

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

Kline for Congress

ADDRESS (number and street)

350 W Burnsville Pkwy

Ste 375

Check if different than previously reported. (ACC)

Burnsville

MN

55337

2. FEC IDENTIFICATION NUMBER ▼

C C00326629

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

MN

02

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

through

M M /

D D /

Y Y Y Y

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 Steven D. Ralls

Signature of Treasurer Steven D. Ralls

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

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

Write or Type Committee Name
Kline for Congress

Report Covering the Period: From: / / To: / /

	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))....	313008.09	639149.09
(b) Total Contribution Refunds (from Line 20(d)) .....	.00	.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	313008.09	639149.09
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	109637.65	273772.47
(b) Total Offsets to Operating Expenditures (from Line 14).....	423.04	12313.25
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	109214.61	261459.22
8. Cash on Hand at Close of Reporting Period (from Line 27).....	563098.05	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	.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)

Write or Type Committee Name

Kline for Congress

Report Covering the Period: From: / / To: / /

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).....	167657.09	329307.09
(ii) Unitemized.....	17101.00	24592.00
(iii) TOTAL of contributions from individuals ▶	184758.09	353899.09
(b) Political Party Committees.....	.00	.00
(c) Other Political Committees (such as PACs).....	128250.00	285250.00
(d) The Candidate.....	.00	.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	313008.09	639149.09
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	.00	7345.58
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	.00	.00
(b) All Other Loans.....	.00	.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	.00	.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	423.04	12313.25
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	40.87	62.39
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	313472.00	658870.31

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	109637.65	273772.47
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	.00	.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	.00	.00
(b) Of All Other Loans .....	.00	.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	.00	.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	.00	.00
(b) Political Party Committees.....	.00	.00
(c) Other Political Committees (such as PACs).....	.00	.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	.00	.00
21. OTHER DISBURSEMENTS .....	.00	2000.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	109637.65	275772.47

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	359263.70
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	313472.00
25. SUBTOTAL (add Line 23 and Line 24).....	672735.70
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	109637.65
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	563098.05

**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 5 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Berkeley And Company LLC

Mailing Address 64 E Midland Ave

City Paramus State NJ Zip Code 07652

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1300**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2015

Transaction ID : SA11Ai-CN51569

Amount of Each Receipt this Period
 1300

B. Full Name (Last, First, Middle Initial)
Mr. Timothy D Luig

Mailing Address 45 Oak Rd

City Saddle River State NJ Zip Code 07458

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

Name of Employer Occupation
 Berkeley College Administrator

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2800**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2015

Transaction ID : SA11Ai-CN51571

Amount of Each Receipt this Period
 1300

Partnership-Berkeley And Company LLC

[MEMO ITEM]
 \$1300.00 MEMO Partnership Attributed

C. Full Name (Last, First, Middle Initial)
Berkeley And Company LLC

Mailing Address 64 E Midland Ave

City Paramus State NJ Zip Code 07652

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2015

Transaction ID : SA11Ai-CN51140

Amount of Each Receipt this Period
 1200

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

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

2500.00

**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 6 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Timothy D Luig

Mailing Address 45 Oak Rd

City State Zip Code
Saddle River NJ 07458

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

Name of Employer Occupation
Berkeley College Administrator

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 08 / 2015

Transaction ID : SA11Ai-CN51570

Amount of Each Receipt this Period
1200
Partnership-Berkeley And Company LLC

[MEMO ITEM]
\$1200.00 MEMO Partnership Attributed

B. Full Name (Last, First, Middle Initial)
Joseph C Auge

Mailing Address 3355 263rd St W

City State Zip Code
Northfield MN 55057-5366

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

Name of Employer Occupation
Farmers Mill & Elevator Inc. Owner/Operator

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 09 / 2015

Transaction ID : SA11Ai-CN51203

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Tani D Austin

Mailing Address 6641 Beach Rd

City State Zip Code
Eden Prairie MN 55344

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 15 / 2015

Transaction ID : SA11Ai-CN51094

Amount of Each Receipt this Period
5400

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

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

5650.00

**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 7 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Tani D Austin

Mailing Address 6641 Beach Rd

City Eden Prairie State MN Zip Code 55344

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2700**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 18 / 2015

Transaction ID : SA11Ai-CN51097

Amount of Each Receipt this Period
 -2700

Redesignated to General 2016

[MEMO ITEM]
Redesignated

B. Full Name (Last, First, Middle Initial)
Tani D Austin

Mailing Address 6641 Beach Rd

City Eden Prairie State MN Zip Code 55344

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 18 / 2015

Transaction ID : SA11Ai-CN51098

Amount of Each Receipt this Period
 2700

Redesignated from Primary 2016

[MEMO ITEM]
Redesignation

C. Full Name (Last, First, Middle Initial)
Mr. William F Austin

Mailing Address 6641 Beach Rd

City Eden Prairie State MN Zip Code 55344

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

Name of Employer Starkey Corporate Occupation Founder And C.E.O.

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 15 / 2015

Transaction ID : SA11Ai-CN51095

Amount of Each Receipt this Period
 5400

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

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

5400.00

**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 8 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Mr. William F Austin

Mailing Address 6641 Beach Rd

City Eden Prairie State MN Zip Code 55344

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

Name of Employer Starkey Corporate Occupation Founder And C.E.O.

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2700**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 18 / 2015

Transaction ID : SA11Ai-CN51099

Amount of Each Receipt this Period
 -2700

Redesignated to General 2016

[MEMO ITEM]
Redesignated

B. Full Name (Last, First, Middle Initial)
Mr. William F Austin

Mailing Address 6641 Beach Rd

City Eden Prairie State MN Zip Code 55344

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

Name of Employer Starkey Corporate Occupation Founder And C.E.O.

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 18 / 2015

Transaction ID : SA11Ai-CN51100

Amount of Each Receipt this Period
 2700

Redesignated from Primary 2016

[MEMO ITEM]
Redesignation

C. Full Name (Last, First, Middle Initial)
Daniel Bachus

Mailing Address 5942 Caballo Ln E

City Paradise Valley State AZ Zip Code 85253

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

Name of Employer Grand Canyon University Occupation Administration

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 24 / 2015

Transaction ID : SA11Ai-CN51040

Amount of Each Receipt this Period
 500

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

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

500.00

**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 9 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Shingle Springs Band Miwok Indians

Mailing Address PO Box 1340

City State Zip Code
Shingle Springs CA 95682

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

Name of Employer Occupation
Native American Tribe Native American Tribe

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 29 / 2015

Transaction ID : SA11Ai-CN51465

Amount of Each Receipt this Period
2500

B. Full Name (Last, First, Middle Initial)
Mr. Andrew C Bowen

Mailing Address PO Box 206

City State Zip Code
Owenton KY 40359

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

Name of Employer Occupation
Key Private Bank Senior VP

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 17 / 2015

Transaction ID : SA11Ai-CN51022

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Mark Brenner

Mailing Address 6825 Ironwood Dr E

City State Zip Code
Paradise Valley AZ 85253

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

Name of Employer Occupation
Apollo Education Group Chief of Staff SVP

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 24 / 2015

Transaction ID : SA11Ai-CN51041

Amount of Each Receipt this Period
5000

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

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

7750.00

**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 10 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Mark Brenner

Mailing Address 6825 Ironwood Dr E

City Paradise Valley State AZ Zip Code 85253

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

Name of Employer Apollo Education Group Occupation Chief of Staff SVP

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2700**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 27 / 2015

Transaction ID : SA11Ai-CN51101

Amount of Each Receipt this Period
-2300

Redesignated to General 2016

[MEMO ITEM]
Redesignated

B. Full Name (Last, First, Middle Initial)
Mark Brenner

Mailing Address 6825 Ironwood Dr E

City Paradise Valley State AZ Zip Code 85253

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

Name of Employer Apollo Education Group Occupation Chief of Staff SVP

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 27 / 2015

Transaction ID : SA11Ai-CN51102

Amount of Each Receipt this Period
2300

Redesignated from Primary 2016

[MEMO ITEM]
Redesignation

C. Full Name (Last, First, Middle Initial)
Walter Frank Broich

Mailing Address 13670 122nd St

City Norwood State MN Zip Code 55368-9663

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

Name of Employer Broich Enterprises and Artic Air Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 17 / 2015

Transaction ID : SA11Ai-CN51328

Amount of Each Receipt this Period
5000

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: (check only one)	PAGE 11 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Walter Frank Broich

Mailing Address 13670 122nd St

City Norwood State MN Zip Code 55368-9663

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

Name of Employer Broich Enterprises and Artic Air Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2700**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 18 / 2015

Transaction ID : SA11Ai-CN51547

Amount of Each Receipt this Period
-2300

Redesignated to General 2016

[MEMO ITEM]
Redesignated

B. Full Name (Last, First, Middle Initial)
Walter Frank Broich

Mailing Address 13670 122nd St

City Norwood State MN Zip Code 55368-9663

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

Name of Employer Broich Enterprises and Artic Air Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 18 / 2015

Transaction ID : SA11Ai-CN51548

Amount of Each Receipt this Period
2300

Redesignated from Primary 2016

[MEMO ITEM]
Redesignation

C. Full Name (Last, First, Middle Initial)
Laurence Kennedy Burgess

Mailing Address 21310 Wind Rush Ct

City Potomac Falls State VA Zip Code 20165

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

Name of Employer USG Occupation USG Employee

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 29 / 2015

Transaction ID : SA11Ai-CN51462

Amount of Each Receipt this Period
250

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

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

250.00

**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 12 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Darrell D Butterwick

Mailing Address 1694 Kerry Ln

City Woodbury State MN Zip Code 55125-3348

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 26 / 2015

Transaction ID : SA11Ai-CN51386

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
Mr. Charles E Callahan

Mailing Address 9 Arleigh Rd

City Douglaston State NY Zip Code 11363

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

Name of Employer President Occupation Plaza College

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 08 / 2015

Transaction ID : SA11Ai-CN51137

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Mr. Charles E Callahan III

Mailing Address 118-33 Queens Blvd

City Forest Hills State NY Zip Code 11375

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

Name of Employer Plaza College Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 08 / 2015

Transaction ID : SA11Ai-CN51136

Amount of Each Receipt this Period
2000

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

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

3050.00

**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 13 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Mrs. Elizabeth K Callahan

Mailing Address 9 Arleigh Rd

City State Zip Code
Douglaston NY 11363

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

Name of Employer Occupation
Plaza College Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2015

Transaction ID : SA11Ai-CN51138

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Mr. Gregory W Cappelli

Mailing Address 1046 Jackson Ave

City State Zip Code
River Forest IL 60305

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

Name of Employer Occupation
Apollo Group CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 03 / 2015

Transaction ID : SA11Ai-CN51118

Amount of Each Receipt this Period
5000

C. Full Name (Last, First, Middle Initial)
Mr. Gregory W Cappelli

Mailing Address 1046 Jackson Ave

City State Zip Code
River Forest IL 60305

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

Name of Employer Occupation
Apollo Group CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 04 / 2015

Transaction ID : SA11Ai-CN51549

Amount of Each Receipt this Period
-2300

Redesignated to General 2016

[MEMO ITEM]
Redesignated

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)	PAGE 14 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Gregory W Cappelli

Mailing Address 1046 Jackson Ave

City River Forest State IL Zip Code 60305

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

Name of Employer Apollo Group Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 04 / 2015

Transaction ID : SA11Ai-CN51550

Amount of Each Receipt this Period
2300

Redesignated from Primary 2016

[MEMO ITEM]
Redesignation

B. Full Name (Last, First, Middle Initial)
Conway Casillas

Mailing Address 21384 Glebe View Dr

City Ashburn State VA Zip Code 20148

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

Name of Employer Apollo Group Occupation Vice President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 27 / 2015

Transaction ID : SA11Ai-CN51064

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Mr. Elliott A. Cobb

Mailing Address 10578 Cinder Cone Trl E

City Scottsdale State AZ Zip Code 85262

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

Name of Employer ECA Marketing Inc Occupation Insurance Broker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 07 / 2015

Transaction ID : SA11Ai-CN51010

Amount of Each Receipt this Period
2000

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)	PAGE 15 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Mr. David Conklin

Mailing Address 7 Fairmount Ave

City State Zip Code
Jamestown NY 14701

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

Name of Employer Occupation
Jamestown Business College President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 11 / 2015

Transaction ID : SA11Ai-CN51272

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Brian Davis

Mailing Address 2960 Deborah Dr

City State Zip Code
Monroe LA 71201

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

Name of Employer Occupation
Coast Professional Inc Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 27 / 2015

Transaction ID : SA11Ai-CN51063

Amount of Each Receipt this Period
2500

C. Full Name (Last, First, Middle Initial)
Sara Dial

Mailing Address 6404 E Gainsborough Rd

City State Zip Code
Scottsdale AZ 85251

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

Name of Employer Occupation
Self-Employed Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 27 / 2015

Transaction ID : SA11Ai-CN51068

Amount of Each Receipt this Period
500

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

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

4000.00

**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 16 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Dennis Joseph Doyle

Mailing Address 9924 Dell Rd

City: Eden Prairie State: MN Zip Code: 55347-3523

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

Name of Employer: Welsh Companies Inc Occupation: President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 2000

Date of Receipt: 04 / 17 / 2015

Transaction ID : SA11Ai-CN51045

Amount of Each Receipt this Period: 2000

B. Full Name (Last, First, Middle Initial)
Mr. Dennis Joseph Doyle

Mailing Address 9924 Dell Rd

City: Eden Prairie State: MN Zip Code: 55347-3523

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

Name of Employer: Welsh Companies Inc Occupation: President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 3000

Date of Receipt: 06 / 29 / 2015

Transaction ID : SA11Ai-CN51337

Amount of Each Receipt this Period: 1000

C. Full Name (Last, First, Middle Initial)
Mr. Dennis Joseph Doyle

Mailing Address 9924 Dell Rd

City: Eden Prairie State: MN Zip Code: 55347-3523

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

Name of Employer: Welsh Companies Inc Occupation: President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 2700

Date of Receipt: 06 / 30 / 2015

Transaction ID : SA11Ai-CN51551

Amount of Each Receipt this Period: -300

Redesignated to General 2016

[MEMO ITEM]
Redesignated

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)	PAGE 17 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Dennis Joseph Doyle

Mailing Address 9924 Dell Rd

City Eden Prairie State MN Zip Code 55347-3523

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

Name of Employer Welsh Companies Inc Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **3000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : SA11Ai-CN51552

Amount of Each Receipt this Period
300

Redesignated from Primary 2016

[MEMO ITEM]
Redesignation

B. Full Name (Last, First, Middle Initial)
Mr. David Ray Frauenshuh

Mailing Address 6401 Indian Hills Rd

City Edina State MN Zip Code 55439

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

Name of Employer Frauenshuh Companies Occupation CEO/Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 03 / 2015

