailing Address 2223 Viking Dr NW

City

Rochester

State

MN

Zip Code

55901-3534

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Homemaker

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		20		2014

Transaction ID : C9380992

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**Alvin John Huss**Mailing Address 59 4th Street W  
Apt 21A

City

Saint Paul

State

MN

Zip Code

55102

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2014

Transaction ID : C9395380

Amount of Each Receipt this Period

2600.00

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

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

5300.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Ruth S. Huss</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>26</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	02		26		2014
M M M	/	D D D	/	Y Y Y Y Y									
02		26		2014									
Mailing Address 59 4th Street W Apt 21A		<b>Transaction ID : C9395381</b>											
City Saint Paul	State MN	Zip Code 55102											
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00											
Name of Employer Retired	Occupation Retired												
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00												
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Samuel L. Kaplan</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>26</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	02		26		2014
M M M	/	D D D	/	Y Y Y Y Y									
02		26		2014									
Mailing Address 510 River St		<b>Transaction ID : C9395305</b>											
City Minneapolis	State MN	Zip Code 55401-2542											
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00											
Name of Employer Kaplan, Strangis and Kaplan, P.A.	Occupation Attorney												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00												
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Sylvia Kaplan</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>26</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	02		26		2014
M M M	/	D D D	/	Y Y Y Y Y									
02		26		2014									
Mailing Address 510 River St		<b>Transaction ID : C9395306</b>											
City Minneapolis	State MN	Zip Code 55401-2542											
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00											
Name of Employer Self-employed	Occupation Restaurant Owner												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00												
<b>SUBTOTAL</b> of Receipts This Page (optional).....		3100.00											
<b>TOTAL</b> This Period (last page this line number only).....													

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

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

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(check only one)

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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**Edward Martell**

Mailing Address 2149 Goodrich Ave

City

Saint Paul

State

MN

Zip Code

55105-1021

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

355.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 28 / 2014

Transaction ID : C9400317

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**Lawrence J. Massa**

Mailing Address MN Hospital Association

2550 University Ave W Ste 350-S

City

Saint Paul

State

MN

Zip Code

55114

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Minnesota Hospital Association

Occupation

Executive

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 26 / 2014

Transaction ID : C9395373

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**Harry D. Melander**

Mailing Address 716 Park Ave

City

Mahtomedi

State

MN

Zip Code

55115-1650

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Minnesota Building and Construction Tr

Occupation

President

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

950.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 26 / 2014

Transaction ID : C9395322

Amount of Each Receipt this Period

250.00

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

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

400.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress****A.** Full Name (Last, First, Middle Initial)  
**Mille Lacs Band of Ojibwe**

Mailing Address 43408 Oodena Dr

City	State	Zip Code
Onamia	MN	56359-2236

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		25		2014

**Transaction ID : C9394282**

Amount of Each Receipt this Period

2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Morongo Band of Mission Indians**

Mailing Address PO Box 366

City	State	Zip Code
Cabazon	CA	92230-0366

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		12		2014

**Transaction ID : C9436553**

Amount of Each Receipt this Period

2000.00

**C.** Full Name (Last, First, Middle Initial)  
**Richard Newmark**

Mailing Address 810 Woodduck Dr

City	State	Zip Code
Woodbury	MN	55125-5101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		27		2014

**Transaction ID : C9454107**

Amount of Each Receipt this Period

500.00

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

5000.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

A. Full Name (Last, First, Middle Initial)  
**Thomas Osthoff**

Mailing Address 766 Maryland Ave W

City	State	Zip Code
Saint Paul	MN	55117-4026

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Retired

Occupation  
 Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		21		2014

Transaction ID : C9158316

Amount of Each Receipt this Period

50.00

B. Full Name (Last, First, Middle Initial)  
**Thomas Osthoff**

Mailing Address 766 Maryland Ave W

City	State	Zip Code
Saint Paul	MN	55117-4026

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Retired

Occupation  
 Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		21		2014

Transaction ID : C9381348

Amount of Each Receipt this Period

50.00

C. Full Name (Last, First, Middle Initial)  
**Thomas Osthoff**

Mailing Address 766 Maryland Ave W

City	State	Zip Code
Saint Paul	MN	55117-4026

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Retired

Occupation  
 Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2014

Transaction ID : C9442013

Amount of Each Receipt this Period

50.00

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

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

150.00



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Terry Peel**

Mailing Address 1317 F St NW  
Ste 200

City Washington State DC Zip Code 20004-1149

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

Name of Employer Edington, Peel & Associates Inc. Occupation Government Affairs

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		21		2014

Transaction ID : C9226761

Amount of Each Receipt this Period

500.00

**B.** Full Name (Last, First, Middle Initial)  
**Daniel Pennie**

Mailing Address 335 Salem Church Rd

City Sunfish Lake State MN Zip Code 55118-4720

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

Name of Employer Bluestem Holding L.P. Occupation CEO

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		18		2014

Transaction ID : C9438749

Amount of Each Receipt this Period

500.00

**C.** Full Name (Last, First, Middle Initial)  
**Patrick Plonski**

Mailing Address 287 Wilder St N

City Saint Paul State MN Zip Code 55104-5127

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

Name of Employer Books for Africa Occupation Executive Director

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		26		2014

Transaction ID : C9395316

Amount of Each Receipt this Period

250.00

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

1250.00
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# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Prairie Island Indian Community**

Mailing Address 5636 Sturgeon Lake Rd

City State Zip Code  
 Welch MN 55089-9635

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 02 25 2014

Transaction ID : C9394283

Amount of Each Receipt this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Brian F. Rice**

Mailing Address 112 Ardmore Dr

City State Zip Code  
 Golden Valley MN 55422-5210

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Rice, Michels & Walther

Attorney

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M / D D / Y Y Y Y  
 02 26 2014

Transaction ID : C9395308

Amount of Each Receipt this Period

250.00

**C.** Full Name (Last, First, Middle Initial)  
**Lawrence J. Romans**

Mailing Address 5422 Seminary Rd

City State Zip Code  
 Alexandria VA 22311-1299

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Lawrence J. Romans & Associates

Government Relations

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
 01 21 2014

Transaction ID : C9226759

Amount of Each Receipt this Period

500.00

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

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

1750.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**Bonnie R. Russ**

Mailing Address 788 Sandhurst Dr W

City

Roseville

State

MN

Zip Code

55113

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MUCROccupation  
CPA

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2014

Transaction ID : C9461747

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**Judith Screaton**

Mailing Address 2474 Oakgreen Av N

City

Stillwater

State

MN

Zip Code

55082-1525

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2014

Transaction ID : C9462034

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**Shakopee Mdewakanton Sioux Council**

Mailing Address 2330 Sioux Trl NW

City

Prior Lake

State

MN

Zip Code

55372-9077

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2014

Transaction ID : C9490919

Amount of Each Receipt this Period

100.00

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

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

300.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**Shakopee Mdewakanton Sioux Council**

Mailing Address 2330 Sioux Trl NW

City

Prior Lake

State

MN

Zip Code

55372-9077

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Transaction ID : C9489320

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**Joyce R. Sharer**

Mailing Address 120 Demont Ave E, Apt 214

City

Little Canada

State

MN

Zip Code

55117-1532

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For: 2014

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		20		2014

Transaction ID : C9380991

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**Shoshone-Bannock Tribes**

Mailing Address P.O. Box 306

City

Fort Hall

State

ID

Zip Code

83203-0306

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		21		2014

Transaction ID : C9226767

Amount of Each Receipt this Period

1000.00

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

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

1200.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**Michael R. Sieben**

Mailing Address 10600 Water Lily Ln

City

Woodbury

State

MN

Zip Code

55129

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sieben Polk, P.A.

