

**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

EMMER FOR CONGRESS

ADDRESS (number and street)

PO BOX 998

Check if different
than previously
reported. (ACC)

ANOKA

MN

55303

2. FEC IDENTIFICATION NUMBER ▼

C

C00545749

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

MN

06

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
04 / 01 / 2013

through

M M / D D / Y Y Y Y
06 / 30 / 2013

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 KARIN HOUSLEY

Signature of Treasurer

KARIN HOUSLEY

[Electronically Filed]

Date

M M / D D / Y Y Y Y
07 / 15 / 2013

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

EMMER FOR CONGRESS

Report Covering the Period:

From:

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

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	3

	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))....	225416.40	225416.40
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	225416.40	225416.40
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	20400.08	20400.08
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	20400.08	20400.08
8. Cash on Hand at Close of Reporting Period (from Line 27).....	205016.32	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	11986.24	

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)

PAGE 3 / 45

Write or Type Committee Name

EMMER FOR CONGRESS

Report Covering the Period:

From:

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

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	3

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).....**

208665.80

208665.80

(ii) Unitemized.....

14200.60

14200.60

(iii) TOTAL of contributions from individuals ▶

222866.40

222866.40

(b) Political Party Committees.....

0.00

0.00

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

2550.00

2550.00

(d) The Candidate.....

0.00

0.00

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

225416.40

225416.40

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:**(a) Made or Guaranteed by the Candidate.....**

0.00

0.00

(b) All Other Loans.....

0.00

0.00

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

0.00

0.00

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

0.00

0.00

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

0.00

0.00

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

225416.40

225416.40

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 45

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	20400.08	20400.08
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	20400.08	20400.08

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	225416.40
25. SUBTOTAL (add Line 23 and Line 24).....	225416.40
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	20400.08
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	205016.32

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 45

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 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)
EMMER FOR CONGRESS

A. Full Name (Last, First, Middle Initial) GEORGIANN AMES			Date of Receipt M M / D D / Y Y Y Y 06 / 26 / 2013	
Mailing Address 2000 AMES DRIVE			Transaction ID : SA11AI.4135	
City	State	Zip Code		
BURNSVILLE	MN	55306		
FEC ID number of contributing federal political committee.		C		
Name of Employer HOMEMAKER		Occupation HOMEMAKER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2600.00		
			Amount of Each Receipt this Period 2600.00 CONTRIBUTION	

B. Full Name (Last, First, Middle Initial) GEORGIANN AMES			Date of Receipt M M / D D / Y Y Y Y 06 / 26 / 2013	
Mailing Address 2000 AMES DRIVE			Transaction ID : SA11AI.4136	
City	State	Zip Code		
BURNSVILLE	MN	55306		
FEC ID number of contributing federal political committee.		C		
Name of Employer HOMEMAKER		Occupation HOMEMAKER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 5200.00		
			Amount of Each Receipt this Period 2600.00 CONTRIBUTION	

C. Full Name (Last, First, Middle Initial) RICHARD AMES			Date of Receipt M M / D D / Y Y Y Y 06 / 26 / 2013	
Mailing Address 2000 AMES DRIVE			Transaction ID : SA11AI.4115	
City	State	Zip Code		
BURNSVILLE	MN	55306		
FEC ID number of contributing federal political committee.		C		
Name of Employer AMES CONSTRUCTION INC		Occupation OWNER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2600.00		
			Amount of Each Receipt this Period 2600.00 CONTRIBUTION	

SUBTOTAL of Receipts This Page (optional).....	7800.00
TOTAL This Period (last page this line number only).....	

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

PAGE 6 OF 45

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

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NAME OF COMMITTEE (In Full)

EMMER FOR CONGRESS

Full Name (Last, First, Middle Initial)

RICHARD AMES**A.**

Mailing Address 2000 AMES DRIVE

City

BURNSVILLE

State

MN

Zip Code

55306

FEC ID number of contributing
federal political committee.

C

Name of Employer

AMES CONSTRUCTION INC

Occupation

OWNER

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2013

Transaction ID : SA11AI.4116

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

GEORGE ANDERSON**B.**

Mailing Address 11412 MISSISSIPPI DR N

City

CHAMPLIN

State

MN

Zip Code

55316

FEC ID number of contributing
federal political committee.

C

Name of Employer

CROWN IRON

Occupation

ENGINEER

Receipt For: 2014

☒ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2013

Transaction ID : SA11AI.4124

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

GEORGE ANDERSON**C.**

Mailing Address 11412 MISSISSIPPI DR N

City

CHAMPLIN

State

MN

Zip Code

55316

FEC ID number of contributing
federal political committee.

C

Name of Employer

CROWN IRON

Occupation

ENGINEER

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2013

Transaction ID : SA11AI.4125

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

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

7800.00

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:

PAGE 7 OF 45

(check only one)

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

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NAME OF COMMITTEE (In Full)

EMMER FOR CONGRESS

Full Name (Last, First, Middle Initial)

JAMES ANDERSON

A.

Mailing Address 2801 RIDGEVIEW WAY

City

SIOUX FALLS

State

SD

Zip Code

57105

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2013

Transaction ID : SA11AI.4148

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JAMES ANDERSON

B.

Mailing Address 2801 RIDGEVIEW WAY

City

SIOUX FALLS

State

SD

Zip Code

57105

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2013

Transaction ID : SA11AI.4149

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

TANI AUSTIN

C.