Transaction ID : SA11Ai-CN51120

Amount of Each Receipt this Period
2500

C. Full Name (Last, First, Middle Initial)
Mr. Charles H Gerhardt III

Mailing Address 700 Walnut St Ste 450

City Cincinnati State OH Zip Code 45202

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

Name of Employer Government Strategies Group Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **757.09**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 13 / 2015

Transaction ID : SA11Ai-CN51113

Amount of Each Receipt this Period
757.09

In-Kind Received Food and Beverage

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

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

3257.09

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

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

FOR LINE NUMBER: PAGE 18 OF 122
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Charles H Gerhardt III

Mailing Address 700 Walnut St
Ste 450

City State Zip Code
Cincinnati OH 45202

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

Name of Employer Occupation
Government Strategies Group President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2457.09

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 12 / 2015

Transaction ID : SA11Ai-CN51112

Amount of Each Receipt this Period
1700

B. Full Name (Last, First, Middle Initial)
Mr. John Kevin Gilligan

Mailing Address 5804 Crescent Ter

City State Zip Code
Edina MN 55436

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

Name of Employer Occupation
Capella Education Company CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 29 / 2015

Transaction ID : SA11Ai-CN51464

Amount of Each Receipt this Period
2700

C. Full Name (Last, First, Middle Initial)
Mr. David Goldberger

Mailing Address 269 Mountainview Dr

City State Zip Code
Monroe NY 10950

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

Name of Employer Occupation
Azar Decorating President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5200

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2015

Transaction ID : SA11Ai-CN51124

Amount of Each Receipt this Period
5200

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

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

9600.00

**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 19 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Mr. David Goldberger

Mailing Address 269 Mountainview Dr

City State Zip Code
Monroe NY 10950

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

Name of Employer Occupation
Azar Decorating President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 09 / 2015

Transaction ID : SA11Ai-CN51553

Amount of Each Receipt this Period
-2500

Redesignated to General 2016

[MEMO ITEM]
Redesignated

B. Full Name (Last, First, Middle Initial)
Mr. David Goldberger

Mailing Address 269 Mountainview Dr

City State Zip Code
Monroe NY 10950

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

Name of Employer Occupation
Azar Decorating President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5200

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 09 / 2015

Transaction ID : SA11Ai-CN51554

Amount of Each Receipt this Period
2500

Redesignated from Primary 2016

[MEMO ITEM]
Redesignation

C. Full Name (Last, First, Middle Initial)
Steven Gordon

Mailing Address 1801 Briar Ridge Ct

City State Zip Code
Mc Lean VA 22101

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

Name of Employer Occupation
Total Spectrum Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 27 / 2015

Transaction ID : SA11Ai-CN51047

Amount of Each Receipt this Period
500

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

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

500.00

**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 20 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Roberta Greenberg

Mailing Address 84 Dusky Dr

City New Rochelle State NY Zip Code 10804

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

Name of Employer Occupation
Monroe College Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2015

Transaction ID : SA11Ai-CN51133

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Russell Hagen

Mailing Address 100 2nd St SE
Apartment #1004

City Minneapolis State MN Zip Code 55414-2129

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

Name of Employer Occupation
Data Recognition Corporation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 23 / 2015

Transaction ID : SA11Ai-CN51370

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Mr. Michael R Hayden

Mailing Address 6704 Parkwood Ln

City Edina State MN Zip Code 55436

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

Name of Employer Occupation
Retired Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 22 / 2015

Transaction ID : SA11Ai-CN51330

Amount of Each Receipt this Period
5400

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

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

7400.00

**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 21 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Michael R Hayden

Mailing Address 6704 Parkwood Ln

City Edina State MN Zip Code 55436

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2700**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 23 / 2015

Transaction ID : SA11Ai-CN51555

Amount of Each Receipt this Period
-2700
 Redesignated to General 2016

[MEMO ITEM]
Redesignated

B. Full Name (Last, First, Middle Initial)
Mr. Michael R Hayden

Mailing Address 6704 Parkwood Ln

City Edina State MN Zip Code 55436

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 23 / 2015

Transaction ID : SA11Ai-CN51556

Amount of Each Receipt this Period
2700
 Redesignated from Primary 2016

[MEMO ITEM]
Redesignation

C. Full Name (Last, First, Middle Initial)
Mr. Scott M Henderson

Mailing Address 10548 Secretariat Run

City Union State KY Zip Code 41091

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

Name of Employer Kroger Occupation Senior Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 17 / 2015

Transaction ID : SA11Ai-CN51026

Amount of Each Receipt this Period
500

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

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

500.00

**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 22 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Chanie Horowitz

Mailing Address 13 Da Weider Blvd
Apt 301

City State Zip Code
Monroe NY 10950

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 08 / 2015

Transaction ID : SA11Ai-CN51128

Amount of Each Receipt this Period
3500

B. Full Name (Last, First, Middle Initial)
Chanie Horowitz

Mailing Address 13 Da Weider Blvd
Apt 301

City State Zip Code
Monroe NY 10950

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 09 / 2015

Transaction ID : SA11Ai-CN51557

Amount of Each Receipt this Period
-800

Redesignated to General 2016

[MEMO ITEM]
Redesignated

C. Full Name (Last, First, Middle Initial)
Chanie Horowitz

Mailing Address 13 Da Weider Blvd
Apt 301

City State Zip Code
Monroe NY 10950

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 09 / 2015

Transaction ID : SA11Ai-CN51558

Amount of Each Receipt this Period
800

Redesignated from Primary 2016

[MEMO ITEM]
Redesignation

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

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

3500.00

**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 23 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. Saginaw Chippewa Indian Tribe		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 30 / 2015	
Mailing Address 7070 E Broadway		Transaction ID : SA11Ai-CN51488	
City Mount Pleasant	State MI	Zip Code 48858	Amount of Each Receipt this Period _____ 2000
FEC ID number of contributing federal political committee.		C	
Name of Employer Native American Tribe	Occupation Native American Tribe		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2000		

Full Name (Last, First, Middle Initial) B. Mr. Donald G. Isaacson		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 07 / 2015	
Mailing Address 501 W Gleneagles Dr		Transaction ID : SA11Ai-CN51089	
City Phoenix	State AZ	Zip Code 85023	Amount of Each Receipt this Period _____ 500
FEC ID number of contributing federal political committee.		C	
Name of Employer Isaacson & Moore PC	Occupation Attorney		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500		

Full Name (Last, First, Middle Initial) C. Executive Alfred Abner Iversen		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 27 / 2015	
Mailing Address PO Box 141		Transaction ID : SA11Ai-CN51059	
City Navarre	State MN	Zip Code 55392	Amount of Each Receipt this Period _____ 1000
FEC ID number of contributing federal political committee.		C	
Name of Employer PMT Corp	Occupation Executive		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000		

SUBTOTAL of Receipts This Page (optional).....	_____ 3500.00
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: (check only one)	PAGE 24 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Gordon A Jensen

Mailing Address 9260 W Norma Trl

City State Zip Code
Sioux Falls SD 57106

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

Name of Employer Occupation
Livingston International Inc Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : SA11Ai-CN51505

Amount of Each Receipt this Period
300

B. Full Name (Last, First, Middle Initial)
Marc Jerome

Mailing Address 224 Lincoln St

City State Zip Code
Englewood NJ 07631

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

Name of Employer Occupation
Monroe College Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 08 / 2015

Transaction ID : SA11Ai-CN51139

Amount of Each Receipt this Period
2500

C. Full Name (Last, First, Middle Initial)
Mr. Stephen J Jerome

Mailing Address 2501 Jerome Ave

City State Zip Code
Bronx NY 10468

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

Name of Employer Occupation
Monroe College President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 08 / 2015

Transaction ID : SA11Ai-CN51134

Amount of Each Receipt this Period
2500

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: (check only one)	PAGE 25 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Henny Katz

Mailing Address 237 Mountainview Dr

City Monroe	State NY	Zip Code 10950
----------------	-------------	-------------------

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

Name of Employer Unique Service	Occupation Executive
------------------------------------	-------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5200

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2015

Transaction ID : SA11Ai-CN51125

Amount of Each Receipt this Period
5200

B. Full Name (Last, First, Middle Initial)
Henny Katz

Mailing Address 237 Mountainview Dr

City Monroe	State NY	Zip Code 10950
----------------	-------------	-------------------

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

Name of Employer Unique Service	Occupation Executive
------------------------------------	-------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 09 / 2015

Transaction ID : SA11Ai-CN51559

Amount of Each Receipt this Period
-2500

Redesignated to General 2016

[MEMO ITEM]
Redesignated

C. Full Name (Last, First, Middle Initial)
Henny Katz

Mailing Address 237 Mountainview Dr

City Monroe	State NY	Zip Code 10950
----------------	-------------	-------------------

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

Name of Employer Unique Service	Occupation Executive
------------------------------------	-------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5200

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 09 / 2015

Transaction ID : SA11Ai-CN51560

Amount of Each Receipt this Period
2500

Redesignated from Primary 2016

[MEMO ITEM]
Redesignation

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

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

5200.00

**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 26 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kline for Congress

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

Mailing Address 8 Toltchav Way 203

City State Zip Code
Monroe NY 10950

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

Name of Employer Occupation
Hewbrew Union College Professor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5200

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2015

Transaction ID : SA11Ai-CN51126

Amount of Each Receipt this Period
5200

B. Full Name (Last, First, Middle Initial)
David Kaufman

Mailing Address 8 Toltchav Way 203

City State Zip Code
Monroe NY 10950

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

Name of Employer Occupation
Hewbrew Union College Professor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 09 / 2015

Transaction ID : SA11Ai-CN51561

Amount of Each Receipt this Period
-2500

Redesignated to General 2016

[MEMO ITEM]
Redesignated

C. Full Name (Last, First, Middle Initial)
David Kaufman

Mailing Address 8 Toltchav Way 203

City State Zip Code
Monroe NY 10950

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

Name of Employer Occupation
Hewbrew Union College Professor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5200

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 09 / 2015

Transaction ID : SA11Ai-CN51562

Amount of Each Receipt this Period
2500

Redesignated from Primary 2016

[MEMO ITEM]
Redesignation

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

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

5200.00

**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 27 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Robin Norgaard Kelleher

Mailing Address 800 Bluebill Bay

City Burnsville State MN Zip Code 55306

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

Name of Employer Seaton Beck & Peters PA Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 23 / 2015

Transaction ID : SA11Ai-CN51371

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Peter Kinney

Mailing Address 27 Oaks Rd E

City St Paul State MN Zip Code 55127-2527

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

Name of Employer Quest Engineering Inc Occupation Engineering

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 11 / 2015

Transaction ID : SA11Ai-CN51304

Amount of Each Receipt this Period
300

C. Full Name (Last, First, Middle Initial)
Mr. Victor F Klatt

Mailing Address 9020 Advantage Ct

City Burke State VA Zip Code 22015

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

Name of Employer Penn Hill Group Occupation Principal

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 27 / 2015

Transaction ID : SA11Ai-CN51062

Amount of Each Receipt this Period
1500

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

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

2050.00

**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 122
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Victor F Klatt

Mailing Address 9020 Advantage Ct

City State Zip Code
Burke VA 22015

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

Name of Employer Occupation
Penn Hill Group Principal

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 08 / 2015

Transaction ID : SA11Ai-CN51142

Amount of Each Receipt this Period
1200

B. Full Name (Last, First, Middle Initial)
Mr. Victor F Klatt

Mailing Address 9020 Advantage Ct

City State Zip Code
Burke VA 22015

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

Name of Employer Occupation
Penn Hill Group Principal

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 08 / 2015

Transaction ID : SA11Ai-CN51143

Amount of Each Receipt this Period
300

C. Full Name (Last, First, Middle Initial)
Mrs. Esther P Klein

Mailing Address 30 Van Buren Dr
Apt 201

City State Zip Code
Monroe NY 10950

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

Name of Employer Occupation
C&A Marketing Investor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5200

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 08 / 2015

Transaction ID : SA11Ai-CN51127

Amount of Each Receipt this Period
5200

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

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

6700.00

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

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

FOR LINE NUMBER: PAGE 29 OF 122
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Mrs. Esther P Klein

Mailing Address 30 Van Buren Dr
Apt 201

City State Zip Code
Monroe NY 10950

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

Name of Employer Occupation
C&A Marketing Investor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 09 / 2015

Transaction ID : SA11Ai-CN51563

Amount of Each Receipt this Period
-2500

Redesignated to General 2016

[MEMO ITEM]
Redesignated

B. Full Name (Last, First, Middle Initial)
Mrs. Esther P Klein

Mailing Address 30 Van Buren Dr
Apt 201

City State Zip Code
Monroe NY 10950

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

Name of Employer Occupation
C&A Marketing Investor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5200

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 09 / 2015

Transaction ID : SA11Ai-CN51564

Amount of Each Receipt this Period
2500

Redesignated from Primary 2016

[MEMO ITEM]
Redesignation

C. Full Name (Last, First, Middle Initial)
Steve Knuth

Mailing Address 887 Highlander Trl

City State Zip Code
Hudson WI 54016

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

Name of Employer Occupation
Public Affairs Company President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 26 / 2015

Transaction ID : SA11Ai-CN51333

Amount of Each Receipt this Period
1000

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: (check only one)	PAGE 30 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Joel J Kunza

Mailing Address 58 Monarch Way

City Saint Paul State MN Zip Code 55127

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

Name of Employer Allegience Fitness Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 27 / 2015

Transaction ID : SA11Ai-CN51061

Amount of Each Receipt this Period
2500

B. Full Name (Last, First, Middle Initial)
Stephen Lawrence

Mailing Address 860 Bench St

City Red Wing State MN Zip Code 55066-9502

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

Name of Employer Lawrence Transportation Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 11 / 2015

Transaction ID : SA11Ai-CN51271

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Mr. Ivan Londa

Mailing Address 860 Fifth Ave

City New York State NY Zip Code 10065

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

Name of Employer New York Career Insitute Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 08 / 2015

Transaction ID : SA11Ai-CN51129

Amount of Each Receipt this Period
1250

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

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

4250.00

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

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

FOR LINE NUMBER: PAGE 31 OF 122
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Mr. H. William Lurton

Mailing Address **PO Box 408**

City **Long Lake** State **MN** Zip Code **55356-0408**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y
06 / 19 / 2015

Transaction ID : SA11Ai-CN51420

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Whitney MacMillan Jr

Mailing Address **PO Box 5628**

City **Minneapolis** State **MN** Zip Code **55440-5628**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y
06 / 23 / 2015

Transaction ID : SA11Ai-CN51375

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Herbert Madalin

Mailing Address **5026 Wooldridge Rd**

City **Corpus Christi** State **TX** Zip Code **78413**

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

Name of Employer **Self** Occupation **Physician - Surgeon**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y Y
06 / 19 / 2015

Transaction ID : SA11Ai-CN51422

Amount of Each Receipt this Period
200

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 Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Wendell Maddox

Mailing Address 4415 Avondale St

City State Zip Code
Minnetonka MN 55345

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

Name of Employer Occupation
Retired Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 29 / 2015

Transaction ID : SA11Ai-CN51461

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Salt River Pima Maricopa Indian Community

Mailing Address 10005 Osborn Rd E

City State Zip Code
Scottsdale AZ 85256

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

Name of Employer Occupation
Native American Tribe Native American Tribe

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 03 / 2015

Transaction ID : SA11Ai-CN51121

Amount of Each Receipt this Period
2700

C. Full Name (Last, First, Middle Initial)
Dilek Marsh

Mailing Address 1079 W Amanda Ln

City State Zip Code
Tempe AZ 85284

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

Name of Employer Occupation
Grand Canyon University Exec V.P.