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M / D D / Y Y Y Y  
02 20 2014

Transaction ID : C9380986

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**John Siekmeier**

Mailing Address 1150 Lawn Ave

City

Mahtomedi

State

MN

Zip Code

55115-1528

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Minnesota Department of Transportation

Occupation

Engineer

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M / D D / Y Y Y Y  
02 26 2014

Transaction ID : C9395318

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Rebecca Siekmeier**

Mailing Address 1150 Lawn Ave

City

Mahtomedi

State

MN

Zip Code

55115-1528

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Best Buy

Occupation

Marketing Operations and Advertising

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M / D D / Y Y Y Y  
02 26 2014

Transaction ID : C9395319

Amount of Each Receipt this Period

250.00

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

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

1000.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

A. Full Name (Last, First, Middle Initial)  
**Andrew B. Singer**

Mailing Address 2103 Berkeley Ave.

City	State	Zip Code
Saint Paul	MN	55105

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Self-Employed

Occupation  
 Illustrator/cartoonist

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		18		2014

Transaction ID : C9437731

Amount of Each Receipt this Period

50.00

B. Full Name (Last, First, Middle Initial)  
**Kenneth W. Smith**

Mailing Address 2560 132nd Ln NW

City	State	Zip Code
Minneapolis	MN	55448-1204

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 District Energy

Occupation  
 CEO

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2014

Transaction ID : C9395320

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)  
**Tina Flint Smith**

Mailing Address 4720 W Lake Harriet Pkwy

City	State	Zip Code
Minneapolis	MN	55410-1923

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Mark Dayton

Occupation  
 Chief of Staff

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2014

Transaction ID : C9395328

Amount of Each Receipt this Period

250.00

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

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

550.00

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

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

FOR LINE NUMBER:

PAGE 23 OF 76

(check only one)

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

A. Full Name (Last, First, Middle Initial)  
**Clifford Steinhauser**

Mailing Address 5800 Jonquil Ln N

City	State	Zip Code
Plymouth	MN	55442

FEC ID number of contributing federal political committee.

C

Name of Employer  
**Merwin LTC Pharmacy**

Occupation  
**Owner**

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		03		2014

Transaction ID : C9403564

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)  
**Maria Tenuta**

Mailing Address 82 Woodland Circle

City	State	Zip Code
Edina	MH	55424

FEC ID number of contributing federal political committee.

C

Name of Employer  
**Self-Employed**

Occupation  
**Attorney**

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		05		2014

Transaction ID : C9406678

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)  
**Charles G. Terzian**

Mailing Address 3871 Lilac Ln

City	State	Zip Code
Woodbury	MN	55129-8779

FEC ID number of contributing federal political committee.

C

Name of Employer  
**Allina Hospitals and Clinics**

Occupation  
**Physician**

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		10		2014

Transaction ID : C9359661

Amount of Each Receipt this Period

250.00

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

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

1750.00

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

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

FOR LINE NUMBER:

PAGE 24 OF 76

(check only one)

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Susan Lynch Vento**  
 Mailing Address 553 Deer Ridge Lane

City State Zip Code  
 Maplewood MN 55119

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Church of the Assumption

Occupation  
 Director of Outreach

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 02 26 2014

Transaction ID : C9395314

Amount of Each Receipt this Period

250.00

**B.** Full Name (Last, First, Middle Initial)  
**David W. Walter**  
 Mailing Address 2726 Kenilworth Pl

City State Zip Code  
 Minneapolis MN 55405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Heartland Realty Investors

Occupation  
 Real Estate

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 03 18 2014

Transaction ID : C9437740

Amount of Each Receipt this Period

2600.00

**C.** Full Name (Last, First, Middle Initial)  
**David W. Walter**  
 Mailing Address 2726 Kenilworth Pl

City State Zip Code  
 Minneapolis MN 55405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Heartland Realty Investors

Occupation  
 Real Estate

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 03 18 2014

Transaction ID : C9437741

Amount of Each Receipt this Period

2400.00

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

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

5250.00



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

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

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**H. William Walter**  
Mailing Address 5229 Morgan Ave S

City State Zip Code  
Minneapolis MN 55419-1026

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Heartland Realty Investors, Inc.

Occupation  
President

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M / D D / Y Y Y Y  
01 20 2014

Transaction ID : C9158481

Amount of Each Receipt this Period

100.00

**B.** Full Name (Last, First, Middle Initial)  
**H. William Walter**  
Mailing Address 5229 Morgan Ave S

City State Zip Code  
Minneapolis MN 55419-1026

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Heartland Realty Investors, Inc.

Occupation  
President

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M / D D / Y Y Y Y  
01 20 2014

Transaction ID : C9158482

Amount of Each Receipt this Period

2600.00

**C.** Full Name (Last, First, Middle Initial)  
**Julie S. Walter**  
Mailing Address 4514 Bruce Ave

City State Zip Code  
Edina MN 55424-1121

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
01 20 2014

Transaction ID : C9158484

Amount of Each Receipt this Period

100.00

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

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

2800.00

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

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

FOR LINE NUMBER:

PAGE 26 OF 76

(check only one)

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**Julie S. Walter**

Mailing Address 4514 Bruce Ave

City

Edina

State

MN

Zip Code

55424-1121

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		20		2014

Transaction ID : C9158483

Amount of Each Receipt this Period

2400.00

Full Name (Last, First, Middle Initial)

**Kara Walter**

Mailing Address 2726 Kenilworth Pl

City

Minneapolis

State

MN

Zip Code

55405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

UnitedHealth Group

Occupation

Chief of Staff

Receipt For: 2014

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		18		2014

Transaction ID : C9437743

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**Matthew Walter**

Mailing Address 4514 Bruce Ave S

City

Edina

State

MN

Zip Code

55424

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Heartland Realty Investors

Occupation

Realtor

Receipt For: 2014

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		20		2014

Transaction ID : C9158485

Amount of Each Receipt this Period

100.00

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

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

5000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 27 OF 76

(check only one)

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**Matthew Walter**

Mailing Address 4514 Bruce Ave S

City

Edina

State

MN

Zip Code

55424

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Heartland Realty Investors

Occupation

Realtor

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		20		2014

Transaction ID : C9158486

Amount of Each Receipt this Period

2400.00

Full Name (Last, First, Middle Initial)

**Mary Joan Warren**

Mailing Address 8044 Greenwood Dr

City

Mounds View

State

MN

Zip Code

55112-5910

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2014

Transaction ID : C9395312

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**David K. Wickstrom**

Mailing Address 533 Otis Ave

City

Saint Paul

State

MN

Zip Code

55104-4931

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		18		2014

Transaction ID : C9437735

Amount of Each Receipt this Period

100.00

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

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

2625.00

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

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

FOR LINE NUMBER:

PAGE 28 OF 76

(check only one)

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**Dick Zehring**

Mailing Address 212 Starrwood

City

Hudson

State

WI

Zip Code

54016-7174

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MSP Commercial CompaniesOccupation  
President, Commerical Real Estate Brok

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		20		2014

Transaction ID : C9380990

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

500.00

49815.00

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:

PAGE 29 OF 76

(check only one)

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**Air Line Pilots Association PAC**

Mailing Address 1625 Massachusetts Avenue, N.W.