Mailing Address 6641 BEACH ROAD

City

EDEN PRAIRIE

State

MN

Zip Code

55344

FEC ID number of contributing
federal political committee.

C

Name of Employer

STARKEY LABS

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		25		2013

Transaction ID : SA11AI.4209

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

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

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

7800.00

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

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

FOR LINE NUMBER:

PAGE 8 OF 45

(check only one)

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

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NAME OF COMMITTEE (In Full)

EMMER FOR CONGRESS

Full Name (Last, First, Middle Initial)

TANI AUSTIN

A.

Mailing Address 6641 BEACH ROAD

City

EDEN PRAIRIE

State

MN

Zip Code

55344

FEC ID number of contributing
federal political committee.

C

Name of Employer

STARKEY LABS

Occupation

EXECUTIVE

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

5200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		25		2013

Transaction ID : SA11AI.4211

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

WILLIAM AUSTIN

B.

Mailing Address 5334 HARBOR TOWN DR

City

DALLAS

State

TX

Zip Code

75287

FEC ID number of contributing
federal political committee.

C

Name of Employer

STARKEY LABS

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		25		2013

Transaction ID : SA11AI.4207

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

WILLIAM AUSTIN

C.

Mailing Address 5334 HARBOR TOWN DR

City

DALLAS

State

TX

Zip Code

75287

FEC ID number of contributing
federal political committee.

C

Name of Employer

STARKEY LABS

Occupation

EXECUTIVE

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

5200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		25		2013

Transaction ID : SA11AI.4210

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

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

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

7800.00

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

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

FOR LINE NUMBER:

PAGE 9 OF 45

(check only one)

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

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NAME OF COMMITTEE (In Full)

EMMER FOR CONGRESS

Full Name (Last, First, Middle Initial)

JASON BERNICK

A.

Mailing Address 40494 COUNTY ROAD 1

City

RICE

State

MN

Zip Code

56367

FEC ID number of contributing
federal political committee.

C

Name of Employer

BERNICK'S BEVERAGES & VENDING

Occupation

DIR. OF CORP. AFFAIRS

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2013

Transaction ID : SA11AI.4255

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

PAMELA BERNICK

B.

Mailing Address 515 5TH AVE N

City

SAINT CLOUD

State

MN

Zip Code

56303

FEC ID number of contributing
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2013

Transaction ID : SA11AI.4141

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

PAMELA BERNICK

C.

Mailing Address 515 5TH AVE N

City

SAINT CLOUD

State

MN

Zip Code

56303

FEC ID number of contributing
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2013

Transaction ID : SA11AI.4142

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

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

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

5700.00

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

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

FOR LINE NUMBER:

PAGE 10 OF 45

(check only one)

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

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NAME OF COMMITTEE (In Full)

EMMER FOR CONGRESS

Full Name (Last, First, Middle Initial)

JASPER BOND**A.**

Mailing Address 1430 29TH AVE NE

City

SAUK RAPIDS

State

MN

Zip Code

56379

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		24		2013

Transaction ID : SA11AI.4146

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JASPER BOND**B.**

Mailing Address 1430 29TH AVE NE

City

SAUK RAPIDS

State

MN

Zip Code

56379

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

4300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		24		2013

Transaction ID : SA11AI.4232

Amount of Each Receipt this Period

1700.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

CALVIN BRANDT**C.**

Mailing Address 2561 72ND ST SE

City

DELANO

State

MN

Zip Code

55328

FEC ID number of contributing
federal political committee.

C

Name of Employer

CALBRANDT, INC

Occupation

BUSINESS OWNER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2013

Transaction ID : SA11AI.4257

Amount of Each Receipt this Period

500.00

CONTRIBUTION

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

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

4800.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

PAGE 11 OF 45

(check only one)

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

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NAME OF COMMITTEE (In Full)

EMMER FOR CONGRESS

Full Name (Last, First, Middle Initial)

CLEMENT COMMERS**A.**

Mailing Address 1942 GLENHILL ROAD

City

MENDOTA HEIGHTS

State

MN

Zip Code

55118

FEC ID number of contributing
federal political committee.

C

Name of Employer
ST. PAUL LINOLEUMOccupation
INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2013

Transaction ID : SA11AI.4274

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

FRITZ CORRIGAN**B.**

Mailing Address 6509 BISCAYNE BLVD

City

EDINA

State

MN

Zip Code

55436

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		28		2013

Transaction ID : SA11AI.4192

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

FRITZ CORRIGAN**C.**

Mailing Address 6509 BISCAYNE BLVD

City

EDINA

State

MN

Zip Code

55436

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		28		2013

Transaction ID : SA11AI.4194

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

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

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

5700.00

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

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

FOR LINE NUMBER:

PAGE 12 OF 45

(check only one)

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

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NAME OF COMMITTEE (In Full)

EMMER FOR CONGRESS

Full Name (Last, First, Middle Initial)

GLEND A CORRIGAN

A.

Mailing Address 6509 BISCAYNE BLVD

City

EDINA

State

MN

Zip Code

55436

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		28		2013

Transaction ID : SA11AI.4190

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

GLEND A CORRIGAN

B.

Mailing Address 6509 BISCAYNE BLVD

City

EDINA

State

MN

Zip Code

55436

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		28		2013

Transaction ID : SA11AI.4193

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JOAN CUMMINS

C.