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 27 / 2015

Transaction ID : SA11Ai-CN51069

Amount of Each Receipt this Period
500

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

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

3700.00

**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 33 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Eric J Martin

Mailing Address 30 The Preserve

City Woodbury State NY Zip Code 11797

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2015

Transaction ID : SA11Ai-CN51130

Amount of Each Receipt this Period
2500

B. Full Name (Last, First, Middle Initial)
Mr. William G Martin II

Mailing Address 136 Deerfield Cir

City Bryan State OH Zip Code 43506

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

Name of Employer Husch Blackwell Sanders LLP Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 12 / 2015

Transaction ID : SA11Ai-CN51109

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Mike McFadden

Mailing Address 25 Sunnyside Ln

City Sunfish Lake State MN Zip Code 55118

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

Name of Employer PFC Occupation Advisor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 02 / 2015

Transaction ID : SA11Ai-CN51117

Amount of Each Receipt this Period
1500

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

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

4500.00

**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 34 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Mr. W Rodney McMullen

Mailing Address 7338 Waterpint Ln

City State Zip Code
Cincinnati OH 45255

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

Name of Employer Occupation
Kroger Senior Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 17 / 2015

Transaction ID : SA11Ai-CN51023

Amount of Each Receipt this Period
1500

B. Full Name (Last, First, Middle Initial)
Mr. Steve J Megerle

Mailing Address 421 Madison Ave

City State Zip Code
Covington KY 41011

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

Name of Employer Occupation
Megerle Law Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 12 / 2015

Transaction ID : SA11Ai-CN51111

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
W Stan Meyer

Mailing Address 10627 N Aberdeen Rd

City State Zip Code
Scottsdale AZ 85254

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

Name of Employer Occupation
GCU COO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 27 / 2015

Transaction ID : SA11Ai-CN51072

Amount of Each Receipt this Period
500

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

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

2500.00

**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 35 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Peter Jon Mihajlov

Mailing Address 5032 France Ave S

City Minneapolis State MN Zip Code 55410

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

Name of Employer Parasole Restaurant Holdings Inc. Occupation Restaurant Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 23 / 2015

Transaction ID : SA11Ai-CN51367

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Mr. Joe Mildenhall

Mailing Address 2415 E Desert Willow Dr

City Phoenix State AZ Zip Code 85048

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

Name of Employer GCU Occupation CIO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 27 / 2015

Transaction ID : SA11Ai-CN51071

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Morongo Band Of Mission Indians

Mailing Address 11581 Potrero Rd

City Banning State CA Zip Code 92220

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

Name of Employer Native American Tribe Occupation Native American Tribe

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 27 / 2015

Transaction ID : SA11Ai-CN51067

Amount of Each Receipt this Period
1500

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

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

2500.00

**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 36 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Ms. Susan C Newton

Mailing Address **2 Biltmore Estate**
Unit 313

City **Phoenix** State **AZ** Zip Code **85016**

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

Name of Employer **Yum** Occupation **Manager**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 27 / 2015

Transaction ID : SA11Ai-CN51060

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Mr. Alexander G Nock

Mailing Address **748 9th St SE**

City **Washington** State **DC** Zip Code **20003**

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

Name of Employer **Penn Hill Group** Occupation **Principal**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 08 / 2015

Transaction ID : SA11Ai-CN51145

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Pechanga Band Of Luiseno Indian Tribe

Mailing Address **PO Box 1477**

City **Temecula** State **CA** Zip Code **92593**

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

Name of Employer **Native American Tribe** Occupation **Native American Tribe**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2700**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : SA11Ai-CN51486

Amount of Each Receipt this Period
2700

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

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

4700.00

**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 37 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Donald G Oren

Mailing Address 3105 Sandy Hook Dr

City State Zip Code
Roseville MN 55113

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

Name of Employer Occupation
DART Transit President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015

Transaction ID : SA11Ai-CN51384

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Match-E-Be-Nash- She-Wish Band Of Pattawatomi Indians

Mailing Address PO Box 218

City State Zip Code
Dorr MI 49323

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

Name of Employer Occupation
Native American Tribe Native American Tribe

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11Ai-CN51487

Amount of Each Receipt this Period
2700

C. Full Name (Last, First, Middle Initial)
Danica Petroschus

Mailing Address 243 8th St NE

City State Zip Code
Washington DC 20002

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

Name of Employer Occupation
Penn Hill Group Principal

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2015

Transaction ID : SA11Ai-CN51147

Amount of Each Receipt this Period
1000

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

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

4700.00

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

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

FOR LINE NUMBER: PAGE 38 OF 122
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Mr. D'arcy George Philps

Mailing Address 1801 Danville St N

City State Zip Code
Arlington VA 22201

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

Name of Employer Occupation
Penn Hill Group Principal

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 08 / 2015

Transaction ID : SA11Ai-CN51146

Amount of Each Receipt this Period
1500

B. Full Name (Last, First, Middle Initial)
Dr. David W. Polly Jr

Mailing Address 7405 Hyde Park Dr

City State Zip Code
Edina MN 55439

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

Name of Employer Occupation
University of Minnesota Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 20 / 2015

Transaction ID : SA11Ai-CN51016

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Pokagon Band Of Potawatomi Indians

Mailing Address 58620 Sink Rd

City State Zip Code
Dowagiac MI 49047

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

Name of Employer Occupation
Native American Tribe Native American Tribe

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : SA11Ai-CN51477

Amount of Each Receipt this Period
2700

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

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

4700.00

**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 39 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Tyson Redpath

Mailing Address 3626 Brandywine St NW

City Washington State DC Zip Code 20008

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

Name of Employer The Russell Group Occupation Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 12 / 2015

Transaction ID : SA11Ai-CN51110

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Mr. David J Rhodes

Mailing Address 209 E 23rd St

City New York State NY Zip Code 10010

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

Name of Employer School Of Visual Arts Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2015

Transaction ID : SA11Ai-CN51131

Amount of Each Receipt this Period
2500

C. Full Name (Last, First, Middle Initial)
Brian Roberts

Mailing Address 127 E Royal Palm Rd

City Phoenix State AZ Zip Code 85020

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

Name of Employer GCU Occupation General Counsel

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 23 / 2015

Transaction ID : SA11Ai-CN51037

Amount of Each Receipt this Period
500

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

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

3500.00

**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 40 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Mr. William Charles Rosacker

Mailing Address 14915 Carriage Pl Dr

City Burnsville State MN Zip Code 55306-5015

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

Name of Employer United Bankers Bank Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 23 / 2015

Transaction ID : SA11Ai-CN51368

Amount of Each Receipt this Period
400

B. Full Name (Last, First, Middle Initial)
Paul Francis Ryan

Mailing Address 1367 Michelle Dr

City Eagan State MN Zip Code 55123

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

Name of Employer Sights On Service Inc Occupation Maket Research

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 11 / 2015

Transaction ID : SA11Ai-CN51150

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Michael Schern

Mailing Address 1640 S Stapley Dr Ste 132

City Mesa State AZ Zip Code 85204

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

Name of Employer Schern Richardson Finter Decker Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **3000**

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 27 / 2015

Transaction ID : SA11Ai-CN51070

Amount of Each Receipt this Period
3000

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

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

3650.00

**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 41 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Michael Schern

Mailing Address 1640 S Stapley Dr Ste 132

City: Mesa State: AZ Zip Code: 85204

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

Name of Employer: Schern Richardson Finter Decker Occupation: Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: **2700**

Date of Receipt: **04 / 28 / 2015**

Transaction ID : SA11Ai-CN51103

Amount of Each Receipt this Period: **-300**

Redesignated to General 2016

[MEMO ITEM]
Redesignated

B. Full Name (Last, First, Middle Initial)
Michael Schern

Mailing Address 1640 S Stapley Dr Ste 132

City: Mesa State: AZ Zip Code: 85204

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

Name of Employer: Schern Richardson Finter Decker Occupation: Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: **3000**

Date of Receipt: **04 / 28 / 2015**

Transaction ID : SA11Ai-CN51104

Amount of Each Receipt this Period: **300**

Redesignated from Primary 2016

[MEMO ITEM]
Redesignation

C. Full Name (Last, First, Middle Initial)
Mr. J Michael Schlotman

Mailing Address 1014 Vine St
7th Floor

City: Cincinnati State: OH Zip Code: 45202

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

Name of Employer: Kroger Occupation: Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: **1000**

Date of Receipt: **04 / 17 / 2015**

Transaction ID : SA11Ai-CN51025

Amount of Each Receipt this Period: **1000**

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: (check only one)	PAGE 42 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Todd R Schnuck

Mailing Address 9752 Litzsinger Rd

City Saint Louis State MO Zip Code 63124

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

Name of Employer Schnuck Markets Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 21 / 2015

Transaction ID : SA11Ai-CN51032

Amount of Each Receipt this Period
2500

B. Full Name (Last, First, Middle Initial)
Mr. Douglas Paul Seaton

Mailing Address 4306 Sunnyside Rd

City Edina State MN Zip Code 55424

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

Name of Employer Seaton Beck & Peters P.A. Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 23 / 2015

Transaction ID : SA11Ai-CN51369

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Ms. Regina Elizabeth Sherman

Mailing Address 1862 Birch Lake Ave

City White Bear Lake State MN Zip Code 55110-3354

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **275**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 08 / 2015

Transaction ID : SA11Ai-CN51123

Amount of Each Receipt this Period
25

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

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

3025.00

**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 43 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Ms. Regina Elizabeth Sherman

Mailing Address 1862 Birch Lake Ave

City State Zip Code
White Bear Lake MN 55110-3354

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 09 / 2015

Transaction ID : SA11Ai-CN51173

Amount of Each Receipt this Period
25

B. Full Name (Last, First, Middle Initial)
Gregg D Sjoquist

Mailing Address 1936 Harbour Inlet Dr

City State Zip Code
Fort Lauderdale FL 33316

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

Name of Employer Occupation
The WASIE Foundation President & CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1200

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 17 / 2015

Transaction ID : SA11Ai-CN51021

Amount of Each Receipt this Period
200

C. Full Name (Last, First, Middle Initial)
Mr. Peter V Sperling

Mailing Address 5290 Exeter Blvd E

City State Zip Code
Phoenix AZ 85018

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

Name of Employer Occupation
Apollo Education Group Chairman

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 05 / 2015

Transaction ID : SA11Ai-CN51088

Amount of Each Receipt this Period
5000

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

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

5225.00

**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 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Peter V Sperling

Mailing Address 5290 Exeter Blvd E

City Phoenix	State AZ	Zip Code 85018
-----------------	-------------	-------------------

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

Name of Employer Apollo Education Group	Occupation Chairman
--	------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 06 / 2015

Transaction ID : SA11Ai-CN51105

Amount of Each Receipt this Period
-2300

Redesignated to General 2016

[MEMO ITEM]
Redesignated

B. Full Name (Last, First, Middle Initial)
Mr. Peter V Sperling

Mailing Address 5290 Exeter Blvd E

City Phoenix	State AZ	Zip Code 85018
-----------------	-------------	-------------------

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

Name of Employer Apollo Education Group	Occupation Chairman
--	------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 06 / 2015

Transaction ID : SA11Ai-CN51106

Amount of Each Receipt this Period
2300

Redesignated from Primary 2016

[MEMO ITEM]
Redesignation

C. Full Name (Last, First, Middle Initial)
Mrs. Marcie Stein

Mailing Address 57 Maple Hill Rd

City Glencoe	State IL	Zip Code 60022
-----------------	-------------	-------------------

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

Name of Employer Homemaker	Occupation Homemaker
-------------------------------	-------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : SA11Ai-CN51497

Amount of Each Receipt this Period
5000

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: (check only one)	PAGE 45 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Mrs. Marcie Stein

Mailing Address 57 Maple Hill Rd

City: Glencoe State: IL Zip Code: 60022

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

Name of Employer: Homemaker Occupation: Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: **2700**

Date of Receipt: 06 / 30 / 2015

Transaction ID : SA11Ai-CN51565

Amount of Each Receipt this Period: **-2300**

Redesignated to General 2016

[MEMO ITEM]
Redesignated

B. Full Name (Last, First, Middle Initial)
Mrs. Marcie Stein

Mailing Address 57 Maple Hill Rd

City: Glencoe State: IL Zip Code: 60022

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

Name of Employer: Homemaker Occupation: Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: **5000**

Date of Receipt: 06 / 30 / 2015

Transaction ID : SA11Ai-CN51566

Amount of Each Receipt this Period: **2300**

Redesignated from Primary 2016

[MEMO ITEM]
Redesignation

C. Full Name (Last, First, Middle Initial)
Donna Stelling-Gurnett

Mailing Address 131 Hand Hill Rd W

City: East Nassau State: NY Zip Code: 12062

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

Name of Employer: APC Occupation: Executive Director

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: **500**

Date of Receipt: 06 / 11 / 2015

Transaction ID : SA11Ai-CN51273

Amount of Each Receipt this Period: **500**

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

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

500.00

**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 46 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kline for Congress

A. Ms. Cindy Hasenzahl Susienka
 Full Name (Last, First, Middle Initial)
 Mailing Address 4925 E Lake Rd
 City Burt State NY Zip Code 14028
 FEC ID number of contributing federal political committee. C
 Name of Employer Homemaker Occupation Homemaker
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2015
Transaction ID : SA11Ai-CN51135
 Amount of Each Receipt this Period
 1000

B. Mr. Ernest H Sutkowski
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 Baldwin Rd
 City Saddle River State NJ Zip Code 07458
 FEC ID number of contributing federal political committee. C
 Name of Employer Westchester Business Institute Occupation Educator
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 1500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2015
Transaction ID : SA11Ai-CN51132
 Amount of Each Receipt this Period
 1500