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

C C00035451

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

6000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2014

Transaction ID : C9484125

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. American Academy of Neurology BRAIN PAC**

Mailing Address 1501 M St. NW

Seventh Floor

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

C C00435933

Name of Employer

Occupation

Receipt For: 2014

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2014

Transaction ID : C9484442

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. AMERICAN ACADEMY OF PEDIATRIC DENTISTRY POLITICAL**

Mailing Address 211 E Chicago Ave

Suite 700

City

Chicago

State

IL

Zip Code

60611

FEC ID number of contributing  
federal political committee.

C C00365965

Name of Employer

Occupation

Receipt For: 2014

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2014

Transaction ID : C9394296

Amount of Each Receipt this Period

1000.00

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

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

3000.00

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

A. Full Name (Last, First, Middle Initial)  
**American Association for Justice PAC**

Mailing Address 777 6th Street, NW, Suite 200

City State Zip Code  
 Washington DC 20001

FEC ID number of contributing  
federal political committee.

**C** C00024521

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 01 21 2014

Transaction ID : C9226768

Amount of Each Receipt this Period

2500.00

B. Full Name (Last, First, Middle Initial)  
**American Crystal Sugar Co PAC**

Mailing Address 101 North 3rd Street

City State Zip Code  
 Moorhead MN 56560

FEC ID number of contributing  
federal political committee.

**C** C00110338

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

10000.00

Date of Receipt

M M / D D / Y Y Y Y  
 03 04 2014

Transaction ID : C9405063

Amount of Each Receipt this Period

5000.00

C. Full Name (Last, First, Middle Initial)  
**American Fed of Govt Employees PAC**

Mailing Address 80 F Street, NW

City State Zip Code  
 Washington DC 20001

FEC ID number of contributing  
federal political committee.

**C** C00009936

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 02 25 2014

Transaction ID : C9394284

Amount of Each Receipt this Period

500.00

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

8000.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

A. Full Name (Last, First, Middle Initial)  
**American Fed. of Teachers COPE**

Mailing Address 555 New Jersey Ave. NW

City	State	Zip Code
Washington	DC	20001

FEC ID number of contributing  
federal political committee.**C** C00028860

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		27		2014

**Transaction ID : C9454091**

Amount of Each Receipt this Period

5000.00

B. Full Name (Last, First, Middle Initial)  
**American Hospital Association PAC**

Mailing Address 325 Seventh St NW

City	State	Zip Code
Washington	DC	20004

FEC ID number of contributing  
federal political committee.**C** C00106146

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2014

**Transaction ID : C9394305**

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)  
**American Occupational Therapy Assn PAC**

Mailing Address 4720 MONTGOMERY LANE, SUITE 200

City	State	Zip Code
BETHESDA	MD	20814

FEC ID number of contributing  
federal political committee.**C** C00089086

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		04		2014

**Transaction ID : C9405066**

Amount of Each Receipt this Period

1000.00

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

7000.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 32 OF 76

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress****A.** Full Name (Last, First, Middle Initial)  
**American Society of Anesthesiologists PAC**

Mailing Address 520 N. Northwest Hwy.

City	State	Zip Code
Park Ridge	IL	60068

FEC ID number of contributing  
federal political committee.**C** C00255752

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	25	/	2014

**Transaction ID : C9394306**

Amount of Each Receipt this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
**American Sugar Cane League**

Mailing Address P.O. Drawer 938

City	State	Zip Code
Thibodaux	LA	70302

FEC ID number of contributing  
federal political committee.**C** C00081414

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2014

**Transaction ID : C9484124**

Amount of Each Receipt this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
**American Sugarbeet Growers Assn PAC**

Mailing Address 1156 - 15th St. NW; #1101

City	State	Zip Code
Washington	DC	20005

FEC ID number of contributing  
federal political committee.**C** C00167684

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	05	/	2014

**Transaction ID : C9436542**

Amount of Each Receipt this Period

1000.00

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

3000.00

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



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

Use separate schedule(s)  
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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

Full Name (Last, First, Middle Initial)  
BAKERY, CONFECTIONERY, TOBACCO WORKERS AND GRAIN MILLERS INTERNATIONAL UNION PAC

A. Mailing Address 10401 CONNECTICUT AVENUE

City State Zip Code  
KENSINGTON MD 20895

FEC ID number of contributing  
federal political committee.

C C00127621

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
02 25 2014

Transaction ID : C9394295

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)  
**Best Buy Employee Political Forum**

Mailing Address 7601 Penn Ave South

City State Zip Code  
Richfield MN 55423

FEC ID number of contributing  
federal political committee.

C C00405076

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 31 2014

Transaction ID : C9484443

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)  
**BMO HARRIS BANK N.A. GOVERNMENT AFFAIRS FUND**

Mailing Address 111 W. MONROE  
P.O. BOX 755

City State Zip Code  
CHICAGO IL 60603

FEC ID number of contributing  
federal political committee.

C C00086256

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
02 25 2014

Transaction ID : C9394291

Amount of Each Receipt this Period

1000.00

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

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

2500.00

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

Full Name (Last, First, Middle Initial)  
**BROTHERHOOD OF LOCOMOTIVE ENGINEERS AND TRAINMEN PAC FUND**

Mailing Address 1370 ONTARIO ST

City State Zip Code  
 CLEVELAND OH 44113

FEC ID number of contributing  
federal political committee.

**C** C00099234

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4500.00

Date of Receipt

M M / D D / Y Y Y Y  
 03 31 2014

Transaction ID : C9485237

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)  
 CAP-PAC SEPARATE SEGREGATED FUND OF NATIONAL COMMUNITY ACTION FOUNDATION, INC.

Mailing Address 1 MASSACHUSETTS AVENUE, NW  
 SUITE 310

City State Zip Code  
 WASHINGTON DC 20001

FEC ID number of contributing  
federal political committee.

**C** C00163048

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

10000.00

Date of Receipt

M M / D D / Y Y Y Y  
 01 21 2014

Transaction ID : C9226762

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)  
 COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION (LETTER CARRIERS POLITICAL ACTION FUND)

Mailing Address 100 INDIANA AVE., N. W.

City State Zip Code  
 WASHINGTON DC 20001

FEC ID number of contributing  
federal political committee.

**C** C00023580

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
 03 20 2014

Transaction ID : C9441384

Amount of Each Receipt this Period

2500.00

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

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

5500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**CRAY INC EMPLOYEE POLITICAL ACTION COMMITTEE**Mailing Address 2001 JEFFERSON DAVIS HIGHWAY  
CRYSTAL PLAZA ONE SUITE 200

City	State	Zip Code
Arlington	VA	22202

FEC ID number of contributing  
federal political committee.**C** C00458547

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		04		2014

Transaction ID : C9405076

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**CUMMINS INC. POLITICAL ACTION COMMITTEE (CIPAC)**Mailing Address 601 PENNSYLVANIA AVENUE, NW  
NORTH BUILDING, SUITE 625

City	State	Zip Code
WASHINGTON	DC	20004

FEC ID number of contributing  
federal political committee.**C** C00377952

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		25		2014

Transaction ID : C9394307

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**DEALERS ELECTION ACTION COMMITTEE OF THE NATIONAL AUTOMOTIVE DEALERS ASSOCIATION**

Mailing Address 8400 WESTPARK DRIVE

City	State	Zip Code
MCLEAN	VA	22102

FEC ID number of contributing  
federal political committee.**C** C00040998

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		25		2014

Transaction ID : C9394285

Amount of Each Receipt this Period

1000.00

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

2500.00

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**ECOLAB INC. POLITICAL ACTION COMMITTEE**

Mailing Address 370 WABASH STREET N.

City State Zip Code  
 ST. PAUL MN 55102

FEC ID number of contributing  
federal political committee.