Mailing Address 18850 NORTHOME BLVD

City

WAYZATA

State

MN

Zip Code

55391

FEC ID number of contributing
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		04		2013

Transaction ID : SA11AI.4130

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

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

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

7800.00

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 45

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

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NAME OF COMMITTEE (In Full)
EMMER FOR CONGRESS

A. Full Name (Last, First, Middle Initial) JOAN CUMMINS			Date of Receipt M M / D D / Y Y Y Y 06 / 04 / 2013	
Mailing Address 18850 NORTHOME BLVD			Transaction ID : SA11AI.4131	
City	State	Zip Code	Amount of Each Receipt this Period 2600.00	
WAYZATA	MN	55391	CONTRIBUTION	
FEC ID number of contributing federal political committee.		C		
Name of Employer HOMEMAKER		Occupation HOMEMAKER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 5200.00		
B. Full Name (Last, First, Middle Initial) ROBERT CUMMINS			Date of Receipt M M / D D / Y Y Y Y 06 / 04 / 2013	
Mailing Address 18850 NORTHOME BLVD			Transaction ID : SA11AI.4176	
City	State	Zip Code	Amount of Each Receipt this Period 2600.00	
WAYZATA	MN	55391	CONTRIBUTION	
FEC ID number of contributing federal political committee.		C		
Name of Employer PRIMERA TECHNOLOGIES		Occupation PRESIDENT		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2600.00		
C. Full Name (Last, First, Middle Initial) ROBERT CUMMINS			Date of Receipt M M / D D / Y Y Y Y 06 / 04 / 2013	
Mailing Address 18850 NORTHOME BLVD			Transaction ID : SA11AI.4177	
City	State	Zip Code	Amount of Each Receipt this Period 2600.00	
WAYZATA	MN	55391	CONTRIBUTION	
FEC ID number of contributing federal political committee.		C		
Name of Employer PRIMERA TECHNOLOGIES		Occupation PRESIDENT		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 5200.00		
SUBTOTAL of Receipts This Page (optional).....			7800.00	
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:

PAGE 14 OF 45

(check only one)

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

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NAME OF COMMITTEE (In Full)

EMMER FOR CONGRESS

Full Name (Last, First, Middle Initial)

NORANN DILLON

A.

Mailing Address 4700 ITHACA LANE N

City

PLYMOUTH

State

MN

Zip Code

55446

FEC ID number of contributing
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		10		2013

Transaction ID : SA11AI.4240

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

DENNIS DOYLE

B.

Mailing Address 9924 DELL ROAD

City

EDEN PRAIRIE

State

MN

Zip Code

55347

FEC ID number of contributing
federal political committee.

C

Name of Employer

WELSH CO.

Occupation

CEO

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2013

Transaction ID : SA11AI.4251

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ROBERT FAYFIELD

C.

Mailing Address PO BOX 34

City

MINNEAPOLIS

State

MN

Zip Code

55440

FEC ID number of contributing
federal political committee.

C

Name of Employer

BANNER ENGINEERING

Occupation

CEO

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		27		2013

Transaction ID : SA11AI.4118

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

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

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

4600.00

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

FOR LINE NUMBER:

PAGE 15 OF 45

(check only one)

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

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NAME OF COMMITTEE (In Full)

EMMER FOR CONGRESS

Full Name (Last, First, Middle Initial)

ROBERT FAYFIELD**A.**

Mailing Address PO BOX 34

City

MINNEAPOLIS

State

MN

Zip Code

55440

FEC ID number of contributing
federal political committee.

C

Name of Employer

BANNER ENGINEERING

Occupation

CEO

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		27		2013

Transaction ID : SA11AI.4119

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ROBERT FEULING**B.**

Mailing Address 8585 NE RIVER ROAD

City

RICE

State

MN

Zip Code

56367

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		28		2013

Transaction ID : SA11AI.4231

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

DAVID FITZSIMMONS**C.**

Mailing Address 10731 CR 37 NE

City

ALBERTVILLE

State

MN

Zip Code

55301

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

FARMER

Receipt For: 2014

☒ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

1089.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		10		2013

Transaction ID : SA11AI.4249

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

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

5600.00

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

FOR LINE NUMBER:

PAGE 16 OF 45

(check only one)

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

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NAME OF COMMITTEE (In Full)

EMMER FOR CONGRESS

Full Name (Last, First, Middle Initial)

DAVID FITZSIMMONS**A.**

Mailing Address 10731 CR 37 NE

City

ALBERTVILLE

State

MN

Zip Code

55301

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

FARMER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2405.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2013

Transaction ID : SA11AI.4822

Amount of Each Receipt this Period

1315.80

In-kind - FOOD/BEVERAGE

Full Name (Last, First, Middle Initial)

JULIE FRANKLIN**B.**

Mailing Address 13429 COUNTY ROAD 7 NW

City

CLEARWATER

State

MN

Zip Code

55320

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

DENTAL ASSISTANT

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2013

Transaction ID : SA11AI.4263

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

KEITH FRANKLIN**C.**

Mailing Address 13429 COUNTY ROAD 7 NW

City

CLEARWATER

State

MN

Zip Code

55320

FEC ID number of contributing
federal political committee.

C

Name of Employer

FRANKLIN OUTDOOR ADVERTISING

Occupation

PRESIDENT

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2013

Transaction ID : SA11AI.4259

Amount of Each Receipt this Period

500.00

CONTRIBUTION

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

2315.80

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

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

FOR LINE NUMBER:

PAGE 17 OF 45

(check only one)

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

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NAME OF COMMITTEE (In Full)

EMMER FOR CONGRESS

Full Name (Last, First, Middle Initial)

JUSTINE HASELOW

A.