C. Mr. Brian L Swartz
 Full Name (Last, First, Middle Initial)
 Mailing Address 8900 65th St N
 City Paradise Valley State AZ Zip Code 85253
 FEC ID number of contributing federal political committee. C
 Name of Employer Apollo Group Inc. Occupation CFO
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 27 / 2015
Transaction ID : SA11Ai-CN51065
 Amount of Each Receipt this Period
 1000

SUBTOTAL of Receipts This Page (optional).....	3500.00
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: (check only one)	PAGE 47 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Colette Temmink

Mailing Address 10402 N 43rd Pl

City Phoenix State AZ Zip Code 85028

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

Name of Employer Apollo Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 27 / 2015

Transaction ID : SA11Ai-CN51066

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Mr. Joseph C Weis

Mailing Address 2227 7th St NW

City Rochester State MN Zip Code 55901-0206

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

Name of Employer Weis Builders Inc Occupation Chairman of Board

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 23 / 2015

Transaction ID : SA11Ai-CN51372

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Mr. David A Whaley

Mailing Address 3018 Alpine Ter

City Cincinnati State OH Zip Code 45208

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

Name of Employer Dinsmore And Shohl Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 17 / 2015

Transaction ID : SA11Ai-CN51029

Amount of Each Receipt this Period
500

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 48 OF 122
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Mr. William S White

Mailing Address 13050 Old Bilmar Ln

City State Zip Code
Grand Blanc MI 48439

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

Name of Employer Occupation
Charles Stuart Mott Foundation Chairperson

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11Ai-CN51485

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Janis Lee Wilson

Mailing Address 220 Wexford Heights Dr

City State Zip Code
New Brighton MN 55112

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 19 / 2015

Transaction ID : SA11Ai-CN51450

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Yocha Dehe Wintun Nation

Mailing Address PO Box 18

City State Zip Code
Brooks CA 95606

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

Name of Employer Occupation
Native American Tribe Native American Tribe

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11Ai-CN51476

Amount of Each Receipt this Period
2700

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

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

3700.00

**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 49 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
John Robert Woerner

Mailing Address 11381 Landing Rd

City: Eden Prairie State: MN Zip Code: 55347

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

Name of Employer: Ameriprise Financial Occupation: Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: **250**

Date of Receipt: 06 / 11 / 2015

Transaction ID : SA11Ai-CN51314

Amount of Each Receipt this Period: **250**

B. Full Name (Last, First, Middle Initial)
Mr. John E Wren

Mailing Address 2261 Northridge Ave Cir N

City: Stillwater State: MN Zip Code: 55082

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

Name of Employer: Lakeville Motor Express Occupation: Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: **4000**

Date of Receipt: 06 / 30 / 2015

Transaction ID : SA11Ai-CN51498

Amount of Each Receipt this Period: **4000**

C. Full Name (Last, First, Middle Initial)
Mr. John E Wren

Mailing Address 2261 Northridge Ave Cir N

City: Stillwater State: MN Zip Code: 55082

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

Name of Employer: Lakeville Motor Express Occupation: Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: **2700**

Date of Receipt: 06 / 30 / 2015

Transaction ID : SA11Ai-CN51567

Amount of Each Receipt this Period: **-1300**

Redesignated to General 2016

[MEMO ITEM]
Redesignated

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

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

4250.00

**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 50 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Mr. John E Wren

Mailing Address 2261 Northridge Ave Cir N

City State Zip Code
Stillwater MN 55082

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

Name of Employer Occupation
Lakeville Motor Express Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 30 2015

Transaction ID : SA11Ai-CN51568

Amount of Each Receipt this Period
1300

Redesignated from Primary 2016

[MEMO ITEM]
Redesignation

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 M / D D D / Y Y 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 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).....

0.00

167657.09

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

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

FOR LINE NUMBER: PAGE 51 OF 122
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
ACRE PAC

Mailing Address 4301 Wilson Blvd

City State Zip Code
Arlington VA 22203

FEC ID number of contributing federal political committee. **C** C00002972

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : SA11C-CN51491

Amount of Each Receipt this Period
2500

B. Full Name (Last, First, Middle Initial)
AK Steel Corp PAC

Mailing Address 9227 Centre Point Dr

City State Zip Code
West Chester OH 45069

FEC ID number of contributing federal political committee. **C** C00290973

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 21 / 2015

Transaction ID : SA11C-CN51034

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
American Benefits Council PAC

Mailing Address 1501 M St NW
Ste 600

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00153171

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : SA11C-CN51483

Amount of Each Receipt this Period
1500

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: (check only one)	PAGE 52 OF 122
	<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)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
American Council Of Life Insurers PAC

Mailing Address 101 Constitution Ave NW
Ste 700

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00147066

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3500

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 25 / 2015

Transaction ID : SA11C-CN51380

Amount of Each Receipt this Period
3500

B. Full Name (Last, First, Middle Initial)
American Seniors Housing Assn. PAC

Mailing Address 5225 Wisconsin Ave NW
Suite 502

City Washington State DC Zip Code 20015

FEC ID number of contributing federal political committee. **C** C00325332

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 25 / 2015

Transaction ID : SA11C-CN51379

Amount of Each Receipt this Period
5000

C. Full Name (Last, First, Middle Initial)
American Veterinary Medical Assn PAC

Mailing Address 1910 Sunderland PI NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00114132

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : SA11C-CN51494

Amount of Each Receipt this Period
2000

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

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

10500.00

**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 53 OF 122
	<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	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Ameriprise Financial Inc. PAC

Mailing Address 101 Constitution Ave NW
Suite 816 W.

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00414474**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
 M M / D D / Y Y Y Y Y
 05 / 29 / 2015

Transaction ID : SA11C-CN51116

Amount of Each Receipt this Period
2500

B. Full Name (Last, First, Middle Initial)
Apollo Education Group PAC

Mailing Address 4025 S Riverpoint Pkwy

City Phoenix State AZ Zip Code 85040

FEC ID number of contributing federal political committee. **C C00309781**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000

Date of Receipt
 M M / D D / Y Y Y Y Y
 05 / 07 / 2015

Transaction ID : SA11C-CN51091

Amount of Each Receipt this Period
5000

C. Full Name (Last, First, Middle Initial)
Apollo Education Group PAC

Mailing Address 4025 S Riverpoint Pkwy

City Phoenix State AZ Zip Code 85040

FEC ID number of contributing federal political committee. **C C00309781**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10000

Date of Receipt
 M M / D D / Y Y Y Y Y
 05 / 07 / 2015

Transaction ID : SA11C-CN51092

Amount of Each Receipt this Period
5000

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

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

12500.00

**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 54 OF 122
	<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	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Kline for Congress

A. Associated General Contractors PAC

Full Name (Last, First, Middle Initial)
Associated General Contractors PAC

Mailing Address 2300 Wilson Blvd
Ste 400

City Arlington State VA Zip Code 22201

FEC ID number of contributing federal political committee. **C** C00082917

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2015

Transaction ID : SA11C-CN51378

Amount of Each Receipt this Period
2500

B. Boeing PAC

Full Name (Last, First, Middle Initial)
Boeing PAC

Mailing Address 1200 Wilson Blvd

City Arlington State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2015

Transaction ID : SA11C-CN51377

Amount of Each Receipt this Period
1000

C. Bridgepoint Education Inc. PAC

Full Name (Last, First, Middle Initial)
Bridgepoint Education Inc. PAC

Mailing Address 13500 Evening Creek Dr N
Ste 600

City San Diego State CA Zip Code 92128

FEC ID number of contributing federal political committee. **C** C00478404

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
6000

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 11 / 2015

Transaction ID : SA11C-CN51268

Amount of Each Receipt this Period
1000

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

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

4500.00

**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 55 OF 122
	<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)
Kline for Congress

A. Capella Education Co PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 225 6th St 9th Floor S
 City Minneapolis State MN Zip Code 55402
 FEC ID number of contributing federal political committee. **C** C00486209
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 2000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 29 / 2015
Transaction ID : SA11C-CN51463
 Amount of Each Receipt this Period
 2000

B. Cintas Corp Partners PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 6800 Cintas Blvd
 City Mason State OH Zip Code 45040
 FEC ID number of contributing federal political committee. **C** C00449165
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 2000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 21 / 2015
Transaction ID : SA11C-CN51035
 Amount of Each Receipt this Period
 1000

C. Cray Inc Employee PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 241 18th St Ste 610
 City Arlington State VA Zip Code 22202
 FEC ID number of contributing federal political committee. **C** C00458547
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 11 / 2015
Transaction ID : SA11C-CN51269
 Amount of Each Receipt this Period
 1000

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

4000.00

**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 56 OF 122
	<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)
Kline for Congress

A. Express Scripts PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 New Jersey Ave. NW
 Suite 600
 City Washington State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C** C00365072
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 29 / 2015
Transaction ID : SA11C-CN51468
 Amount of Each Receipt this Period
 5000

B. Fifth Third Bancorp PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 550 E Walnut St
 City Columbus State OH Zip Code 43215
 FEC ID number of contributing federal political committee. **C** C00290502
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 12 / 2015
Transaction ID : SA11C-CN51108
 Amount of Each Receipt this Period
 1000

C. Financial Services Round Table PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 600 13th St NW
 Ste 400
 City Washington State DC Zip Code 20005
 FEC ID number of contributing federal political committee. **C** C00193177
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 21 / 2015
Transaction ID : SA11C-CN51031
 Amount of Each Receipt this Period
 1000

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

7000.00

**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 57 OF 122
	<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)
Kline for Congress

A. Financial Services Round Table PAC

Full Name (Last, First, Middle Initial)
Mailing Address 600 13th St NW
Ste 400

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00193177**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **3500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015

Transaction ID : SA11C-CN51383

Amount of Each Receipt this Period
 2500

B. Food PAC

Full Name (Last, First, Middle Initial)
Mailing Address 655 15th St NW
Suite 700

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00014555**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 17 / 2015

Transaction ID : SA11C-CN51027

Amount of Each Receipt this Period
 2500

C. Fraternity & Sorority PAC

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 3435

City Alexandria State VA Zip Code 22302

FEC ID number of contributing federal political committee. **C C00410068**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11C-CN51495

Amount of Each Receipt this Period
 1000

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 58 OF 122
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Kline for Congress

A. General Mills PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 General Mills Blvd
 City Minneapolis State MN Zip Code 55426
 FEC ID number of contributing federal political committee. **C** C00062646
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 2000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 16 / 2015
Transaction ID : SA11C-CN51324
 Amount of Each Receipt this Period
 1000

B. Grand Canyon Education Inc PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 3300 W Camelback Rd
 City Phoenix State AZ Zip Code 85017
 FEC ID number of contributing federal political committee. **C** C00536334
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 2500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 27 / 2015
Transaction ID : SA11C-CN51074
 Amount of Each Receipt this Period
 2500

C. Grand Canyon Education Inc PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 3300 W Camelback Rd
 City Phoenix State AZ Zip Code 85017
 FEC ID number of contributing federal political committee. **C** C00536334
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 5000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 27 / 2015
Transaction ID : SA11C-CN51075
 Amount of Each Receipt this Period
 2500

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 59 OF 122
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Home Depot PAC

Mailing Address 1155 F St NW
Ste 400

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00284885**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11C-CN51490

Amount of Each Receipt this Period
2500

B. Full Name (Last, First, Middle Initial)
IEC Pride PAC

Mailing Address 4401 Ford Ave
Suite 1100

City Alexandria State VA Zip Code 22302

FEC ID number of contributing federal political committee. **C C00332031**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11C-CN51492

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Insured Retirement Institute Inc PAC

Mailing Address 1101 New York Ave NW
Ste 825

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00490474**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11C-CN51493

Amount of Each Receipt this Period
1000

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

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

4500.00

**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 60 OF 122
	<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	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Investment Company Institute PAC

Mailing Address 1401 H Street NW
Apt 1200

City Washington State DC Zip Code 20005-2148

FEC ID number of contributing federal political committee. **C** C00105981

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 12 / 2015

Transaction ID : SA11C-CN51107

Amount of Each Receipt this Period
 1000

B. Full Name (Last, First, Middle Initial)
Investment Company Institute PAC

Mailing Address 1401 H Street NW
Apt 1200

City Washington State DC Zip Code 20005-2148

FEC ID number of contributing federal political committee. **C** C00105981

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 3000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 11 / 2015

Transaction ID : SA11C-CN51270

Amount of Each Receipt this Period
 1000

C. Full Name (Last, First, Middle Initial)
Investment Company Institute PAC

Mailing Address 1401 H Street NW
Apt 1200

City Washington State DC Zip Code 20005-2148

FEC ID number of contributing federal political committee. **C** C00105981

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 4000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11C-CN51482

Amount of Each Receipt this Period
 1000

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)	PAGE 61 OF 122
	<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	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Koch Industries Inc. PAC

Mailing Address 655 15th St NW
Suite 445

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00236489**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 29 / 2015

Transaction ID : SA11C-CN51467

Amount of Each Receipt this Period
2500

B. Full Name (Last, First, Middle Initial)
Kroger PAC

Mailing Address 1014 Vine St

City Cincinnati State OH Zip Code 45202

FEC ID number of contributing federal political committee. **C C00059238**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 17 / 2015

Transaction ID : SA11C-CN51024

Amount of Each Receipt this Period
5000

C. Full Name (Last, First, Middle Initial)
Land O'Lakes Inc. PAC

Mailing Address 245 Indian Trl S
PO Box 116

City Minneapolis State MN Zip Code 55440

FEC ID number of contributing federal political committee. **C C00009423**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11C-CN51474

Amount of Each Receipt this Period
2500

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

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

10000.00

**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 62 OF 122
	<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)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Lockheed Martin Employees' PAC

Mailing Address 2121 Crystal Dr
Suite 100

City State Zip Code
Arlington VA 22202

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 27 / 2015

Transaction ID : SA11C-CN51057

Amount of Each Receipt this Period
1000

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

Mailing Address 100 Washington Ave S
Suite 2200

City State Zip Code
Minneapolis MN 55401

FEC ID number of contributing federal political committee. **C** C00167916

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : SA11C-CN51475

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Macy's Inc Retail Issues Fund

Mailing Address 611 Olive St
Ste 1750

City State Zip Code
Saint Louis MO 63101

FEC ID number of contributing federal political committee. **C** C00144311

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 21 / 2015

Transaction ID : SA11C-CN51036

Amount of Each Receipt this Period
500

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

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

2500.00

**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 63 OF 122
	<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)
Kline for Congress

A. Massachusetts Mutual Life Insurance PAC

Full Name (Last, First, Middle Initial)
Mailing Address 601 Pennsylvania Ave NW
Suite 420
City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00118943**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 08 / 2015