**C** C00101485

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M / D D / Y Y Y Y  
 02 25 2014

**Transaction ID : C9394303**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC**

Mailing Address 2980 FAIRVIEW PARK DRIVE

City State Zip Code  
 FALLS CHURCH VA 22042

FEC ID number of contributing  
federal political committee.

**C** C00088591

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

7500.00

Date of Receipt

M M / D D / Y Y Y Y  
 01 21 2014

**Transaction ID : C9158467**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**Faegre & Benson PAC**

Mailing Address 90 South Seventh Street #2200

City State Zip Code  
 Minneapolis MN 55402

FEC ID number of contributing  
federal political committee.

**C** C00215491

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 02 25 2014

**Transaction ID : C9394299**

Amount of Each Receipt this Period

2000.00

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

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

5500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**Full Name (Last, First, Middle Initial)  
**Farm Credit Political Action Committee**

Mailing Address 50 F Street NW, Suite 900

City	State	Zip Code
Washington	DC	20001

FEC ID number of contributing  
federal political committee.**C** C00193631

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		21		2014

**Transaction ID : C9235274**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**Farm Credit Political Action Committee**

Mailing Address 50 F Street NW, Suite 900

City	State	Zip Code
Washington	DC	20001

FEC ID number of contributing  
federal political committee.**C** C00193631

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2014

**Transaction ID : C9394286**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Florida Sugar Cane League PAC**

Mailing Address 1301 PENNSYLVANIA AVE NW STE 401

City	State	Zip Code
WASHINGTON	DC	20004

FEC ID number of contributing  
federal political committee.**C** C00012328

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		12		2014

**Transaction ID : C9436554**

Amount of Each Receipt this Period

1000.00

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

4500.00

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**FRIENDS OF JOHN TANNER**

Mailing Address POST OFFICE BOX 1398

City State Zip Code  
 UNION CITY TN 38281

FEC ID number of contributing  
federal political committee.

**C** C00223230

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 01 16 2014

Transaction ID : C9158487

Amount of Each Receipt this Period

500.00

**B.** Full Name (Last, First, Middle Initial)  
**GRAY, PLANT, MOOTY, MOOTY & BENNETT P A PUBLIC AFFAIRS COMMITTEE**

Mailing Address 500 IDS CENTER  
 80 SOUTH 8TH STREET

City State Zip Code  
 MINNEAPOLIS MN 55402

FEC ID number of contributing  
federal political committee.

**C** C00099473

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2750.00

Date of Receipt

M M / D D / Y Y Y Y  
 02 25 2014

Transaction ID : C9394294

Amount of Each Receipt this Period

250.00

**C.** Full Name (Last, First, Middle Initial)  
**HILL-ROM HOLDINGS, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 1069 State Road 46 East

City State Zip Code  
 Batesville IN 47006

FEC ID number of contributing  
federal political committee.

**C** C00448993

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 01 21 2014

Transaction ID : C9226765

Amount of Each Receipt this Period

1000.00

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

1750.00

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

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

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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**I.B.E.W. -- COPE**

Mailing Address 1125 Fifteenth Street, N.W.

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C** C00027342

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

9000.00

Date of Receipt

M M / D D / Y Y Y Y  
02 25 2014

Transaction ID : C9394298

Amount of Each Receipt this Period

3000.00

Full Name (Last, First, Middle Initial)

**Intl Assn of Fire Fighters -- FIREPAC**

Mailing Address 1750 New York Avenue, NW

City

Washington

State

DC

Zip Code

20006

FEC ID number of contributing  
federal political committee.

**C** C00029447

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 20 2014

Transaction ID : C9441385

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Intl Union Painters & Allied Trades IBPATogether**

Mailing Address 1750 New York Ave., NW

City

Washington

State

DC

Zip Code

20006

FEC ID number of contributing  
federal political committee.

**C** C00000885

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
02 25 2014

Transaction ID : C9394304

Amount of Each Receipt this Period

2500.00

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

6500.00

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

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lockridge Grindal Nauen Political Fund**

Mailing Address 100 Washington Ave. S. #2200

City	State	Zip Code
Minneapolis	MN	55401

FEC ID number of contributing  
federal political committee.

**C** C00167916

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

7000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		20		2014

**Transaction ID : C9380999**

Amount of Each Receipt this Period

2000.00

**B.** Full Name (Last, First, Middle Initial)  
**Medtronic Medical Technology Fund PAC**

Mailing Address 1420 New York Ave NW  
Suite 600

City	State	Zip Code
Washington	DC	20005-3002

FEC ID number of contributing  
federal political committee.

**C** C00311878

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		20		2014

**Transaction ID : C9441366**

Amount of Each Receipt this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Minn-Dak Farmers Cooperative PAC**

Mailing Address 7525 Red River Road

City	State	Zip Code
Wahpeton	ND	58075-9698

FEC ID number of contributing  
federal political committee.

**C** C00164939

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		13		2014

**Transaction ID : C9436560**

Amount of Each Receipt this Period

1000.00

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

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

4000.00



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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**Minnesota Mining & Manufacturing PAC**

Mailing Address 3M Center Building 224 - 5N - 40

City State Zip Code  
Saint Paul MN 55144

FEC ID number of contributing  
federal political committee.

**C** C00084475

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 04 2014

Transaction ID : C9405062

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**Minnesota Mining & Manufacturing PAC**

Mailing Address 3M Center Building 224 - 5N - 40

City State Zip Code  
Saint Paul MN 55144

FEC ID number of contributing  
federal political committee.

**C** C00084475

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 20 2014

Transaction ID : C9441365

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC**

Mailing Address 1325 MASSACHUSETTS AVE., NW

City State Zip Code  
WASHINGTON DC 20005

FEC ID number of contributing  
federal political committee.

**C** C00238725

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 05 2014

Transaction ID : C9436546

Amount of Each Receipt this Period

1000.00

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

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

3500.00

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC**

Mailing Address 1325 MASSACHUSETTS AVE., NW

City State Zip Code  
 WASHINGTON DC 20005

FEC ID number of contributing  
federal political committee.

**C** C00238725

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 03 18 2014

**Transaction ID : C9439100**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**National Beer Wholesalers PAC**

Mailing Address 1101 King Street  
 Suite 600

City State Zip Code  
 Alexandria VA 22314

FEC ID number of contributing  
federal political committee.

**C** C00144766

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
 02 25 2014

**Transaction ID : C9394293**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**WATERPAC - NATIONAL RURAL WATER ASSOCIATION POLITICAL COMMITTEE**

Mailing Address 2915 South 13th Street

City State Zip Code  
 DUNCAN OK 73533

FEC ID number of contributing  
federal political committee.

**C** C00202184

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
 02 19 2014

**Transaction ID : C9380525**

Amount of Each Receipt this Period

1500.00

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

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

5000.00

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

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

FOR LINE NUMBER:

PAGE 43 OF 76

(check only one)

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

Full Name (Last, First, Middle Initial)

Physical Therapy Political Action Committee

Mailing Address 1111 N. Fairfax Street

City	State	Zip Code
Alexandria	VA	22314

FEC ID number of contributing federal political committee.

C C00012880

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2014

Transaction ID : C9394289

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

SEIU COPE (SERVICE EMPLOYEES INTERNATIONAL UNION COMMITTEE ON POLITICAL EDUCATION)

Mailing Address 1800 MASSACHUSETTS AVE NW

City	State	Zip Code
WASHINGTON	DC	20036

FEC ID number of contributing federal political committee.