Mailing Address 6408 INTERLACHEN BLVD

City

EDINA

State

MN

Zip Code

55436

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

PHYSICIAN

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		24		2013

Transaction ID : SA11AI.4205

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ROBERT HASELOW MD

B.

Mailing Address 6408 INTERLACHEN BLVD

City

EDINA

State

MN

Zip Code

55436

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		24		2013

Transaction ID : SA11AI.4184

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ASHLEY HAYDEN

C.

Mailing Address 4560 KRISTIN LANE

City

MAPLE PLAIN

State

MN

Zip Code

55359

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2013

Transaction ID : SA11AI.4151

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

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

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

7800.00

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 45

(check only one)

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

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NAME OF COMMITTEE (In Full)

EMMER FOR CONGRESS

Full Name (Last, First, Middle Initial)

ASHLEY HAYDEN

A.

Mailing Address 4560 KRISTIN LANE

City

MAPLE PLAIN

State

MN

Zip Code

55359

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2013

Transaction ID : SA11AI.4226

Amount of Each Receipt this Period

2400.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

BONNIE HAYDEN

B.

Mailing Address 6704 PARKWOOD LANE

City

EDINA

State

MN

Zip Code

55436

FEC ID number of contributing
federal political committee.

C

Name of Employer

GOLD MINE ANTIQUES

Occupation

PARTNER

Receipt For: 2014

☒ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		11		2013

Transaction ID : SA11AI.4127

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

BONNIE HAYDEN

C.

Mailing Address 6704 PARKWOOD LANE

City

EDINA

State

MN

Zip Code

55436

FEC ID number of contributing
federal political committee.

C

Name of Employer

GOLD MINE ANTIQUES

Occupation

PARTNER

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		11		2013

Transaction ID : SA11AI.4128

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

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

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

7600.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

EMMER FOR CONGRESS

Full Name (Last, First, Middle Initial)

BRENTON HAYDEN

A.

Mailing Address 500 KRISTIN LANE

City

MAPLE PLAIN

State

MN

Zip Code

55359

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2013

Transaction ID : SA11AI.4153

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

BRENTON HAYDEN

B.

Mailing Address 500 KRISTIN LANE

City

MAPLE PLAIN

State

MN

Zip Code

55359

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2013

Transaction ID : SA11AI.4227

Amount of Each Receipt this Period

2400.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MICHAEL HAYDEN

C.

Mailing Address 6704 PARKWOOD LANE

City

EDINA

State

MN

Zip Code

55436

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		11		2013

Transaction ID : SA11AI.4181

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

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

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

7600.00

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

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

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NAME OF COMMITTEE (In Full)

EMMER FOR CONGRESS

Full Name (Last, First, Middle Initial)

MICHAEL HAYDEN**A.**

Mailing Address 6704 PARKWOOD LANE

City

EDINA

State

MN

Zip Code

55436

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		11		2013

Transaction ID : SA11AI.4182

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JERRY HERTAUS**B.**

Mailing Address 8055 DAVIS STREET

City

LORETTO

State

MN

Zip Code

55357

FEC ID number of contributing
federal political committee.

C

Name of Employer

OMEGA DEVELOPMENT INC

Occupation

PRESIDENT

Receipt For: 2014

☒ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		25		2013

Transaction ID : SA11AI.4168

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

LOUIS HILL**C.**

Mailing Address 1315 RED FOX ROAD

City

ARDEN HILLS

State

MN

Zip Code

55112

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		20		2013

Transaction ID : SA11AI.4217

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

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

7700.00

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:

PAGE 21 OF 45

(check only one)

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

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NAME OF COMMITTEE (In Full)

EMMER FOR CONGRESS

Full Name (Last, First, Middle Initial)

KARIN HOUSLEY

A.

Mailing Address PO BOX 7

City

LAKELAND

State

MN

Zip Code

55043

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		23		2013

Transaction ID : SA11AI.4229

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ROSA HOW

B.

Mailing Address 2243 50TH ST NE

City

BUFFALO

State

MN

Zip Code

55313

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2013

Transaction ID : SA11AI.4267

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

STAN HUBBARD

C.

Mailing Address 3415 UNIVERSITY AVE W

City

SAINT PAUL

State

MN

Zip Code

55114

FEC ID number of contributing
federal political committee.

C

Name of Employer

HUBBARD BROADCASTING

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		25		2013

Transaction ID : SA11AI.4144

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

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

5100.00

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

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NAME OF COMMITTEE (In Full)
EMMER FOR CONGRESS