Transaction ID : SA11C-CN51122

Amount of Each Receipt this Period
5000

B. McDonald's PAC

Full Name (Last, First, Middle Initial)
Mailing Address 2111 McDonald's Dr
City Oak Brook State IL Zip Code 60523

FEC ID number of contributing federal political committee. **C C00063164**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 15 / 2015

Transaction ID : SA11C-CN51096

Amount of Each Receipt this Period
4000

C. Metlife Inc Employees PAC - Federal Only

Full Name (Last, First, Middle Initial)
Mailing Address 1095 Avenue of the Americas
City New York State NY Zip Code 10036

FEC ID number of contributing federal political committee. **C C00493551**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : SA11C-CN51480

Amount of Each Receipt this Period
1000

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

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

10000.00

**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 64 OF 122
	<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)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Morgan Stanley PAC

Mailing Address 1585 Broadway Fl 9

City State Zip Code
New York NY 10036

FEC ID number of contributing federal political committee. **C C00337626**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 07 / 2015

Transaction ID : SA11C-CN51093

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Morgan Stanley PAC

Mailing Address 1585 Broadway Fl 9

City State Zip Code
New York NY 10036

FEC ID number of contributing federal political committee. **C C00337626**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11C-CN51473

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Motorcycle PAC Of Minnesota

Mailing Address 7160 Willow View Cv

City State Zip Code
Chanhassen MN 55317-7514

FEC ID number of contributing federal political committee. **C C00402768**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 23 / 2015

Transaction ID : SA11C-CN51366

Amount of Each Receipt this Period
2500

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

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

4500.00

**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 65 OF 122
	<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	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
NAIFA PAC

Mailing Address 2901 Telestar Ct

City Falls Church State VA Zip Code 22042

FEC ID number of contributing federal political committee. **C** C00005249

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 21 / 2015

Transaction ID : SA11C-CN51033

Amount of Each Receipt this Period
 2500

B. Full Name (Last, First, Middle Initial)
National Beer Wholesalers Association PAC

Mailing Address 1100 King St
Suite 600

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11C-CN51484

Amount of Each Receipt this Period
 2500

C. Full Name (Last, First, Middle Initial)
National Campaign

Mailing Address 1201 N Orange St
Ste 700

City Wilmington State DE Zip Code 19801

FEC ID number of contributing federal political committee. **C** C00563759

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 250

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 19 / 2015

Transaction ID : SA11C-CN51543

Amount of Each Receipt this Period
 250

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)	PAGE 66 OF 122
	<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	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
National Retail Federation PAC

Mailing Address 611 Olive St
Ste 1750

City Saint Louis State MO Zip Code 63101

FEC ID number of contributing federal political committee. **C** C00040329

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 12 / 2015

Transaction ID : SA11C-CN51114

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
National Roofing Contractors Association PAC

Mailing Address 324 4th St NE

City Washington State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C** C00244863

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 3500

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : SA11C-CN51478

Amount of Each Receipt this Period
2500

C. Full Name (Last, First, Middle Initial)
Nationwide Mutual Insurance Co PAC

Mailing Address One Nationwide Plaza

City Columbus State OH Zip Code 43215-2220

FEC ID number of contributing federal political committee. **C** C00406215

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : SA11C-CN51481

Amount of Each Receipt this Period
1000

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

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

4500.00

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

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

FOR LINE NUMBER: PAGE 67 OF 122
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
New York Life Insurance Co PAC

Mailing Address 51 Madison Ave Room 1109

City State Zip Code
New York NY 10010

FEC ID number of contributing federal political committee. **C** C00158881

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11C-CN51471

Amount of Each Receipt this Period
5000

B. Full Name (Last, First, Middle Initial)
New York Life Insurance Co PAC

Mailing Address 51 Madison Ave Room 1109

City State Zip Code
New York NY 10010

FEC ID number of contributing federal political committee. **C** C00158881

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11C-CN51472

Amount of Each Receipt this Period
5000

C. Full Name (Last, First, Middle Initial)
Primerica Inc. PAC

Mailing Address 1 Primerica Pkwy

City State Zip Code
Duluth GA 30099

FEC ID number of contributing federal political committee. **C** C00521914

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11C-CN51479

Amount of Each Receipt this Period
1000

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 68 OF 122
	<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)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Procter & Gamble Co Good Government Comm

Mailing Address One Procter & Gamble Plaza

City State Zip Code
Cincinnati OH 45202

FEC ID number of contributing federal political committee. **C** C00257329

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 17 / 2015

Transaction ID : SA11C-CN51028

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Safari Club International PAC

Mailing Address 501 2nd St NE

City State Zip Code
Washington DC 20002

FEC ID number of contributing federal political committee. **C** C00122101

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11C-CN51489

Amount of Each Receipt this Period
2000

C. Full Name (Last, First, Middle Initial)
State Street Bank & Trust Voluntary PAC

Mailing Address PO Box 5351

City State Zip Code
Boston MA 02206

FEC ID number of contributing federal political committee. **C** C00072751

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 19 / 2015

Transaction ID : SA11C-CN51544

Amount of Each Receipt this Period
1000

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

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

4000.00

**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 69 OF 122
	<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)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
TargetCitizens PAC

Mailing Address 1000 Nicollet Mall

City Minneapolis State MN Zip Code 55403

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2015

Transaction ID : SA11C-CN51148

Amount of Each Receipt this Period
 1000

B. Full Name (Last, First, Middle Initial)
TIAA-CREF PAC

Mailing Address 1101 Pennsylvania Ave NW Suite 800

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00431361

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 16 / 2015

Transaction ID : SA11C-CN51325

Amount of Each Receipt this Period
 2500

C. Full Name (Last, First, Middle Initial)
United Parcel Service Inc. PAC

Mailing Address 55 Glenlake Pkwy NE

City Atlanta State GA Zip Code 30328

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 23 / 2015

Transaction ID : SA11C-CN51376

Amount of Each Receipt this Period
 500

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

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

4000.00

**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 70 OF 122
	<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)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
UNUM Group PAC

Mailing Address 1 Fountain Square

City State Zip Code
Chattanooga TN 37402

FEC ID number of contributing federal political committee. **C** C00177436

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 25 / 2015

Transaction ID : SA11C-CN51381

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Vanguard Committee PAC

Mailing Address 400 Devon Park Dr

City State Zip Code
Wayne PA 19087-1816

FEC ID number of contributing federal political committee. **C** C00410266

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 26 / 2015

Transaction ID : SA11C-CN51115

Amount of Each Receipt this Period
2500

C. Full Name (Last, First, Middle Initial)
Venable LLP PAC

Mailing Address PO Box 83142

City State Zip Code
Gaithersburg MD 20883

FEC ID number of contributing federal political committee. **C** C00369660

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 17 / 2015

Transaction ID : SA11C-CN51030

Amount of Each Receipt this Period
1500

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: (check only one)	PAGE 71 OF 122
	<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)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Verizon Good Government Club PAC

Mailing Address 1717 Arch St 47-s

City Philadelphia State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C** C00363127

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 3500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 07 / 2015

Transaction ID : SA11C-CN51090

Amount of Each Receipt this Period
 2500

B. Full Name (Last, First, Middle Initial)
Wells Fargo PAC

Mailing Address 6th & Marquette

City Minneapolis State MN Zip Code 55479

FEC ID number of contributing federal political committee. **C** C00034595

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015

Transaction ID : SA11C-CN51382

Amount of Each Receipt this Period
 2000

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 Y Y

Amount of Each Receipt this Period

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

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

4500.00

128250.00

**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 72 OF 122
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kline for Congress

A. Full Name (Last, First, Middle Initial)
Paychex

Mailing Address 911 Panorama Trail S

City Rochester State NY Zip Code 14625

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 20 / 2015

Transaction ID : SA14-ER34

Amount of Each Receipt this Period
 423.04

Expenditure Refund

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 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 Y Y

Amount of Each Receipt this Period

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

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

423.04

423.04

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 122			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. FEC Financial Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2015
Mailing Address 332 W Lee Highway # 303		Amount of Each Disbursement this Period 1603.43
City Warrenton	State VA	Zip Code 20186
Purpose of Disbursement PAYMENT: SEE BELOW	Category/ Type 001	Transaction ID : SB17-EX10414
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	PAYMENT: SEE BELOW
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. FEC Financial Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2015
Mailing Address 332 W Lee Highway # 303		Amount of Each Disbursement this Period 1600.00
City Warrenton	State VA	Zip Code 20186
Purpose of Disbursement Accounting Services	Category/ Type 001	Transaction ID : SB17-EX10415
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. FEC Financial Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2015
Mailing Address 332 W Lee Highway # 303		Amount of Each Disbursement this Period 3.43
City Warrenton	State VA	Zip Code 20186
Purpose of Disbursement Postage Reimbursement	Category/ Type 001	Transaction ID : SB17-EX10416
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1603.43
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 122			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. FEC Financial Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2015
Mailing Address 332 W Lee Highway # 303		Amount of Each Disbursement this Period 1054.41
City Warrenton State VA Zip Code 20186	Purpose of Disbursement PAYMENT: SEE BELOW	Transaction ID : SB17-EX10471
Candidate Name	Category/Type 001	PAYMENT: SEE BELOW
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. FEC Financial Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2015
Mailing Address 332 W Lee Highway # 303		Amount of Each Disbursement this Period 1050.00
City Warrenton State VA Zip Code 20186	Purpose of Disbursement Accounting Services	Transaction ID : SB17-EX10472
Candidate Name	Category/Type 001	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. FEC Financial Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2015
Mailing Address 332 W Lee Highway # 303		Amount of Each Disbursement this Period 4.41
City Warrenton State VA Zip Code 20186	Purpose of Disbursement Postage Reimbursement	Transaction ID : SB17-EX10473
Candidate Name	Category/Type 001	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1054.41
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 122			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. FEC Financial Inc.		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2015
Mailing Address 332 W Lee Highway # 303		Amount of Each Disbursement this Period 1102.37
City Warrenton	State VA	Zip Code 20186
Purpose of Disbursement PAYMENT: SEE BELOW	Category/ Type 001	Transaction ID : SB17-EX10486
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	PAYMENT: SEE BELOW
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. FEC Financial Inc.		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2015
Mailing Address 332 W Lee Highway # 303		Amount of Each Disbursement this Period 1050.00
City Warrenton	State VA	Zip Code 20186
Purpose of Disbursement Accounting Services	Category/ Type 001	Transaction ID : SB17-EX10487
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. TruShred		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2015
Mailing Address PO Box 980		Amount of Each Disbursement this Period 27.50
City Gainesville	State VA	Zip Code 20156
Purpose of Disbursement Document Shredding	Category/ Type 001	Transaction ID : SB17-EX10488
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1102.37
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 122			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. FEC Financial Inc.		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2015
Mailing Address 332 W Lee Highway # 303		Amount of Each Disbursement this Period 24.87
City Warrenton	State VA	Zip Code 20186
Purpose of Disbursement Postage Reimbursement	Category/ Type 001	
Candidate Name	Transaction ID : SB17-EX10489	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Allied Insurance		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015
Mailing Address PO Box 1407		Amount of Each Disbursement this Period 650.00
City Burnsville	State MN	Zip Code 55337
Purpose of Disbursement Liability Insurance	Category/ Type 001	
Candidate Name	Transaction ID : SB17-EX10427	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Liability Insurance
State: District:		

Full Name (Last, First, Middle Initial) C. AT&T Mobility		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015
Mailing Address PO Box 6416		Amount of Each Disbursement this Period 100.80
City Carol Stream	State IL	Zip Code 60197
Purpose of Disbursement Telephone	Category/ Type 001	
Candidate Name	Transaction ID : SB17-EX10428	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Telephone
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	750.80
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 122			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. AT&T Mobility		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2015
Mailing Address PO Box 6416		Amount of Each Disbursement this Period 4,000.00 Transaction ID : SB17-EX10481
City Carol Stream	State IL		Zip Code 60197
Purpose of Disbursement Telephone		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Telephone
State: District:		

Full Name (Last, First, Middle Initial) B. AT&T Mobility		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2015
Mailing Address PO Box 6416		Amount of Each Disbursement this Period 215.53 Transaction ID : SB17-EX10525
City Carol Stream	State IL		Zip Code 60197
Purpose of Disbursement Telephone		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Telephone
State: District:		

Full Name (Last, First, Middle Initial) c. Elko Speedway		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2015
Mailing Address PO Box 246		Amount of Each Disbursement this Period 4000.00 Transaction ID : SB17-EX10511
City Elko	State MN		Zip Code 55020
Purpose of Disbursement Billboard Advertising		Category/ Type 004
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Billboard Advertising
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4321.69
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 122			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. Pinnacle Direct		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2015
Mailing Address 15260 113th Street North		Amount of Each Disbursement this Period 11930.11
City Stillwater	State MN		Zip Code 55082
Purpose of Disbursement Direct Mail	Category/ Type 003	
Candidate Name		Transaction ID : SB17-EX10483
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Direct Mail	

Full Name (Last, First, Middle Initial) B. Pinnacle Direct		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2015
Mailing Address 15260 113th Street North		Amount of Each Disbursement this Period 11402.32
City Stillwater	State MN		Zip Code 55082
Purpose of Disbursement Direct Mail	Category/ Type 003	
Candidate Name		Transaction ID : SB17-EX10490
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Direct Mail	

Full Name (Last, First, Middle Initial) C. Visa Klein Bank		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015
Mailing Address PO Box 790408		Amount of Each Disbursement this Period 4990.58
City Saint Louis	State MO		Zip Code 63179
Purpose of Disbursement CREDIT CARD PAYMENT: SEE BELOW	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX10446
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	CREDIT CARD PAYMENT: SEE BELOW	

SUBTOTAL of Disbursements This Page (optional).....	28323.01
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 122			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. Original Pancake House		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015
Mailing Address 3501 W 70th Street		Amount of Each Disbursement this Period 344.76
City Bloomington	State MN		Transaction ID : SB17-EX10430
Purpose of Disbursement Food and Beverage	Zip Code 55435	[MEMO ITEM] Food and Beverage
Candidate Name	Category/ Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	
State: District:		

Full Name (Last, First, Middle Initial) B. Microsoft		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015
Mailing Address One Microsoft Way		Amount of Each Disbursement this Period 34.00
City Redmond	State WA		Transaction ID : SB17-EX10431
Purpose of Disbursement Online Software	Zip Code 98052	[MEMO ITEM] Online Software
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	
State: District:		

Full Name (Last, First, Middle Initial) c. Delta Airlines Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 3655.00
City Atlanta	State GA		Transaction ID : SB17-EX10432
Purpose of Disbursement Airfare	Zip Code 30320	[MEMO ITEM] Airfare
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 122			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015
Mailing Address 300 First St. SE		Amount of Each Disbursement this Period 260.93
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Food and Beverage	Transaction ID : SB17-EX10433
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Food and Beverage
State: District:		