C C00004036

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2014

Transaction ID : C9394287

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

SEIU COPE (SERVICE EMPLOYEES INTERNATIONAL UNION COMMITTEE ON POLITICAL EDUCATION)

Mailing Address 1800 MASSACHUSETTS AVE NW

City	State	Zip Code
WASHINGTON	DC	20036

FEC ID number of contributing federal political committee.

C C00004036

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2014

Transaction ID : C9394288

Amount of Each Receipt this Period

5000.00

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

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

11000.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 44 OF 76

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

Full Name (Last, First, Middle Initial)  
 SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

**A.** Mailing Address P O BOX 500

City State Zip Code  
 RENVILLE MN 56284

FEC ID number of contributing  
federal political committee. **C** C00166348

Name of Employer Occupation

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
 10000.00

Date of Receipt

M M / D D / Y Y Y Y  
 02 25 2014

Transaction ID : C9394297

Amount of Each Receipt this Period

2000.00

**B.** Full Name (Last, First, Middle Initial)  
 SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

Mailing Address P O BOX 500

City State Zip Code  
 RENVILLE MN 56284

FEC ID number of contributing  
federal political committee. **C** C00166348

Name of Employer Occupation

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
 10000.00

Date of Receipt

M M / D D / Y Y Y Y  
 03 18 2014

Transaction ID : C9439122

Amount of Each Receipt this Period

3000.00

**C.** Full Name (Last, First, Middle Initial)  
**TARGETCITIZENS POLITICAL FORUM**

Mailing Address 1000 Nicollet Mall  
 TPS 3275

City State Zip Code  
 Minneapolis MN 55403

FEC ID number of contributing  
federal political committee. **C** C00098061

Name of Employer Occupation

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 03 04 2014

Transaction ID : C9405064

Amount of Each Receipt this Period

1000.00

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

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

6000.00

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

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

FOR LINE NUMBER:

PAGE 45 OF 76

(check only one)

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>UNITE Campaign Committee</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>31</td> <td></td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y	03		31		2014	
M M M	/	D D D	/	Y Y Y Y Y									
03		31		2014									
Mailing Address 275 7th Ave 10th Floor		<b>Transaction ID : C9489317</b>											
City New York	State NY		Zip Code 10001										
FEC ID number of contributing federal political committee. <b>C</b> C00004861		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10"></td> <td>2500.00</td> </tr> </table>											2500.00
										2500.00			
Name of Employer Occupation		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10"></td> <td>2500.00</td> </tr> </table>											2500.00
										2500.00			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="10"></td> <td>2500.00</td> </tr> </table>											2500.00
										2500.00			

<b>B.</b> Full Name (Last, First, Middle Initial) <b>United Food &amp; Commercial Workers ABC</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>31</td> <td></td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y	03		31		2014	
M M M	/	D D D	/	Y Y Y Y Y									
03		31		2014									
Mailing Address 1775 K Street NW		<b>Transaction ID : C9484441</b>											
City Washington	State DC		Zip Code 20006-1598										
FEC ID number of contributing federal political committee. <b>C</b> C00002766		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10"></td> <td>1000.00</td> </tr> </table>											1000.00
										1000.00			
Name of Employer Occupation		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10"></td> <td>1000.00</td> </tr> </table>											1000.00
										1000.00			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="10"></td> <td>2000.00</td> </tr> </table>											2000.00
										2000.00			

<b>C.</b> Full Name (Last, First, Middle Initial) <b>UNITED STATES BEET SUGAR ASSOCIATION POLITICAL ACTION COMMITTEE</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>13</td> <td></td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y	03		13		2014	
M M M	/	D D D	/	Y Y Y Y Y									
03		13		2014									
Mailing Address 1156 15TH STREET NW SUITE 1019		<b>Transaction ID : C9436563</b>											
City WASHINGTON	State DC		Zip Code 20005										
FEC ID number of contributing federal political committee. <b>C</b> C00063586		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10"></td> <td>1000.00</td> </tr> </table>											1000.00
										1000.00			
Name of Employer Occupation		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10"></td> <td>1000.00</td> </tr> </table>											1000.00
										1000.00			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="10"></td> <td>1000.00</td> </tr> </table>											1000.00
										1000.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<table border="1"> <tr> <td colspan="10"></td> <td>4500.00</td> </tr> </table>											4500.00
										4500.00		
<b>TOTAL</b> This Period (last page this line number only).....	<table border="1"> <tr> <td colspan="10"></td> <td></td> </tr> </table>											

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

A. Full Name (Last, First, Middle Initial)  
**United Steelworkers of America PAC**

Mailing Address 5 Gateway Center

City State Zip Code  
 Pittsburgh PA 15222

FEC ID number of contributing  
federal political committee.

**C** C00003590

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2750.00

Date of Receipt

M M / D D / Y Y Y Y  
 02 25 2014

Transaction ID : C9394292

Amount of Each Receipt this Period

2500.00

B. Full Name (Last, First, Middle Initial)  
**United Transportation Union PAC**

Mailing Address 14600 Detroit Avenue

City State Zip Code  
 Cleveland OH 44107

FEC ID number of contributing  
federal political committee.

**C** C00001636

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

M M / D D / Y Y Y Y  
 03 31 2014

Transaction ID : C9484123

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)  
**Wells Fargo Employee PAC**

Mailing Address Sixth and Marquette

City State Zip Code  
 Minneapolis MN 55479

FEC ID number of contributing  
federal political committee.

**C** C00034595

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
 03 04 2014

Transaction ID : C9405070

Amount of Each Receipt this Period

2500.00

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

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

6000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**McCollum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**XCEL ENERGY EMPLOYEE POLITICAL ACTION COMMITTEE (X)**

Mailing Address 1225 17th Street, Suite 1000  
 Suite 900

City State Zip Code  
 Denver CO 80202

FEC ID number of contributing  
federal political committee.

**C** C00107771

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 02 20 2014

**Transaction ID : C9381000**

Amount of Each Receipt this Period

1000.00

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

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

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

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

1000.00

90750.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 48 OF 76

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address P.O. Box 360001

City	State	Zip Code
Fort Lauderdale	FL	33336

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	5		2	0	1	4

Amount of Each Disbursement this Period

7.95
------

Transaction ID : D429725

**B. American Express**

Mailing Address P.O. Box 360001

City	State	Zip Code
Fort Lauderdale	FL	33336

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	1		2	0	1	4

Amount of Each Disbursement this Period

51.49
-------

Transaction ID : D429726

**C. American Express**

Mailing Address P.O. Box 360001

City	State	Zip Code
Fort Lauderdale	FL	33336

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	8		2	0	1	4

Amount of Each Disbursement this Period

7.95
------

Transaction ID : D429733

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

67.39



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 49 OF 76

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address P.O. Box 360001

City	State	Zip Code
Fort Lauderdale	FL	33336

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
02 / 20 / 2014

Amount of Each Disbursement this Period

1.60
------

Transaction ID : D429734

**B. American Express**

Mailing Address P.O. Box 360001

City	State	Zip Code
Fort Lauderdale	FL	33336

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
03 / 17 / 2014

Amount of Each Disbursement this Period

7.95
------

Transaction ID : D432233

**C. American Express**

Mailing Address P.O. Box 360001

City	State	Zip Code
Fort Lauderdale	FL	33336

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
03 / 20 / 2014

Amount of Each Disbursement this Period

34.56
-------

Transaction ID : D432235

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

44.11

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

McCollum for Congress

Full Name (Last, First, Middle Initial)