A. Full Name (Last, First, Middle Initial) WILLIAM HUDLOW			Date of Receipt M M / D D / Y Y Y Y 06 / 13 / 2013	
Mailing Address 480 W PADDOCK CIRCLE			Transaction ID : SA11AI.4281	
City	State	Zip Code	Amount of Each Receipt this Period 250.00	
WAYZATA	MN	55391	CONTRIBUTION	
FEC ID number of contributing federal political committee. C				
Name of Employer HAMPSHIRE LABS		Occupation MANAGER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		
B. Full Name (Last, First, Middle Initial) MARTIN KELLOGG			Date of Receipt M M / D D / Y Y Y Y 06 / 26 / 2013	
Mailing Address 339 MOUNT CURVE BLVD			Transaction ID : SA11AI.4278	
City	State	Zip Code	Amount of Each Receipt this Period 2600.00	
SAINT PAUL	MN	55105	CONTRIBUTION	
FEC ID number of contributing federal political committee. C				
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2600.00		
C. Full Name (Last, First, Middle Initial) MARTIN KELLOGG			Date of Receipt M M / D D / Y Y Y Y 06 / 26 / 2013	
Mailing Address 339 MOUNT CURVE BLVD			Transaction ID : SA11AI.4279	
City	State	Zip Code	Amount of Each Receipt this Period 400.00	
SAINT PAUL	MN	55105	CONTRIBUTION	
FEC ID number of contributing federal political committee. C				
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 3000.00		
SUBTOTAL of Receipts This Page (optional).....			3250.00	
TOTAL This Period (last page this line number only).....				

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

EMMER FOR CONGRESS

Full Name (Last, First, Middle Initial)

SHEILA KIHNE**A.**

Mailing Address 11683 WELTERS WAY

City

EDEN PRAIRIE

State

MN

Zip Code

55347

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKEROccupation
HOMEMAKER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		28		2013

Transaction ID : SA11AI.4261

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JENNIFER KNUTH**B.**

Mailing Address 887 HIGHLANDER TRAIL

City

HUDSON

State

MN

Zip Code

54016

FEC ID number of contributing
federal political committee.

C

Name of Employer
JOHNSON & JOHNSONOccupation
ADMINISTRATIVE ASST.

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		24		2013

Transaction ID : SA11AI.4158

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

STEVEN KNUTH**C.**

Mailing Address 887 HIGHLANDER TRAIL

City

HUDSON

State

MN

Zip Code

54016

FEC ID number of contributing
federal political committee.

C

Name of Employer
PUBLIC AFFAIRS COOccupation
OWNER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		18		2013

Transaction ID : SA11AI.4179

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

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

5700.00

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

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

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NAME OF COMMITTEE (In Full)

EMMER FOR CONGRESS

Full Name (Last, First, Middle Initial)

THOMAS KORDONOWY

A.

Mailing Address 20500 LAKEVIEW AVE

City

EXCELSIOR

State

MN

Zip Code

55331

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		27		2013

Transaction ID : SA11AI.4188

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

CHRISTOPHER LEINES

B.

Mailing Address PO BOX 353

City

LORETTO

State

MN

Zip Code

55357

FEC ID number of contributing
federal political committee.

C

Name of Employer

MINNESOTA LIMITED INC

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		10		2013

Transaction ID : SA11AI.4163

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

WENDY LEINES

C.

Mailing Address PO BOX 353

City

LORETTO

State

MN

Zip Code

55357

FEC ID number of contributing
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		10		2013

Transaction ID : SA11AI.4133

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

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

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

7800.00

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

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

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NAME OF COMMITTEE (In Full)

EMMER FOR CONGRESS

Full Name (Last, First, Middle Initial)

LARRY LEJEUNE

A.

Mailing Address 2820 COUNTY ROAD 24

City

LONG LAKE

State

MN

Zip Code

55356

FEC ID number of contributing
federal political committee.

C

Name of Employer

CAROUSEL AUTO IMPORTS

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M / D D / Y Y Y Y
06 30 2013

Transaction ID : SA11AI.4121

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

LARRY LEJEUNE

B.

Mailing Address 2820 COUNTY ROAD 24

City

LONG LAKE

State

MN

Zip Code

55356

FEC ID number of contributing
federal political committee.

C

Name of Employer

CAROUSEL AUTO IMPORTS

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M / D D / Y Y Y Y
06 30 2013

Transaction ID : SA11AI.4122

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

RYAN MARVIN

C.

Mailing Address 3625 EILEEN STREET

City

MAPLE PLAIN

State

MN

Zip Code

55359

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
06 30 2013

Transaction ID : SA11AI.4246

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

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

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

6200.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

EMMER FOR CONGRESS

Full Name (Last, First, Middle Initial)

CHARLES MCCROSSAN

A.

Mailing Address PO BOX 1240

City

MAPLE GROVE

State

MN

Zip Code

55311

FEC ID number of contributing
federal political committee.

C

Name of Employer

MCCROSSAN COMPANY

Occupation

CEO

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2013

Transaction ID : SA11AI.4160

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

CHARLES MCCROSSAN

B.

Mailing Address PO BOX 1240

City

MAPLE GROVE

State

MN

Zip Code

55311

FEC ID number of contributing
federal political committee.

C

Name of Employer

MCCROSSAN COMPANY

Occupation

CEO

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2013

Transaction ID : SA11AI.4161

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

CUSHMAN MINAR

C.

Mailing Address 4660 WESTON WOODS WAY

City

SAINT PAUL

State

MN

Zip Code

55127

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		25		2013

Transaction ID : SA11AI.4186

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

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

7800.00

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:

PAGE 27 OF 45

(check only one)

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

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NAME OF COMMITTEE (In Full)

EMMER FOR CONGRESS

Full Name (Last, First, Middle Initial)

CHUCK MOOTY

Mailing Address 1805 W LAKE STREET

City

MINNEAPOLIS

State

MN

Zip Code

55408

FEC ID number of contributing
federal political committee.