Full Name (Last, First, Middle Initial) B. Avis Car Rental		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015
Mailing Address 6 Sylvan Way		Amount of Each Disbursement this Period 24.45
City Parsippany	State NJ	
Zip Code 07054	Purpose of Disbursement Car Rental	Transaction ID : SB17-EX10434
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Car Rental
State: District:		

Full Name (Last, First, Middle Initial) c. Simply Storage		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015
Mailing Address 801 W Ladybird Ln		Amount of Each Disbursement this Period 131.00
City Burnsville	State MN	
Zip Code 55337	Purpose of Disbursement Storage Expense	Transaction ID : SB17-EX10435
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Storage Expense
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 122			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. Burger Jones		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015
Mailing Address 1619 County Road 42		Amount of Each Disbursement this Period 31.06
City Burnsville	State MN	
Zip Code 55306	Purpose of Disbursement Food and Beverage	Transaction ID : SB17-EX10436
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Food and Beverage
State: District:		

Full Name (Last, First, Middle Initial) B. Walmart Store		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015
Mailing Address 7835 150th St		Amount of Each Disbursement this Period 14.83
City Apple Valley	State MN	
Zip Code 55124	Purpose of Disbursement Storage Boxes	Transaction ID : SB17-EX10437
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Storage Boxes
State: District:		

Full Name (Last, First, Middle Initial) c. Best Buy		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015
Mailing Address 12600 W Frontage Rd		Amount of Each Disbursement this Period 96.53
City Burnsville	State MN	
Zip Code 55337	Purpose of Disbursement Computer Equipment	Transaction ID : SB17-EX10438
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Computer Equipment
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 122			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. Sun Country Airlines		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015
Mailing Address 2520 Pilot Knob Road #250		Amount of Each Disbursement this Period 6.00
City St. Paul	State MN	
Zip Code 55120	Purpose of Disbursement Food and Beverage	Transaction ID : SB17-EX10439
Candidate Name	002 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Food and Beverage
State: District:		

Full Name (Last, First, Middle Initial) B. Good Stuff Eatery		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015
Mailing Address 303 Pennsylvania Ave SE		Amount of Each Disbursement this Period 9.98
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Food and Beverage	Transaction ID : SB17-EX10440
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Food and Beverage
State: District:		

Full Name (Last, First, Middle Initial) c. Le Bon Cafe		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015
Mailing Address 210 2nd St SE		Amount of Each Disbursement this Period 10.94
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Food and Beverage	Transaction ID : SB17-EX10441
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Food and Beverage
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 122			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. Minneapolis/St Paul Airport		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015
Mailing Address 4300 Glumack Dr		Amount of Each Disbursement this Period 42.00
City Saint Paul	State MN	
Zip Code 55111	Purpose of Disbursement Parking	Transaction ID : SB17-EX10442
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Parking
State: District:		

Full Name (Last, First, Middle Initial) B. Caribou Coffee		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015
Mailing Address 12601 Nicollet Ave		Amount of Each Disbursement this Period 208.89
City Burnsville	State MN	
Zip Code 55337	Purpose of Disbursement Food and Beverage	Transaction ID : SB17-EX10443
Candidate Name	Category/ Type 007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Food and Beverage
State: District:		

Full Name (Last, First, Middle Initial) c. World Bean		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015
Mailing Address Ronald Reagan Washington National		Amount of Each Disbursement this Period 6.35
City Arlington	State VA	
Zip Code 22202	Purpose of Disbursement Food and Beverage	Transaction ID : SB17-EX10444
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Food and Beverage
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 122			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. Cub Foods		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015
Mailing Address 3784 150th St W		Amount of Each Disbursement this Period 113.86
City Rosemount	State MN	Zip Code 55068
Purpose of Disbursement Food and Beverage	Category/ Type 007	
Candidate Name	Transaction ID : SB17-EX10445	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	
State: District:	[MEMO ITEM] Food and Beverage	

Full Name (Last, First, Middle Initial) B. Visa Klein Bank		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2015
Mailing Address PO Box 790408		Amount of Each Disbursement this Period 4901.38
City Saint Louis	State MO	Zip Code 63179
Purpose of Disbursement CREDIT CARD PAYMENT: SEE BELOW	Category/ Type 001	
Candidate Name	Transaction ID : SB17-EX10552	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	CREDIT CARD PAYMENT: SEE BELOW	

Full Name (Last, First, Middle Initial) C. Us Airways		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2015
Mailing Address 111 W Rio Salado Pkw		Amount of Each Disbursement this Period 880.20
City Tempe	State AZ	Zip Code 85281
Purpose of Disbursement Airfare	Category/ Type 002	
Candidate Name	Transaction ID : SB17-EX10527	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	
State: District:	[MEMO ITEM] Airfare	

SUBTOTAL of Disbursements This Page (optional).....	4901.38
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 122			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. Republican Party Of Minnesota			Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2015
Mailing Address 2200 E Franklin Ave Ste 201			Amount of Each Disbursement this Period 35.00
City Minneapolis	State MN	Zip Code 55404	
Purpose of Disbursement Event Tickets		Category/ Type 007	Transaction ID : SB17-EX10528
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016		[MEMO ITEM] Event Tickets
State: District:			

Full Name (Last, First, Middle Initial) B. Old Chicago			Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2015
Mailing Address 14998 Glazier			Amount of Each Disbursement this Period 103.26
City Apple Valley	State MN	Zip Code 55124	
Purpose of Disbursement Food and Beverage		Category/ Type 001	Transaction ID : SB17-EX10529
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016		[MEMO ITEM] Food and Beverage
State: District:			

Full Name (Last, First, Middle Initial) C. Microsoft			Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2015
Mailing Address One Microsoft Way			Amount of Each Disbursement this Period 34.00
City Redmond	State WA	Zip Code 98052	
Purpose of Disbursement Online Software		Category/ Type 001	Transaction ID : SB17-EX10530
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016		[MEMO ITEM] Online Software
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 122			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Kline for Congress

A. Executive Car Service

Full Name (Last, First, Middle Initial)
Mailing Address 7948 Stillwood Rd

City Cincinnati State OH Zip Code 45237

Purpose of Disbursement Airport Transportation

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) Primary 2016

State: District:

Date of Disbursement: 05 / 20 / 2015

Amount of Each Disbursement this Period: 172.00

Transaction ID : SB17-EX10531

[MEMO ITEM]
Airport Transportation

B. Minneapolis/St Paul Airport

Full Name (Last, First, Middle Initial)
Mailing Address 4300 Glumack Dr

City Saint Paul State MN Zip Code 55111

Purpose of Disbursement Parking

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) Primary 2016

State: District:

Date of Disbursement: 05 / 20 / 2015

Amount of Each Disbursement this Period: 22.00

Transaction ID : SB17-EX10532

[MEMO ITEM]
Parking

C. Avis Car Rental

Full Name (Last, First, Middle Initial)
Mailing Address 6 Sylvan Way

City Parsippany State NJ Zip Code 07054

Purpose of Disbursement Car Rental

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) Primary 2016

State: District:

Date of Disbursement: 05 / 20 / 2015

Amount of Each Disbursement this Period: 146.50

Transaction ID : SB17-EX10533

[MEMO ITEM]
Car Rental

SUBTOTAL of Disbursements This Page (optional) 0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 122			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. GoDaddy.com		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2015
Mailing Address 14455 North Hayden Rd		Amount of Each Disbursement this Period 851.88
City Scottsdale	State AZ	
Zip Code 85260	Purpose of Disbursement Domain Registration	Transaction ID : SB17-EX10534
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Domain Registration
State: District:		

Full Name (Last, First, Middle Initial) B. Hilton Garden Inn Scottsdale		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2015
Mailing Address 8550 E Princess Dr		Amount of Each Disbursement this Period 963.76
City Scottsdale	State AZ	
Zip Code 85255	Purpose of Disbursement Lodging	Transaction ID : SB17-EX10535
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Lodging
State: District:		

Full Name (Last, First, Middle Initial) c. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2015
Mailing Address 300 First St. SE		Amount of Each Disbursement this Period 98.74
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Food and Beverage	Transaction ID : SB17-EX10536
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Food and Beverage
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 122			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. Chick-Fil-A		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2015
Mailing Address 7480 153rd St W		Amount of Each Disbursement this Period 114.30
City Apple Valley	State MN	
Zip Code 55124	Purpose of Disbursement Food and Beverage	Transaction ID : SB17-EX10537
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Food and Beverage
State: District:		

Full Name (Last, First, Middle Initial) B. Cub Foods		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2015
Mailing Address 3784 150th St W		Amount of Each Disbursement this Period 19.28
City Rosemount	State MN	
Zip Code 55068	Purpose of Disbursement Food and Beverage	Transaction ID : SB17-EX10538
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Food and Beverage
State: District:		

Full Name (Last, First, Middle Initial) c. Postmaster - Burnsville		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2015
Mailing Address 13800 Nicollet Blvd.		Amount of Each Disbursement this Period 147.00
City Burnsville	State MN	
Zip Code 55337	Purpose of Disbursement Postage	Transaction ID : SB17-EX10539
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Postage
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 122			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. Macayo Shea Restaurant			Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2015	
Mailing Address 11107 N Scottsdale Rd			Amount of Each Disbursement this Period 80.82	
City Scottsdale	State AZ	Zip Code 85254	Transaction ID : SB17-EX10541	
Purpose of Disbursement Food and Beverage		Category/ Type 001	[MEMO ITEM] Food and Beverage	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016			
State: District:				

Full Name (Last, First, Middle Initial) B. Whataburger			Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2015	
Mailing Address 9990 N 90th St			Amount of Each Disbursement this Period 55.88	
City Scottsdale	State AZ	Zip Code 85258	Transaction ID : SB17-EX10542	
Purpose of Disbursement Food and Beverage		Category/ Type 001	[MEMO ITEM] Food and Beverage	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016			
State: District:				

Full Name (Last, First, Middle Initial) c. Royal Palms Resort			Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2015	
Mailing Address 5200 E Camelback Rd			Amount of Each Disbursement this Period 212.98	
City Phoenix	State AZ	Zip Code 85018	Transaction ID : SB17-EX10543	
Purpose of Disbursement Food and Beverage		Category/ Type 003	[MEMO ITEM] Food and Beverage	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 122			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. Fry's Fuel		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2015
Mailing Address 850 E Hatcher Rd		Amount of Each Disbursement this Period 28.41
City Phoenix	State AZ Zip Code 85020	
Purpose of Disbursement Fuel	Category/Type 002	Transaction ID : SB17-EX10544
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Fuel
State: District:		

Full Name (Last, First, Middle Initial) B. Talking Stick Resort		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2015
Mailing Address 9800 E Indian Bend Rd		Amount of Each Disbursement this Period 468.35
City Scottsdale	State AZ Zip Code 85256	
Purpose of Disbursement Food and Beverage	Category/Type 003	Transaction ID : SB17-EX10545
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Food and Beverage
State: District:		

Full Name (Last, First, Middle Initial) c. Federal Express		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2015
Mailing Address PO Box 94515		Amount of Each Disbursement this Period 32.91
City Palatine	State IL Zip Code 60094	
Purpose of Disbursement Delivery	Category/Type 001	Transaction ID : SB17-EX10546
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Delivery
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 122			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. The Home Depot		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2015
Mailing Address 155 W Nicollet Blvd		Amount of Each Disbursement this Period 50.00
City Burnsville	State MN	
Zip Code 55337	Purpose of Disbursement Gift Card Purchase	Transaction ID : SB17-EX10547
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Gift Card Purchase
State: District:		

Full Name (Last, First, Middle Initial) B. Grayhawk Golf Club		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2015
Mailing Address 8620 E Thompson Peak Pkwy		Amount of Each Disbursement this Period 151.13
City Scottsdale	State AZ	
Zip Code 85255	Purpose of Disbursement Food and Beverage	Transaction ID : SB17-EX10548
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Food and Beverage
State: District:		

Full Name (Last, First, Middle Initial) c. Uptown Car Service		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2015
Mailing Address 5231 E Calle De Baca		Amount of Each Disbursement this Period 66.00
City Cave Creek	State AZ	
Zip Code 85331	Purpose of Disbursement Car Service	Transaction ID : SB17-EX10549
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Car Service
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 122			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. Simply Storage		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2015
Mailing Address 801 W Ladybird Ln		Amount of Each Disbursement this Period 131.00
City Burnsville	State MN		Transaction ID : SB17-EX10550
Zip Code 55337	Purpose of Disbursement Storage Expense	[MEMO ITEM] Storage Expense
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	
State: District:		

Full Name (Last, First, Middle Initial) B. Delta Airlines Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2015
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 35.98
City Atlanta	State GA		Transaction ID : SB17-EX10551
Zip Code 30320	Purpose of Disbursement Food and Beverage	[MEMO ITEM] Food and Beverage
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	
State: District:		

Full Name (Last, First, Middle Initial) c. Paychex		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2015
Mailing Address 911 Panorama Trail S		Amount of Each Disbursement this Period 77.00
City Rochester	State NY		Transaction ID : SB17-EX10418
Zip Code 14625	Purpose of Disbursement Payroll Service Fee	Payroll Service Fee
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	77.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 122			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. Paychex		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015
Mailing Address 911 Panorama Trail S		Amount of Each Disbursement this Period 6551.26
City Rochester	State NY Zip Code 14625	
Purpose of Disbursement PAYROLL: SEE BELOW	Category/Type 001	Transaction ID : SB17-EX10424
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	PAYROLL: SEE BELOW
State: District:		

Full Name (Last, First, Middle Initial) B. George Damian		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015
Mailing Address 11625 Wilder Dr		Amount of Each Disbursement this Period 1495.28
City Eden Prairie	State MN Zip Code 55344	
Purpose of Disbursement Net Salary	Category/Type 001	Transaction ID : SB17-EX10419
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Net Salary
State: District:		

Full Name (Last, First, Middle Initial) c. Leticia Harnung		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015
Mailing Address 1117 Atwood Ct		Amount of Each Disbursement this Period 2880.29
City Shakopee	State MN Zip Code 55379	
Purpose of Disbursement Net Salary	Category/Type 001	Transaction ID : SB17-EX10420
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Net Salary
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6551.26
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 122			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. Brooke Schaeffer		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015
Mailing Address 12066 Gantry Ln		Amount of Each Disbursement this Period 230.87
City Apple Valley	State MN		Transaction ID : SB17-EX10421
Zip Code 55124	Purpose of Disbursement Net Salary	[MEMO ITEM] Net Salary
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	
State: District:		