**A. Blue Cross Blue Shield of Minnesota**

Mailing Address PO Box 64369

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		10		2014

City	State	Zip Code
Saint Paul	MN	55164-0369

Amount of Each Disbursement this Period

677.50
--------

Purpose of Disbursement  
Health insuranceCategory/  
Type

Transaction ID : D430339

Candidate Name

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

**B. Comcast**

Mailing Address 10 River Park Plz

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		17		2014

City	State	Zip Code
Saint Paul	MN	55107-1220

Amount of Each Disbursement this Period

210.02
--------

Purpose of Disbursement  
Internet, phone, cable TVCategory/  
Type

Transaction ID : D430341

Candidate Name

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

**C. Comcast**

Mailing Address 10 River Park Plz

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		14		2014

City	State	Zip Code
Saint Paul	MN	55107-1220

Amount of Each Disbursement this Period

217.44
--------

Purpose of Disbursement  
Internet, phone, cable TVCategory/  
Type

Transaction ID : D427092

Candidate Name

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

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

1104.96

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 51 OF 76

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**A. Comcast**

Mailing Address 10 River Park Plz

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		11		2014

City	State	Zip Code
Saint Paul	MN	55107-1220

Amount of Each Disbursement this Period

210.02
--------

Purpose of Disbursement  
Internet, phone, cable TVCategory/  
Type**Transaction ID : D428885**

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**B. Lizeht De La Torre**

Mailing Address 410 Van Dyke Street #310

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2014

City	State	Zip Code
Saint Paul	MN	55119

Amount of Each Disbursement this Period

1218.62
---------

Purpose of Disbursement  
PayrollCategory/  
Type**Transaction ID : D429077**

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**c. Lizeht De La Torre**

Mailing Address 410 Van Dyke Street #310

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		04		2014

City	State	Zip Code
Saint Paul	MN	55119

Amount of Each Disbursement this Period

2930.68
---------

Purpose of Disbursement  
PayrollCategory/  
Type**Transaction ID : D429779**

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

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

4359.32

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 52 OF 76

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

McCollum for Congress

Full Name (Last, First, Middle Initial)

**A. Elan Merchant Services**

Mailing Address 7300 Chapman Hwy

City	State	Zip Code
Knoxville	TN	37920-6612

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2014

Amount of Each Disbursement this Period

57.94
-------

Transaction ID : D429732

**B. Elan Merchant Services**

Mailing Address 7300 Chapman Hwy

City	State	Zip Code
Knoxville	TN	37920-6612

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		03		2014

Amount of Each Disbursement this Period

57.94
-------

Transaction ID : D429719

**c. Elan Merchant Services**

Mailing Address 7300 Chapman Hwy

City	State	Zip Code
Knoxville	TN	37920-6612

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		03		2014

Amount of Each Disbursement this Period

57.94
-------

Transaction ID : D432227

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

173.82

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**A. First Data Corporation**

Mailing Address 5565 Glenridge Connector NE

City	State	Zip Code
Atlanta	GA	30342

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

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:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 04 / 2014

Amount of Each Disbursement this Period

1.08
------

Transaction ID : D432229

**B. First Data Corporation**

Mailing Address 5565 Glenridge Connector NE

City	State	Zip Code
Atlanta	GA	30342

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

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:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 04 / 2014

Amount of Each Disbursement this Period

10.18
-------

Transaction ID : D432230

**C. First Data Corporation**

Mailing Address 5565 Glenridge Connector NE

City	State	Zip Code
Atlanta	GA	30342

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

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:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 04 / 2014

Amount of Each Disbursement this Period

27.58
-------

Transaction ID : D432231

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

38.84

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

McCollum for Congress

Full Name (Last, First, Middle Initial)

**A. First Data Corporation**

Mailing Address 5565 Glenridge Connector NE

City	State	Zip Code
Atlanta	GA	30342

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		03		2014

Amount of Each Disbursement this Period

13.06
-------

Transaction ID : D429720

**B. First Data Corporation**

Mailing Address 5565 Glenridge Connector NE

City	State	Zip Code
Atlanta	GA	30342

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		06		2014

Amount of Each Disbursement this Period

4.93
------

Transaction ID : D429721

**C. First Data Corporation**

Mailing Address 5565 Glenridge Connector NE

City	State	Zip Code
Atlanta	GA	30342

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		06		2014

Amount of Each Disbursement this Period

28.65
-------

Transaction ID : D429722

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

46.64

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

McCollum for Congress

Full Name (Last, First, Middle Initial)

**A. First Data Corporation**

Mailing Address 5565 Glenridge Connector NE

City	State	Zip Code
Atlanta	GA	30342

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

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:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		04		2014

Amount of Each Disbursement this Period

2.88
------

Transaction ID : D429729

**B. First Data Corporation**

Mailing Address 5565 Glenridge Connector NE

City	State	Zip Code
Atlanta	GA	30342

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

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:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		04		2014

Amount of Each Disbursement this Period

3.69
------

Transaction ID : D429730

**c. First Data Corporation**

Mailing Address 5565 Glenridge Connector NE

City	State	Zip Code
Atlanta	GA	30342

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

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:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		04		2014

Amount of Each Disbursement this Period

36.98
-------

Transaction ID : D429731

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

43.55

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**A. Google**

Mailing Address 1600 Amphiteatre Parkway

City	State	Zip Code
Mountain View	CA	94043

Purpose of Disbursement  
Internet Utility

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		04		2014

Amount of Each Disbursement this Period

1.92
------

Transaction ID : D429739

**B. Google**

Mailing Address 1600 Amphiteatre Parkway

City	State	Zip Code
Mountain View	CA	94043

Purpose of Disbursement  
Internet Utility

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		06		2014

Amount of Each Disbursement this Period

20.00
-------

Transaction ID : D429723

**c. Google**

Mailing Address 1600 Amphiteatre Parkway

City	State	Zip Code
Mountain View	CA	94043

Purpose of Disbursement  
Internet Utility

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		06		2014

Amount of Each Disbursement this Period

40.00
-------

Transaction ID : D429724

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

61.92



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 57 OF 76

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**A. Google**

Mailing Address 1600 Amphiteatre Parkway

City	State	Zip Code
Mountain View	CA	94043

Purpose of Disbursement  
Internet Utility

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		03		2014

Amount of Each Disbursement this Period

6423.14
---------

Transaction ID : D432226

**B. Mr. Charles Rand Hammond**

Mailing Address 3620 17th Ave S

City	State	Zip Code
Minneapolis	MN	55407

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2014

Amount of Each Disbursement this Period

3560.87
---------

Transaction ID : D429076

**C. Mr. Charles Rand Hammond**

Mailing Address 3620 17th Ave S

City	State	Zip Code
Minneapolis	MN	55407

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		02		2014

Amount of Each Disbursement this Period

2837.27
---------

Transaction ID : D426105

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

6423.14

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 58 OF 76

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**A. Mr. Charles Rand Hammond**

Mailing Address 3620 17th Ave S

City	State	Zip Code
Minneapolis	MN	55407

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
03 / 04 / 2014

Amount of Each Disbursement this Period

3560.87
---------

Transaction ID : D429778

**B. Highwood Studios**Mailing Address Ann Schley  
1120 Winthrop St S

City	State	Zip Code
Saint Paul	MN	55119-5609

Purpose of Disbursement  
Photography

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
03 / 10 / 2014

Amount of Each Disbursement this Period

336.00
--------

Transaction ID : D430340

**c. Hill Plaza, LLC**Mailing Address 1700 West Highway 36  
Suite 650

City	State	Zip Code
Roseville	MN	55113

Purpose of Disbursement  
Office and storage rent

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
01 / 06 / 2014

Amount of Each Disbursement this Period

892.67
--------

Transaction ID : D427094

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

4789.54

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 59 OF 76

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**A. Hill Plaza, LLC**Mailing Address 1700 West Highway 36  
Suite 650