C

Name of Employer

FAIRVIEW

Occupation

INTERIM CEO

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2013

Transaction ID : SA11AI.4213

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ELIZABETH MOOTY

Mailing Address 1805 W LAKE STREET

City

MINNEAPOLIS

State

MN

Zip Code

55408

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

NONE

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2013

Transaction ID : SA11AI.4221

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

DENNIS NGUYEN

Mailing Address 2740 W LAKE OF THE ISLES PKWY

City

MINNEAPOLIS

State

MN

Zip Code

55416

FEC ID number of contributing
federal political committee.

C

Name of Employer

BEAN COUNTER COFFEE

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		15		2013

Transaction ID : SA11AI.4253

Amount of Each Receipt this Period

500.00

CONTRIBUTION

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

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

5500.00

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

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

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 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
EMMER FOR CONGRESS

A. Full Name (Last, First, Middle Initial) HOWARD O'CONNELL			Date of Receipt M M / D D / Y Y Y Y 06 / 26 / 2013	
Mailing Address 1649 QUESTWOOD DRIVE			Transaction ID : SA11AI.4248	
City	State	Zip Code	Amount of Each Receipt this Period 1000.00	
FALCON HEIGHTS	MN	55113	CONTRIBUTION	
FEC ID number of contributing federal political committee.		C		
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00		
B. Full Name (Last, First, Middle Initial) PATRICK O'NEILL			Date of Receipt M M / D D / Y Y Y Y 06 / 26 / 2013	
Mailing Address 4532 HILLSBORO AVE N			Transaction ID : SA11AI.4270	
City	State	Zip Code	Amount of Each Receipt this Period 500.00	
NEW HOPE	MN	55428	CONTRIBUTION	
FEC ID number of contributing federal political committee.		C		
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		
C. Full Name (Last, First, Middle Initial) ROGER OLSON			Date of Receipt M M / D D / Y Y Y Y 06 / 29 / 2013	
Mailing Address 15777 795TH AVE			Transaction ID : SA11AI.4265	
City	State	Zip Code	Amount of Each Receipt this Period 500.00	
GLENVILLE	MN	56036	CONTRIBUTION	
FEC ID number of contributing federal political committee.		C		
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		
SUBTOTAL of Receipts This Page (optional).....			2000.00	
TOTAL This Period (last page this line number only).....				

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

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

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NAME OF COMMITTEE (In Full)
EMMER FOR CONGRESS

A. Full Name (Last, First, Middle Initial) DARRYLE OWENS			Date of Receipt M M / D D / Y Y Y Y 06 / 29 / 2013	
Mailing Address 2119 E LAKE OF THE ISLES PKWY			Transaction ID : SA11AI.4165	
City MINNEAPOLIS	State MN	Zip Code 55405	Amount of Each Receipt this Period 2600.00	
FEC ID number of contributing federal political committee. C			CONTRIBUTION	
Name of Employer NONE		Occupation NONE		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2600.00		
B. Full Name (Last, First, Middle Initial) DARRYLE OWENS			Date of Receipt M M / D D / Y Y Y Y 06 / 29 / 2013	
Mailing Address 2119 E LAKE OF THE ISLES PKWY			Transaction ID : SA11AI.4166	
City MINNEAPOLIS	State MN	Zip Code 55405	Amount of Each Receipt this Period 2600.00	
FEC ID number of contributing federal political committee. C			CONTRIBUTION	
Name of Employer NONE		Occupation NONE		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 5200.00		
C. Full Name (Last, First, Middle Initial) DAWN OWENS			Date of Receipt M M / D D / Y Y Y Y 06 / 29 / 2013	
Mailing Address 2119 E LAKE OF THE ISLES PKWY			Transaction ID : SA11AI.4138	
City MINNEAPOLIS	State MN	Zip Code 55405	Amount of Each Receipt this Period 2600.00	
FEC ID number of contributing federal political committee. C			CONTRIBUTION	
Name of Employer HOMEMAKER		Occupation HOMEMAKER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2600.00		
SUBTOTAL of Receipts This Page (optional).....			7800.00	
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
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

EMMER FOR CONGRESS

Full Name (Last, First, Middle Initial)

DAWN OWENS

A.

Mailing Address 2119 E LAKE OF THE ISLES PKWY

City

MINNEAPOLIS

State

MN

Zip Code

55405

FEC ID number of contributing
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2013

Transaction ID : SA11AI.4139

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

TERI POPP

B.

Mailing Address 1305 SHORELINE DRIVE

City

WAYZATA

State

MN

Zip Code

55391

FEC ID number of contributing
federal political committee.

C

Name of Employer

POPP.COM

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		15		2013

Transaction ID : SA11AI.4173

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

TERI POPP

C.

Mailing Address 1305 SHORELINE DRIVE

City

WAYZATA

State

MN

Zip Code

55391

FEC ID number of contributing
federal political committee.

C

Name of Employer

POPP.COM

Occupation

EXECUTIVE

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		15		2013

Transaction ID : SA11AI.4174

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

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

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

7800.00

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

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

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NAME OF COMMITTEE (In Full)

EMMER FOR CONGRESS

Full Name (Last, First, Middle Initial)

WILLIAM POPP**A.**

Mailing Address 1305 SHORELINE DRIVE

City

WAYZATA

State

MN

Zip Code

55391

FEC ID number of contributing
federal political committee.

C

Name of Employer

POPP TELECOM

Occupation

OWNER

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		12		2013

Transaction ID : SA11AI.4170

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

WILLIAM POPP

Mailing Address 1305 SHORELINE DRIVE

City

WAYZATA

State

MN

Zip Code

55391

FEC ID number of contributing
federal political committee.