Full Name (Last, First, Middle Initial) B. Troy Young		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015
Mailing Address 19705 Estes Path		Amount of Each Disbursement this Period 440.00
City Farmington	State MN		Transaction ID : SB17-EX10422
Zip Code 55024	Purpose of Disbursement Net Salary	[MEMO ITEM] Net Salary
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	
State: District:		

Full Name (Last, First, Middle Initial) c. Paychex		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015
Mailing Address 911 Panorama Trail S		Amount of Each Disbursement this Period 1504.82
City Rochester	State NY		Transaction ID : SB17-EX10423
Zip Code 14625	Purpose of Disbursement Withholding Taxes	[MEMO ITEM] Withholding Taxes
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 122			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. Paychex		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2015
Mailing Address 911 Panorama Trail S		Amount of Each Disbursement this Period 6551.26
City Rochester	State NY Zip Code 14625	
Purpose of Disbursement PAYROLL: SEE BELOW	Category/Type 001	Transaction ID : SB17-EX10454
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	PAYROLL: SEE BELOW
State: District:		

Full Name (Last, First, Middle Initial) B. George Damian		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2015
Mailing Address 11625 Wilder Dr		Amount of Each Disbursement this Period 1495.27
City Eden Prairie	State MN Zip Code 55344	
Purpose of Disbursement Net Salary	Category/Type 001	Transaction ID : SB17-EX10449
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Net Salary
State: District:		

Full Name (Last, First, Middle Initial) c. Leticia Harnung		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2015
Mailing Address 1117 Atwood Ct		Amount of Each Disbursement this Period 2880.29
City Shakopee	State MN Zip Code 55379	
Purpose of Disbursement Net Salary	Category/Type 001	Transaction ID : SB17-EX10450
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Net Salary
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6551.26
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 122			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. Brooke Schaeffer		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2015
Mailing Address 12066 Gantry Ln		Amount of Each Disbursement this Period 230.88
City Apple Valley State MN Zip Code 55124	Purpose of Disbursement Net Salary	
Candidate Name	Category/Type 001	Transaction ID : SB17-EX10451
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	
State: District:		[MEMO ITEM] Net Salary

Full Name (Last, First, Middle Initial) B. Troy Young		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2015
Mailing Address 19705 Estes Path		Amount of Each Disbursement this Period 440.00
City Farmington State MN Zip Code 55024	Purpose of Disbursement Net Salary	
Candidate Name	Category/Type 001	Transaction ID : SB17-EX10452
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	
State: District:		[MEMO ITEM] Net Salary

Full Name (Last, First, Middle Initial) c. Paychex		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2015
Mailing Address 911 Panorama Trail S		Amount of Each Disbursement this Period 1504.82
City Rochester State NY Zip Code 14625	Purpose of Disbursement Withholding Taxes	
Candidate Name	Category/Type 001	Transaction ID : SB17-EX10453
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	
State: District:		[MEMO ITEM] Withholding Taxes

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 122			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. Paychex		Date of Disbursement MM / DD / YYYY 05 / 11 / 2015
Mailing Address 911 Panorama Trail S		Amount of Each Disbursement this Period 77.00
City Rochester	State NY Zip Code 14625	
Purpose of Disbursement Payroll Service Fee	Category/Type 001	Transaction ID : SB17-EX10501
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Payroll Service Fee
State: District:		

Full Name (Last, First, Middle Initial) B. Paychex		Date of Disbursement MM / DD / YYYY 05 / 15 / 2015
Mailing Address 911 Panorama Trail S		Amount of Each Disbursement this Period 6545.94
City Rochester	State NY Zip Code 14625	
Purpose of Disbursement PAYROLL: SEE BELOW	Category/Type 001	Transaction ID : SB17-EX10479
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	PAYROLL: SEE BELOW
State: District:		

Full Name (Last, First, Middle Initial) c. George Damian		Date of Disbursement MM / DD / YYYY 05 / 15 / 2015
Mailing Address 11625 Wilder Dr		Amount of Each Disbursement this Period 1495.27
City Eden Prairie	State MN Zip Code 55344	
Purpose of Disbursement Net Salary	Category/Type 001	Transaction ID : SB17-EX10474
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Net Salary
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6622.94
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 122			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. Leticia Harnung		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2015
Mailing Address 1117 Atwood Ct		Amount of Each Disbursement this Period 2880.28
City Shakopee	State MN		Transaction ID : SB17-EX10475
Zip Code 55379	Purpose of Disbursement Net Salary	[MEMO ITEM] Net Salary
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	
State: District:		

Full Name (Last, First, Middle Initial) B. Brooke Schaeffer		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2015
Mailing Address 12066 Gantry Ln		Amount of Each Disbursement this Period 230.87
City Apple Valley	State MN		Transaction ID : SB17-EX10476
Zip Code 55124	Purpose of Disbursement Net Salary	[MEMO ITEM] Net Salary
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	
State: District:		

Full Name (Last, First, Middle Initial) c. Troy Young		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2015
Mailing Address 19705 Estes Path		Amount of Each Disbursement this Period 440.00
City Farmington	State MN		Transaction ID : SB17-EX10477
Zip Code 55024	Purpose of Disbursement Net Salary	[MEMO ITEM] Net Salary
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 122			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. Paychex		Date of Disbursement MM / DD / YYYY 05 / 15 / 2015
Mailing Address 911 Panorama Trail S		Amount of Each Disbursement this Period 1499.52
City Rochester	State NY	
Zip Code 14625	Purpose of Disbursement Withholding Taxes	Transaction ID : SB17-EX10478
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Withholding Taxes
State: District:		

Full Name (Last, First, Middle Initial) B. Paychex		Date of Disbursement MM / DD / YYYY 05 / 29 / 2015
Mailing Address 911 Panorama Trail S		Amount of Each Disbursement this Period 6527.00
City Rochester	State NY	
Zip Code 14625	Purpose of Disbursement PAYROLL: SEE BELOW	Transaction ID : SB17-EX10500
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	PAYROLL: SEE BELOW
State: District:		

Full Name (Last, First, Middle Initial) c. George Damian		Date of Disbursement MM / DD / YYYY 05 / 29 / 2015
Mailing Address 11625 Wilder Dr		Amount of Each Disbursement this Period 1495.27
City Eden Prairie	State MN	
Zip Code 55344	Purpose of Disbursement Net Salary	Transaction ID : SB17-EX10495
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Net Salary
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6527.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 122			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. Leticia Harnung		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2015
Mailing Address 1117 Atwood Ct		Amount of Each Disbursement this Period 2880.28
City Shakopee	State MN		Transaction ID : SB17-EX10496
Zip Code 55379	Purpose of Disbursement Net Salary	[MEMO ITEM] Net Salary
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	
State: District:		

Full Name (Last, First, Middle Initial) B. Brooke Schaeffer		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2015
Mailing Address 12066 Gantry Ln		Amount of Each Disbursement this Period 230.88
City Apple Valley	State MN		Transaction ID : SB17-EX10497
Zip Code 55124	Purpose of Disbursement Net Salary	[MEMO ITEM] Net Salary
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	
State: District:		

Full Name (Last, First, Middle Initial) c. Troy Young		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2015
Mailing Address 19705 Estes Path		Amount of Each Disbursement this Period 440.00
City Farmington	State MN		Transaction ID : SB17-EX10498
Zip Code 55024	Purpose of Disbursement Net Salary	[MEMO ITEM] Net Salary
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 122			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. Paychex			Date of Disbursement MM / DD / YYYY 05 / 29 / 2015	
Mailing Address 911 Panorama Trail S			Amount of Each Disbursement this Period 1480.57	
City Rochester	State NY	Zip Code 14625	Transaction ID : SB17-EX10499	
Purpose of Disbursement Withholding Taxes		Category/ Type 001	[MEMO ITEM] Withholding Taxes	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016			
State: District:				

Full Name (Last, First, Middle Initial) B. Paychex			Date of Disbursement MM / DD / YYYY 06 / 10 / 2015	
Mailing Address 911 Panorama Trail S			Amount of Each Disbursement this Period 80.00	
City Rochester	State NY	Zip Code 14625	Transaction ID : SB17-EX10564	
Purpose of Disbursement Payroll Service Fee		Category/ Type 001	Payroll Service Fee	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Paychex			Date of Disbursement MM / DD / YYYY 06 / 15 / 2015	
Mailing Address 911 Panorama Trail S			Amount of Each Disbursement this Period 6527.00	
City Rochester	State NY	Zip Code 14625	Transaction ID : SB17-EX10517	
Purpose of Disbursement PAYROLL: SEE BELOW		Category/ Type 001	PAYROLL: SEE BELOW	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	6607.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 122			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. George Damian		Date of Disbursement MM / DD / YYYY 06 / 15 / 2015
Mailing Address 11625 Wilder Dr		Amount of Each Disbursement this Period 1495.28
City Eden Prairie	State MN		Transaction ID : SB17-EX10512
Zip Code 55344		[MEMO ITEM] Net Salary
Purpose of Disbursement Net Salary			Category/ Type 001
Candidate Name		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State:	District:	

Full Name (Last, First, Middle Initial) B. Leticia Harnung		Date of Disbursement MM / DD / YYYY 06 / 15 / 2015
Mailing Address 1117 Atwood Ct		Amount of Each Disbursement this Period 2880.29
City Shakopee	State MN		Transaction ID : SB17-EX10513
Zip Code 55379		[MEMO ITEM] Net Salary
Purpose of Disbursement Net Salary			Category/ Type 001
Candidate Name		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State:	District:	

Full Name (Last, First, Middle Initial) c. Brooke Schaeffer		Date of Disbursement MM / DD / YYYY 06 / 15 / 2015
Mailing Address 12066 Gantry Ln		Amount of Each Disbursement this Period 230.87
City Apple Valley	State MN		Transaction ID : SB17-EX10514
Zip Code 55124		[MEMO ITEM] Net Salary
Purpose of Disbursement Net Salary			Category/ Type 001
Candidate Name		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 122			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. Troy Young		Date of Disbursement MM / DD / YYYY 06 / 15 / 2015
Mailing Address 19705 Estes Path		Amount of Each Disbursement this Period 440.00
City Farmington	State MN	
Zip Code 55024	Purpose of Disbursement Net Salary	Transaction ID : SB17-EX10515
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Net Salary
State: District:		

Full Name (Last, First, Middle Initial) B. Paychex		Date of Disbursement MM / DD / YYYY 06 / 15 / 2015
Mailing Address 911 Panorama Trail S		Amount of Each Disbursement this Period 1480.56
City Rochester	State NY	
Zip Code 14625	Purpose of Disbursement Withholding Taxes	Transaction ID : SB17-EX10516
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Withholding Taxes
State: District:		

Full Name (Last, First, Middle Initial) c. Vanco Services		Date of Disbursement MM / DD / YYYY 04 / 09 / 2015
Mailing Address 12600 Whitewater Drive Ste 200		Amount of Each Disbursement this Period 7.13
City Minnetonka	State MN	
Zip Code 55343	Purpose of Disbursement Credit Card Service Fee	Transaction ID : SB17-EX10425
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Credit Card Service Fee
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	7.13
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 122			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. Vanco Services			Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2015
Mailing Address 12600 Whitewater Drive Ste 200			Amount of Each Disbursement this Period 55.45 Transaction ID : SB17-EX10426
City Minnetonka	State MN	Zip Code 55343	
Purpose of Disbursement Credit Card Service Fee		Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Credit Card Service Fee	
State: District:			

Full Name (Last, First, Middle Initial) B. Vanco Services			Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2015
Mailing Address 12600 Whitewater Drive Ste 200			Amount of Each Disbursement this Period 3.20 Transaction ID : SB17-EX10502
City Minnetonka	State MN	Zip Code 55343	
Purpose of Disbursement Credit Card Service Fee		Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Credit Card Service Fee	
State: District:			

Full Name (Last, First, Middle Initial) c. Vanco Services			Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015
Mailing Address 12600 Whitewater Drive Ste 200			Amount of Each Disbursement this Period 24.70 Transaction ID : SB17-EX10503
City Minnetonka	State MN	Zip Code 55343	
Purpose of Disbursement Credit Card Service Fee		Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Credit Card Service Fee	
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	83.35
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 122			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. Vanco Services			Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2015
Mailing Address 12600 Whitewater Drive Ste 200			Amount of Each Disbursement this Period 17.95
City Minnetonka	State MN	Zip Code 55343	Transaction ID : SB17-EX10504
Purpose of Disbursement Credit Card Service Fee		001 Category/ Type	
Candidate Name			Credit Card Service Fee
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. Vanco Services			Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2015
Mailing Address 12600 Whitewater Drive Ste 200			Amount of Each Disbursement this Period 7.15
City Minnetonka	State MN	Zip Code 55343	Transaction ID : SB17-EX10505
Purpose of Disbursement Credit Card Service Fee		001 Category/ Type	
Candidate Name			Credit Card Service Fee
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) c. Vanco Services			Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2015
Mailing Address 12600 Whitewater Drive Ste 200			Amount of Each Disbursement this Period 20.60
City Minnetonka	State MN	Zip Code 55343	Transaction ID : SB17-EX10506
Purpose of Disbursement Credit Card Service Fee		001 Category/ Type	
Candidate Name			Credit Card Service Fee
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional).....	45.70
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 122			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. Vanco Services			Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2015
Mailing Address 12600 Whitewater Drive Ste 200			Amount of Each Disbursement this Period 194.68
City Minnetonka	State MN	Zip Code 55343	Transaction ID : SB17-EX10507
Purpose of Disbursement Credit Card Service Fee		001 Category/ Type	
Candidate Name			Credit Card Service Fee
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. Vanco Services			Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2015
Mailing Address 12600 Whitewater Drive Ste 200			Amount of Each Disbursement this Period 47.71
City Minnetonka	State MN	Zip Code 55343	Transaction ID : SB17-EX10508
Purpose of Disbursement Credit Card Service Fee		001 Category/ Type	
Candidate Name			Credit Card Service Fee
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) c. Vanco Services			Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2015
Mailing Address 12600 Whitewater Drive Ste 200			Amount of Each Disbursement this Period 137.95
City Minnetonka	State MN	Zip Code 55343	Transaction ID : SB17-EX10509
Purpose of Disbursement Credit Card Service Fee		001 Category/ Type	
Candidate Name			Credit Card Service Fee
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional).....	380.34
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 122			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. Vanco Services		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2015
Mailing Address 12600 Whitewater Drive Ste 200		Amount of Each Disbursement this Period 7 . 7 5 21.00
City Minnetonka	State MN		Zip Code 55343
Purpose of Disbursement Credit Card Service Fee	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX10510
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Credit Card Service Fee
State: District:		