City Roseville State MN Zip Code 55113

Purpose of Disbursement  
Office and storage rent

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
01	23	2014

Amount of Each Disbursement this Period

904.17
--------

Transaction ID : D427867

**B. Hill Plaza, LLC**Mailing Address 1700 West Highway 36  
Suite 650

City Roseville State MN Zip Code 55113

Purpose of Disbursement  
Office and storage rent

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
02	20	2014

Amount of Each Disbursement this Period

904.17
--------

Transaction ID : D429329

**c. Hill Plaza, LLC**Mailing Address 1700 West Highway 36  
Suite 650

City Roseville State MN Zip Code 55113

Purpose of Disbursement  
Office and storage rent

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
03	21	2014

Amount of Each Disbursement this Period

904.17
--------

Transaction ID : D430744

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

2712.51

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 60 OF 76

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**A. Honsa-Binder Printing Company**

Mailing Address 320 Spruce St

City	State	Zip Code
Saint Paul	MN	55101-2445

Purpose of Disbursement  
Printing

Candidate Name

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
02 / 13 / 2014

Amount of Each Disbursement this Period

695.09
--------

Transaction ID : D428962

**B. Honsa-Binder Printing Company**

Mailing Address 320 Spruce St

City	State	Zip Code
Saint Paul	MN	55101-2445

Purpose of Disbursement  
Printing

Candidate Name

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
03 / 17 / 2014

Amount of Each Disbursement this Period

554.45
--------

Transaction ID : D430342

**c. Hyatt Regency Chesapeake Bay**

Mailing Address 100 Heron Blvd. at Route 50

City	State	Zip Code
Cambridge	MD	21613

Purpose of Disbursement  
Travel Expenses

Candidate Name

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
02 / 18 / 2014

Amount of Each Disbursement this Period

44.10
-------

Transaction ID : D429735

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

1293.64

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 61 OF 76

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**A. Hyatt Regency Chesapeake Bay**

Mailing Address 100 Heron Blvd. at Route 50

City	State	Zip Code
Cambridge	MD	21613

Purpose of Disbursement  
Travel expenses

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
02 / 12 / 2014

Amount of Each Disbursement this Period

1150.00
---------

Transaction ID : D429322

**B. Emily Lefholz**Mailing Address 669 Laurel Ave  
#1

City	State	Zip Code
Saint Paul	MN	55104

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
01 / 02 / 2014

Amount of Each Disbursement this Period

3666.36
---------

Transaction ID : D426106

**c. Lockridge, Grindal, Nauen P.L.L.P.**

Mailing Address 100 Washington Ave S, Ste 2200

City	State	Zip Code
Minneapolis	MN	55401-2159

Purpose of Disbursement  
Catering & event costs

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
01 / 29 / 2014

Amount of Each Disbursement this Period

962.48
--------

Transaction ID : D428237

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

5778.84

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 62 OF 76

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**A. Lockridge, Grindal, Nauen P.L.L.P.**

Mailing Address 100 Washington Ave S, Ste 2200

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		06		2014

City	State	Zip Code
Minneapolis	MN	55401-2159

Purpose of Disbursement  
Catering & event costs

Amount of Each Disbursement this Period

412.50
--------

Transaction ID : D428764

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**B. Mancini's Char House**

Mailing Address 531 West 7th Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		27		2014

City	State	Zip Code
Saint Paul	MN	55102-3007

Purpose of Disbursement  
Food and beverage

Amount of Each Disbursement this Period

4494.86
---------

Transaction ID : D429423

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**C. Midway Chamber of Commerce**Mailing Address 1600 University Ave  
Suite 305

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		11		2014

City	State	Zip Code
Saint Paul	MN	55104

Purpose of Disbursement  
Luncheon ticket

Amount of Each Disbursement this Period

25.00
-------

Transaction ID : D428911

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

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

4932.36

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**A. Ms. Dotti Mavromatis**

Mailing Address 411 South Columbus Street

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

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:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		24		2014

Amount of Each Disbursement this Period

3000.00
---------

Transaction ID : D427866

**B. Ms. Dotti Mavromatis**

Mailing Address 411 South Columbus Street

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

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:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		26		2014

Amount of Each Disbursement this Period

3000.00
---------

Transaction ID : D429468

**c. National Democratic Club**

Mailing Address 30 Ivy St SE

City	State	Zip Code
Washington	DC	20003-4006

Purpose of Disbursement  
Food and beverage

Candidate Name

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:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		20		2014

Amount of Each Disbursement this Period

167.63
--------

Transaction ID : D429330

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

6167.63

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**A. National Democratic Club**

Mailing Address 30 Ivy St SE

City	State	Zip Code
Washington	DC	20003-4006

Purpose of Disbursement  
Membership dues

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		23		2014

Amount of Each Disbursement this Period

12.28
-------

Transaction ID : D427868

**B. National Democratic Club**

Mailing Address 30 Ivy St SE

City	State	Zip Code
Washington	DC	20003-4006

Purpose of Disbursement  
Membership dues

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		19		2014

Amount of Each Disbursement this Period

84.00
-------

Transaction ID : D430419

**C. NGP VAN, Inc.**

Mailing Address 1101 15th Street, NW, Suite 500

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement  
Email Service

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		01		2014

Amount of Each Disbursement this Period

75.00
-------

Transaction ID : D428760

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

171.28



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**A. NGP VAN, Inc.**

Mailing Address 1101 15th Street, NW, Suite 500

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		06		2014

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement  
Database software

Amount of Each Disbursement this Period

2040.00
---------

Transaction ID : D428761

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:

Full Name (Last, First, Middle Initial)

**B. NGP VAN, Inc.**

Mailing Address 1101 15th Street, NW, Suite 500

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		01		2014

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement  
Email Service

Amount of Each Disbursement this Period

75.00
-------

Transaction ID : D427093

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:

Full Name (Last, First, Middle Initial)

**C. NGP VAN, Inc.**

Mailing Address 1101 15th Street, NW, Suite 500

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		03		2014

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement  
Email Service

Amount of Each Disbursement this Period

75.00
-------

Transaction ID : D432228

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

2190.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**A. Paychex**Mailing Address 1210 Northland Dr  
Ste 100

City Mendota Heights State MN Zip Code 55120-1181

Purpose of Disbursement  
Payroll taxes

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		02		2014

Amount of Each Disbursement this Period

3290.29
---------

Transaction ID : D426108

**B. Paychex**Mailing Address 1210 Northland Dr  
Ste 100

City Mendota Heights State MN Zip Code 55120-1181

Purpose of Disbursement  
Payroll processing fee

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		10		2014

Amount of Each Disbursement this Period

20.00
-------

Transaction ID : D426109

**C. Paychex**Mailing Address 1210 Northland Dr  
Ste 100

City Mendota Heights State MN Zip Code 55120-1181

Purpose of Disbursement  
Payroll processing fee

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		10		2014

Amount of Each Disbursement this Period

316.33
--------

Transaction ID : D429078

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

3626.62

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

McCollum for Congress

Full Name (Last, First, Middle Initial)