C

Name of Employer

POPP TELECOM

Occupation

OWNER

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		15		2013

Transaction ID : SA11AI.4171

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

BRITTANY REGER

Mailing Address 3565 FREDERICK AVE

City

WAYZATA

State

MN

Zip Code

55391

FEC ID number of contributing
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		19		2013

Transaction ID : SA11AI.4215

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

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

7700.00

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
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(check only one)

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

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NAME OF COMMITTEE (In Full)

EMMER FOR CONGRESS

Full Name (Last, First, Middle Initial)

MICHAEL REGER

A.

Mailing Address 3565 FREDERICK AVE

City

WAYZATA

State

MN

Zip Code

55391

FEC ID number of contributing
federal political committee.

C

Name of Employer

NORTHERN OIL AND GAS

Occupation

CEO

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		19		2013

Transaction ID : SA11AI.4223

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JULIE ROSEN

B.

Mailing Address 105 CEDAR BLUFF DRIVE

City

FAIRMONT

State

MN

Zip Code

56031

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2013

Transaction ID : SA11AI.4816

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

P ROSENSTIEL

C.

Mailing Address 1403 MCKINLEY STREET

City

SAINT PAUL

State

MN

Zip Code

55108

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		28		2013

Transaction ID : SA11AI.4244

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

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 33 OF 45

(check only one)

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

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NAME OF COMMITTEE (In Full)

EMMER FOR CONGRESS

Full Name (Last, First, Middle Initial)

P ROSENSTIEL

A.

Mailing Address 1403 MCKINLEY STREET

City

SAINT PAUL

State

MN

Zip Code

55108

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2013

Transaction ID : SA11AI.4268

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

TOM ROTHSTEIN

B.

Mailing Address 2072 SHOREWOOD LANE

City

MOUND

State

MN

Zip Code

55364

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2013

Transaction ID : SA11AI.4242

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ELIZABETH RUSSOMANNO

C.

Mailing Address 1351 CHATTERTON ROAD

City

SAINT PAUL

State

MN

Zip Code

55123

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2013

Transaction ID : SA11AI.4196

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

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

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

4100.00

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

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

FOR LINE NUMBER:

PAGE 34 OF 45

(check only one)

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

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NAME OF COMMITTEE (In Full)

EMMER FOR CONGRESS

Full Name (Last, First, Middle Initial)

ELIZABETH RUSSOMANNO

A.

Mailing Address 1351 CHATTERTON ROAD

City

SAINT PAUL

State

MN

Zip Code

55123

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2013

Transaction ID : SA11AI.4199

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

FRANK RUSSOMANNO

B.

Mailing Address 1351 CHATTERTON ROAD

City

SAINT PAUL

State

MN

Zip Code

55123

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2013

Transaction ID : SA11AI.4198

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

FRANK RUSSOMANNO

C.

Mailing Address 1351 CHATTERTON ROAD

City

SAINT PAUL

State

MN

Zip Code

55123

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2013

Transaction ID : SA11AI.4200

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

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

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

7800.00

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

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

FOR LINE NUMBER:

PAGE 35 OF 45

(check only one)

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

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NAME OF COMMITTEE (In Full)

EMMER FOR CONGRESS

Full Name (Last, First, Middle Initial)

ROGER SABOT

A.

Mailing Address PO BOX 333

City

ROGERS

State

MN

Zip Code

55374

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2013

Transaction ID : SA11AI.4155

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ROGER SABOT

B.

Mailing Address PO BOX 333

City

ROGERS

State

MN

Zip Code

55374

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2013

Transaction ID : SA11AI.4156

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ROBERT SCHROEDER

C.

Mailing Address 1707 SUMMIT AVE

City

MINNEAPOLIS

State

MN

Zip Code

55403

FEC ID number of contributing
federal political committee.

C

Name of Employer

STATE OF MN

Occupation

DEPUTY SEC OF STATE

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		10		2013

Transaction ID : SA11AI.4276

Amount of Each Receipt this Period

500.00

CONTRIBUTION

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

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

5700.00

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

FOR LINE NUMBER:

PAGE 36 OF 45

(check only one)

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

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NAME OF COMMITTEE (In Full)

EMMER FOR CONGRESS

Full Name (Last, First, Middle Initial)

RONALD SCHUTZ**A.**

Mailing Address 865 NAVAJO ROAD W

City

MEDINA

State

MN

Zip Code

55340

FEC ID number of contributing
federal political committee.

C

Name of Employer

ROBINS, KAPLAN, MILLER & CIRE

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		28		2013

Transaction ID : SA11AI.4272

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

GERALD SECK**B.**

Mailing Address 7900 XERXES AVE S

City

BLOOMINGTON

State

MN

Zip Code

55431

FEC ID number of contributing
federal political committee.