Full Name (Last, First, Middle Initial) B. Vanco Services		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2015
Mailing Address 12600 Whitewater Drive Ste 200		Amount of Each Disbursement this Period 7 . 2 4 52.95
City Minnetonka	State MN		Zip Code 55343
Purpose of Disbursement Credit Card Service Fee	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX10553
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Credit Card Service Fee
State: District:		

Full Name (Last, First, Middle Initial) c. Vanco Services		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2015
Mailing Address 12600 Whitewater Drive Ste 200		Amount of Each Disbursement this Period 7 . 8 7 3.20
City Minnetonka	State MN		Zip Code 55343
Purpose of Disbursement Credit Card Service Fee	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX10554
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Credit Card Service Fee
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	77.15
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 122			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. Vanco Services		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2015
Mailing Address 12600 Whitewater Drive Ste 200		Amount of Each Disbursement this Period 9.50
City Minnetonka	State MN	Zip Code 55343
Purpose of Disbursement Credit Card Service Fee	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX10555
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Credit Card Service Fee
State: District:		

Full Name (Last, First, Middle Initial) B. Vanco Services		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2015
Mailing Address 12600 Whitewater Drive Ste 200		Amount of Each Disbursement this Period 7.33
City Minnetonka	State MN	Zip Code 55343
Purpose of Disbursement Credit Card Service Fee	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX10556
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Credit Card Service Fee
State: District:		

Full Name (Last, First, Middle Initial) c. Vanco Services		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2015
Mailing Address 12600 Whitewater Drive Ste 200		Amount of Each Disbursement this Period 24.88
City Minnetonka	State MN	Zip Code 55343
Purpose of Disbursement Credit Card Service Fee	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX10557
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Credit Card Service Fee
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	41.71
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 122			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. Vanco Services			Date of Disbursement MM / DD / YYYY 06 / 19 / 2015
Mailing Address 12600 Whitewater Drive Ste 200			Amount of Each Disbursement this Period 181.85
City Minnetonka	State MN	Zip Code 55343	Transaction ID : SB17-EX10558
Purpose of Disbursement Credit Card Service Fee		Category/ Type 001	
Candidate Name			Credit Card Service Fee
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. Vanco Services			Date of Disbursement MM / DD / YYYY 06 / 23 / 2015
Mailing Address 12600 Whitewater Drive Ste 200			Amount of Each Disbursement this Period 1.33
City Minnetonka	State MN	Zip Code 55343	Transaction ID : SB17-EX10559
Purpose of Disbursement Credit Card Service Fee		Category/ Type 001	
Candidate Name			Credit Card Service Fee
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) c. Vanco Services			Date of Disbursement MM / DD / YYYY 06 / 25 / 2015
Mailing Address 12600 Whitewater Drive Ste 200			Amount of Each Disbursement this Period 192.65
City Minnetonka	State MN	Zip Code 55343	Transaction ID : SB17-EX10560
Purpose of Disbursement Credit Card Service Fee		Category/ Type 001	
Candidate Name			Credit Card Service Fee
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional)	375.83
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 OF 122			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. Vanco Services		Date of Disbursement MM / DD / YYYY 06 / 26 / 2015
Mailing Address 12600 Whitewater Drive Ste 200		Amount of Each Disbursement this Period 7.78
City Minnetonka	State MN	
Zip Code 55343	Purpose of Disbursement Credit Card Service Fee	Transaction ID : SB17-EX10561
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Credit Card Service Fee
State: District:		

Full Name (Last, First, Middle Initial) B. Vanco Services		Date of Disbursement MM / DD / YYYY 06 / 29 / 2015
Mailing Address 12600 Whitewater Drive Ste 200		Amount of Each Disbursement this Period 70.92
City Minnetonka	State MN	
Zip Code 55343	Purpose of Disbursement Credit Card Service Fee	Transaction ID : SB17-EX10562
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Credit Card Service Fee
State: District:		

Full Name (Last, First, Middle Initial) c. Vanco Services		Date of Disbursement MM / DD / YYYY 06 / 30 / 2015
Mailing Address 12600 Whitewater Drive Ste 200		Amount of Each Disbursement this Period 35.45
City Minnetonka	State MN	
Zip Code 55343	Purpose of Disbursement Credit Card Service Fee	Transaction ID : SB17-EX10563
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Credit Card Service Fee
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	114.15
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 OF 122			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. Townsend Group		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2015
Mailing Address 1006 Pendleton St.		Amount of Each Disbursement this Period 12594.68
City Alexandria State VA Zip Code 22314	Purpose of Disbursement PAYMENT: SEE BELOW	
Candidate Name	Category/Type 003	Transaction ID : SB17-EX10401
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	PAYMENT: SEE BELOW	
State: District:		

Full Name (Last, First, Middle Initial) B. Townsend Group		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2015
Mailing Address 1006 Pendleton St.		Amount of Each Disbursement this Period 3000.00
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Fundraising Retainer	
Candidate Name	Category/Type 003	Transaction ID : SB17-EX10402
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]	
State: District:		

Full Name (Last, First, Middle Initial) c. Charlie Palmer Steak House		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2015
Mailing Address 101 Constitution Ave		Amount of Each Disbursement this Period 2720.73
City Washington State DC Zip Code 20001	Purpose of Disbursement Food and Beverage	
Candidate Name	Category/Type 003	Transaction ID : SB17-EX10403
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	12594.68
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 122			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. Federal Express		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2015
Mailing Address PO Box 94515		Amount of Each Disbursement this Period 21.50
City Palatine	State IL	
Zip Code 60094	Purpose of Disbursement Delivery	Transaction ID : SB17-EX10404
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Occasions Catering		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2015
Mailing Address 655 Taylor St NE		Amount of Each Disbursement this Period 2426.30
City Washington	State DC	
Zip Code 20017	Purpose of Disbursement Catering	Transaction ID : SB17-EX10405
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Fluor Corp		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2015
Mailing Address 403 4th St SE		Amount of Each Disbursement this Period 370.00
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Room Rental	Transaction ID : SB17-EX10406
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 113 OF 122	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2015
Mailing Address 300 First St. SE		Amount of Each Disbursement this Period 4056.15
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Food and Beverage	Transaction ID : SB17-EX10407
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Townsend Group		Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2015
Mailing Address 1006 Pendleton St.		Amount of Each Disbursement this Period 3000.00
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Fundraising Retainer	Transaction ID : SB17-EX10448
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Fundraising Retainer
State: District:		

Full Name (Last, First, Middle Initial) c. Townsend Group		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2015
Mailing Address 1006 Pendleton St.		Amount of Each Disbursement this Period 6714.12
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement REIMBURSEMENT: SEE BELOW	Transaction ID : SB17-EX10464
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	REIMBURSEMENT: SEE BELOW
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	9714.12
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 122			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. Acqua AI 2		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2015
Mailing Address 212 7th Street Southeast		Amount of Each Disbursement this Period 1951.10
City Washington	State DC Zip Code 20003	
Purpose of Disbursement Food and Beverage	Category/Type 003	Transaction ID : SB17-EX10465 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Nopa Kitchen		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2015
Mailing Address 800 F St NW		Amount of Each Disbursement this Period 2423.01
City Washington	State DC Zip Code 20004	
Purpose of Disbursement Food and Beverage	Category/Type 003	Transaction ID : SB17-EX10466 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. New York Life Insurance Co.		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2015
Mailing Address 901 15th St NW Ste 600		Amount of Each Disbursement this Period 500.00
City Washington	State DC Zip Code 20005	
Purpose of Disbursement Room Rental	Category/Type 003	Transaction ID : SB17-EX10467 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 OF 122			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. Capitol Hill Club		Date of Disbursement MM / DD / YYYY 05 / 08 / 2015
Mailing Address 300 First St. SE		Amount of Each Disbursement this Period 1665.03
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Food and Beverage	Transaction ID : SB17-EX10468
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Quick Messenger Service		Date of Disbursement MM / DD / YYYY 05 / 08 / 2015
Mailing Address 4829 Fremont Ave.		Amount of Each Disbursement this Period 19.98
City Bethesda	State MD	
Zip Code 20814	Purpose of Disbursement Delivery	Transaction ID : SB17-EX10469
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. Federal Express		Date of Disbursement MM / DD / YYYY 05 / 08 / 2015
Mailing Address PO Box 94515		Amount of Each Disbursement this Period 155.00
City Palatine	State IL	
Zip Code 60094	Purpose of Disbursement Shipping	Transaction ID : SB17-EX10470
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 116 OF 122	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. Townsend Group		Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2015
Mailing Address 1006 Pendleton St.		Amount of Each Disbursement this Period 3000.00
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Fundraising Retainer Category/Type 003	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17-EX10484
State: District:	Fundraising Retainer	

Full Name (Last, First, Middle Initial) B. Townsend Group		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2015
Mailing Address 1006 Pendleton St.		Amount of Each Disbursement this Period 26.00
City Alexandria State VA Zip Code 22314	Purpose of Disbursement REIMBURSEMENT: SEE BELOW Category/Type 003	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17-EX10492
State: District:	REIMBURSEMENT: SEE BELOW	

Full Name (Last, First, Middle Initial) c. Federal Express		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2015
Mailing Address PO Box 94515		Amount of Each Disbursement this Period 26.00
City Palatine State IL Zip Code 60094	Purpose of Disbursement Shipping Category/Type 003	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17-EX10493
State: District:	[MEMO ITEM]	

SUBTOTAL of Disbursements This Page (optional).....	3026.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 117 OF 122	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. George Damian		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2015
Mailing Address 11625 Wilder Dr		Amount of Each Disbursement this Period 23.91
City Eden Prairie	State MN	
Purpose of Disbursement REIMBURSEMENT: SEE BELOW	Zip Code 55344	Transaction ID : SB17-EX10458
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	REIMBURSEMENT: SEE BELOW
State: District:		

Full Name (Last, First, Middle Initial) B. George Damian		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2015
Mailing Address 11625 Wilder Dr		Amount of Each Disbursement this Period 4.65
City Eden Prairie	State MN	
Purpose of Disbursement Parking Reimbursement	Zip Code 55344	Transaction ID : SB17-EX10459
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Postmaster - Burnsville		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2015
Mailing Address 13800 Nicollet Blvd.		Amount of Each Disbursement this Period 2.24
City Burnsville	State MN	
Purpose of Disbursement Postage	Zip Code 55337	Transaction ID : SB17-EX10460
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	23.91
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 118 OF 122			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. Walmart Store		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2015
Mailing Address 7835 150th St		Amount of Each Disbursement this Period 9.22
City Apple Valley	State MN		Transaction ID : SB17-EX10461 [MEMO ITEM]
Purpose of Disbursement Paper Supplies	Zip Code 55124	Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Cub Foods		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2015
Mailing Address 8432 Tamarack Vlg		Amount of Each Disbursement this Period 7.80
City Woodbury	State MN		Transaction ID : SB17-EX10462 [MEMO ITEM]
Purpose of Disbursement Food and Beverage	Zip Code 55125	Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Reed Copywriting		Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2015
Mailing Address 131 Glyn Tawel Dr		Amount of Each Disbursement this Period 250.00
City Granville	State OH		Transaction ID : SB17-EX10524 Direct Mail
Purpose of Disbursement Direct Mail	Zip Code 43023	Category/ Type 003
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 119 OF 122	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. T-Mobile		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2015
Mailing Address PO Box 790047		Amount of Each Disbursement this Period 92.94
City St Louis	State MO	
Zip Code 63179	Purpose of Disbursement Cell Phone	Transaction ID : SB17-EX10463
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Cell Phone
State: District:		

Full Name (Last, First, Middle Initial) B. T-Mobile		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2015
Mailing Address PO Box 790047		Amount of Each Disbursement this Period 92.94
City St Louis	State MO	
Zip Code 63179	Purpose of Disbursement Cell Phone	Transaction ID : SB17-EX10491
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Cell Phone
State: District:		

Full Name (Last, First, Middle Initial) c. Imagine IT Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2015
Mailing Address 2950 Metro Dr		Amount of Each Disbursement this Period 36.96
City Bloomington	State MN	
Zip Code 55425	Purpose of Disbursement Computer Software	Transaction ID : SB17-EX10456
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Computer Software
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	222.84
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 120 OF 122	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. Comcast		Date of Disbursement MM / DD / YYYY 04 / 16 / 2015
Mailing Address PO Box 34744		Amount of Each Disbursement this Period 297.42
City Seattle	State WA	
Zip Code 98124	Purpose of Disbursement Telephone Service	Transaction ID : SB17-EX10447
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Telephone Service
State: District:		

Full Name (Last, First, Middle Initial) B. Comcast		Date of Disbursement MM / DD / YYYY 05 / 14 / 2015
Mailing Address PO Box 34744		Amount of Each Disbursement this Period 290.73
City Seattle	State WA	
Zip Code 98124	Purpose of Disbursement Telephone Service	Transaction ID : SB17-EX10482
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Telephone Service
State: District:		

Full Name (Last, First, Middle Initial) C. Comcast		Date of Disbursement MM / DD / YYYY 06 / 15 / 2015
Mailing Address PO Box 34744		Amount of Each Disbursement this Period 292.17
City Seattle	State WA	
Zip Code 98124	Purpose of Disbursement Telephone Service	Transaction ID : SB17-EX10526
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Telephone Service
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	880.32
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 OF 122			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. Kraus-Anderson Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2015
Mailing Address 4210 W Old Shakopee Rd		Amount of Each Disbursement this Period 1965.64
City Bloomington	State MN		Transaction ID : SB17-EX10400
Purpose of Disbursement Office Rent	Zip Code 55347	Office Rent
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Gateway Office Plaza LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2015
Mailing Address SDS-12-2659 PO Box 86		Amount of Each Disbursement this Period 1965.64
City Minneapolis	State MN		Transaction ID : SB17-EX10455
Purpose of Disbursement Office Rent	Zip Code 55486	Office Rent
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Gateway Office Plaza LLC		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2015
Mailing Address SDS-12-2659 PO Box 86		Amount of Each Disbursement this Period 1965.64
City Minneapolis	State MN		Transaction ID : SB17-EX10485
Purpose of Disbursement Office Rent	Zip Code 55486	Office Rent
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5896.92
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 122 OF 122			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Kline for Congress

Full Name (Last, First, Middle Initial) A. Mr. Charles H Gerhardt III		Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2015
Mailing Address 700 Walnut St Ste 450		Amount of Each Disbursement this Period 757.09
City Cincinnati	State OH	Zip Code 45202
Purpose of Disbursement IN-KIND RECEIVED Food and Beverage		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	Transaction ID : SB17-CN51113 In-Kind Received Food and Beverage
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	Zip Code
Purpose of Disbursement		Category/ Type
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:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	Zip Code
Purpose of Disbursement		Category/ Type
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:		

SUBTOTAL of Disbursements This Page (optional).....	757.09
TOTAL This Period (last page this line number only).....	109484.79