**A. Paychex**Mailing Address 1210 Northland Dr  
Ste 100

City Mendota Heights State MN Zip Code 55120-1181

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2014

Amount of Each Disbursement this Period

2235.47
---------

Transaction ID : D429738

**B. Paychex**Mailing Address 1210 Northland Dr  
Ste 100

City Mendota Heights State MN Zip Code 55120-1181

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		21		2014

Amount of Each Disbursement this Period

4.69
------

Transaction ID : D429727

**c. Paychex**Mailing Address 1210 Northland Dr  
Ste 100

City Mendota Heights State MN Zip Code 55120-1181

Purpose of Disbursement  
Payroll taxes

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		04		2014

Amount of Each Disbursement this Period

3217.41
---------

Transaction ID : D429780

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

5457.57

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**A. Paychex**Mailing Address 1210 Northland Dr  
Ste 100City State Zip Code  
Mendota Heights MN 55120-1181Purpose of Disbursement  
Payroll processing fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		10		2014

Amount of Each Disbursement this Period

108.98
--------

Transaction ID : D429782

**B. Pendleton Insurance**

Mailing Address 1549 Livingstone Ave #106

City State Zip Code  
Wes Saint Paul MN 55118Purpose of Disbursement  
Insurance

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		27		2014

Amount of Each Disbursement this Period

942.95
--------

Transaction ID : D428060

**C. Roseville Parks and Recreation Department**

Mailing Address 2660 Civic Center Drive

City State Zip Code  
Roseville MN 55113Purpose of Disbursement  
Parade fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		03		2014

Amount of Each Disbursement this Period

100.00
--------

Transaction ID : D429795

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

1151.93

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**A. Patrick Savage**

Mailing Address 7401 Courtly Rd

City	State	Zip Code
Woodbury	MN	55125-4002

Purpose of Disbursement  
Payroll

Candidate Name

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:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 02 / 2014

Amount of Each Disbursement this Period

277.05
--------

Transaction ID : D426107

**B. St. Paul Festival and Heritage Foundation**

Mailing Address 75 W 5th Street, Suite 429

City	State	Zip Code
Saint Paul	MN	55102

Purpose of Disbursement  
Parade fee

Candidate Name

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:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 03 / 2014

Amount of Each Disbursement this Period

200.00
--------

Transaction ID : D429796

**C. T-Mobile USA, Inc.**

Mailing Address P.O. Box 742596

City	State	Zip Code
Cincinnati	OH	45274-2596

Purpose of Disbursement  
Mobile phone

Candidate Name

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:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 20 / 2014

Amount of Each Disbursement this Period

78.55
-------

Transaction ID : D429328

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

555.60

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**A. T-Mobile USA, Inc.**

Mailing Address P.O. Box 742596

City	State	Zip Code
Cincinnati	OH	45274-2596

Purpose of Disbursement  
Mobile phone

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		19		2014

Amount of Each Disbursement this Period

78.55
-------

Transaction ID : D430421

**B. T-Mobile USA, Inc.**

Mailing Address P.O. Box 742596

City	State	Zip Code
Cincinnati	OH	45274-2596

Purpose of Disbursement  
Mobile phone

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		23		2014

Amount of Each Disbursement this Period

78.55
-------

Transaction ID : D427869

**c. Union Resource Guide**Mailing Address 2975 Lone Oak Cir  
Ste 201

City	State	Zip Code
Saint Paul	MN	55121-1433

Purpose of Disbursement  
Advertisement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		24		2014

Amount of Each Disbursement this Period

135.00
--------

Transaction ID : D429376

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

292.10

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**A. W. A. Frost**

Mailing Address 374 Selby Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		23		2014

City	State	Zip Code
Saint Paul	MN	55102-1825

Amount of Each Disbursement this Period

47.75
-------

Purpose of Disbursement  
Food and beverage

Candidate Name

Category/  
Type**Transaction ID : D427813**

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

**B. Warehouse Bar & Grill**

Mailing Address 214 King Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		04		2014

City	State	Zip Code
Alexandria	VA	22314

Amount of Each Disbursement this Period

319.77
--------

Purpose of Disbursement  
Food and beverage

Candidate Name

Category/  
Type**Transaction ID : D429323**

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

**C. White Bear Avenue Business Association**

Mailing Address PO Box 9328

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		13		2014

City	State	Zip Code
Saint Paul	MN	55109-0328

Amount of Each Disbursement this Period

150.00
--------

Purpose of Disbursement  
Parade registration fee

Candidate Name

Category/  
Type**Transaction ID : D428978**

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

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

517.52





**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 73 OF 76

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**A. Office Max**

Mailing Address 1490 University Ave W

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		19		2014

City	State	Zip Code
Saint Paul	MN	55104-3901

Amount of Each Disbursement this Period

48.41
-------

Purpose of Disbursement  
Office suppliesCategory/  
Type

Transaction ID : D429786

[MEMO ITEM]

Candidate Name

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

**B. Target**

Mailing Address 1300 University Ave W

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		28		2014

City	State	Zip Code
Saint Paul	MN	55104-4103

Amount of Each Disbursement this Period

3.78
------

Purpose of Disbursement  
Food and beverageCategory/  
Type

Transaction ID : D429787

[MEMO ITEM]

Candidate Name

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

**C. Mr. Charles Rand Hammond**

Mailing Address 3620 17th Ave S

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		28		2014

City	State	Zip Code
Minneapolis	MN	55407

Amount of Each Disbursement this Period

390.90
--------

Purpose of Disbursement  
Office suppliesCategory/  
Type

Transaction ID : D429788

Candidate Name

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

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

390.90

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**A. FedEx Office**

Mailing Address 58 Snelling Ave S

City	State	Zip Code
Saint Paul	MN	55105-1901

Purpose of Disbursement  
Office supplies

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		24		2014

Amount of Each Disbursement this Period

37.67
-------

Transaction ID : D429791

**[MEMO ITEM]****B. Office Max**

Mailing Address 1490 University Ave W

City	State	Zip Code
Saint Paul	MN	55104-3901

Purpose of Disbursement  
Office supplies

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		24		2014

Amount of Each Disbursement this Period

256.18
--------

Transaction ID : D429789

**[MEMO ITEM]****c. Office Max**

Mailing Address 1490 University Ave W

City	State	Zip Code
Saint Paul	MN	55104-3901

Purpose of Disbursement  
Office supplies

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		24		2014

Amount of Each Disbursement this Period

29.05
-------

Transaction ID : D429790

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
------

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**McCollum for Congress**

Full Name (Last, First, Middle Initial)

**A. Postmaster USPS**Mailing Address Minnesota Transfer Station  
2334 University Ave W

City Saint Paul State MN Zip Code 55114-1858

Purpose of Disbursement  
P.O. box renewal

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
02	27	2014

Amount of Each Disbursement this Period

68.00
-------

Transaction ID : D429792

**[MEMO ITEM]****B. Hon. Betty McCollum**Mailing Address 468 Dayton Ave  
Apt 9

City Saint Paul State MN Zip Code 55102-1758

Purpose of Disbursement  
Food and beverage

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
03	18	2014

Amount of Each Disbursement this Period

49.01
-------

Transaction ID : D430401

**C. Downtowner Woodfire Grill**

Mailing Address 253 7th Street West

City Saint Paul State MN Zip Code 55102

Purpose of Disbursement  
Food and beverage

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
03	18	2014

Amount of Each Disbursement this Period

49.01
-------

Transaction ID : D430402

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

49.01
53707.86

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 76 OF 76

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**McCollum for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Lockridge, Grindal, Nauen P.L.L.P.**

Nature of Debt (Purpose):

Catering &amp; event costs

Mailing Address 100 Washington Ave S, Ste 2200

City State

Zip Code

Minneapolis

MN

55401-2159

Outstanding Balance Beginning This Period

962.48

Transaction ID : D428445

Amount Incurred This Period

0.00

Payment This Period

962.48

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

0.00

2) **TOTALS** This Period (last page this line number only) ..... ▶

0.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

0.00