C

Name of Employer

LARKIN HOFFMAN & LINDGREN

Occupation

LOBBYIST

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		24		2013

Transaction ID : SA11AI.4285

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

WILLIAM SLATTERY**C.**

Mailing Address 21955 MINNETONKA BLVD

City

GREENWOOD

State

MN

Zip Code

55331

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		28		2013

Transaction ID : SA11AI.4234

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

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

3350.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

PAGE 37 OF 45

(check only one)

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

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NAME OF COMMITTEE (In Full)

EMMER FOR CONGRESS

Full Name (Last, First, Middle Initial)

WILLIAM SLATTERY**A.**

Mailing Address 21955 MINNETONKA BLVD

City

GREENWOOD

State

MN

Zip Code

55331

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

4000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		28		2013

Transaction ID : SA11AI.4235

Amount of Each Receipt this Period

1400.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

WARREN STALEY**B.**

Mailing Address 4517 EDINA BLVD

City

EDINA

State

MN

Zip Code

55424

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2013

Transaction ID : SA11AI.4202

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

WARREN STALEY**C.**

Mailing Address 4517 EDINA BLVD

City

EDINA

State

MN

Zip Code

55424

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2013

Transaction ID : SA11AI.4203

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

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

6600.00

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 45

(check only one)

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

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NAME OF COMMITTEE (In Full)

EMMER FOR CONGRESS

Full Name (Last, First, Middle Initial)

JEFFREY VERDOORN

A.

Mailing Address 2300 RIDGE DRIVE

City

MINNEAPOLIS

State

MN

Zip Code

55416

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2013

Transaction ID : SA11AI.4219

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

PHILIP WEBER

B.

Mailing Address 2160 SPRUCE TRAIL

City

GOLDEN VALLEY

State

MN

Zip Code

55422

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2013

Transaction ID : SA11AI.4283

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

DALE ZOERB

C.

Mailing Address 2621 WEXFORD HEIGHTS LANE

City

NEW BRIGHTON

State

MN

Zip Code

55112

FEC ID number of contributing
federal political committee.

C

Name of Employer

BUILDING RESTORATION CORP.

Occupation

PRESIDENT

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		25		2013

Transaction ID : SA11AI.4239

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

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

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

3750.00

208665.80

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EMMER FOR CONGRESS

A. Full Name (Last, First, Middle Initial) FREEDOM'S DEFENSE FUND		Date of Receipt M M / D D / Y Y Y Y 06 / 26 / 2013	
Mailing Address 1155 15TH ST NW		Transaction ID : SA11C.4225	
City WASHINGTON	State DC	Zip Code 20005	Amount of Each Receipt this Period 2500.00 CONTRIBUTION
FEC ID number of contributing federal political committee. C C00401786			
Name of Employer	Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00		

B. Full Name (Last, First, Middle Initial) FRIENDS FOR DAVID FITZSIMMONS		Date of Receipt M M / D D / Y Y Y Y 06 / 05 / 2013	
Mailing Address 10731 COUNTY ROAD 37 NE		Transaction ID : SA11C.4554	
City ALBERTVILLE	State MN	Zip Code 55301	Amount of Each Receipt this Period 50.00 CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 50.00		

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

SUBTOTAL of Receipts This Page (optional).....	2550.00
TOTAL This Period (last page this line number only).....	2550.00

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

PAGE 40 OF 45

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

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NAME OF COMMITTEE (In Full)

EMMER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ARISTOTLE INTERNATIONAL

Mailing Address 205 PENNSYLVANIA AVE SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
COMPUTER SERVICES/SUPPORT

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2013

Amount of Each Disbursement this Period

700.00

Transaction ID : SB17.4110

B. ARISTOTLE INTERNATIONAL

Mailing Address 205 PENNSYLVANIA AVE SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2013

Amount of Each Disbursement this Period

351.50

Transaction ID : SB17.4113

C. ROBERT BENSON

Mailing Address 160 90TH LANE NE

City	State	Zip Code
BLAINE	MN	55434

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2013

Amount of Each Disbursement this Period

309.65

Transaction ID : SB17.4102

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

1361.15

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB
.

Form/Schedule: SB17

Transaction ID : SB17.4102

No itemization required

Form/Schedule:

Transaction ID:

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

PAGE 42 OF 45

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

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NAME OF COMMITTEE (In Full)

EMMER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CIVIS COMMUNICATIONSMailing Address TWO CARLSON PARKWAY
SUITE 375

City PLYMOUTH State MN Zip Code 55447

Purpose of Disbursement
FUNDRAISING CONSULTING/AUDIO-VIDEO PROD.

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		26		2013

Amount of Each Disbursement this Period

7325.65

Transaction ID : SB17.4826

B. TOM EMMER

Mailing Address 1190 HIDDEN HILLS DR

City DELANO State MN Zip Code 55328

Purpose of Disbursement
TRAVEL/FOOD & BEVERAGE

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2013

Amount of Each Disbursement this Period

931.32

Transaction ID : SB17.4104

C. EMMER FOR GOVERNOR

Mailing Address 5160 MALIBU DR

City EDINA State MN Zip Code 55436

Purpose of Disbursement
LIST RENTAL EXPENSE

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2013

Amount of Each Disbursement this Period

3698.00

Transaction ID : SB17.4112

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

11954.97

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB
.

Form/Schedule: SB17

Transaction ID : SB17.4104

No itemization required

Form/Schedule:

Transaction ID:

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

PAGE 45 OF 45

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

NAME OF COMMITTEE (In Full)

EMMER FOR CONGRESS

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

CIVIS COMMUNICATIONS

Nature of Debt (Purpose):

FUNDRAISING CONSULTINGMailing Address TWO CARLSON PARKWAY
SUITE 375City State Zip Code
PLYMOUTH MN 55447

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4824

Amount Incurred This Period

11986.24

Payment This Period

0.00

Outstanding Balance at Close of This Period

11986.24

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

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

11986.24

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

11986.24

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

0.00

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

11986.24