

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

DORSEY NATIONAL FUND

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

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand January 1, <input type="text" value="2013"/> | | 10274.24 |
| (b) Cash on Hand at Beginning of Reporting Period..... | 9684.24 | |
| (c) Total Receipts (from Line 19) | 5000.00 | 10000.00 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | 14684.24 | 20274.24 |
| 7. Total Disbursements (from Line 31)..... | 4590.00 | 10180.00 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | 10094.24 | 10094.24 |
| 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) | 0.00 | |

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

DORSEY NATIONAL FUND

Report Covering the Period: From: 04 / 01 / 2013 To: 06 / 30 / 2013

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 0.00 | 0.00 |
| (ii) Unitemized | 5000.00 | 5000.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶ | 5000.00 | 5000.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 5000.00 | 5000.00 |
| 12. Transfers From Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received..... | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00 | 0.00 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... | 0.00 | 5000.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | 0.00 | 0.00 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3)..... | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfers (add 18(a) and 18(b)).. | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶ | 5000.00 | 10000.00 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶ | 5000.00 | 10000.00 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures | 0.00 | 0.00 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 0.00 | 0.00 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 3100.00 | 3600.00 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. 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 28(a), (b), and (c))..... | 0.00 | 0.00 |
| 29. Other Disbursements | 1490.00 | 6580.00 |
| 30. Federal Election Activity (2 U.S.C. §431(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share..... | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b)).... | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | 4590.00 | 10180.00 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 4590.00 | 10180.00 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 5000.00 | 5000.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 5000.00 | 5000.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 0.00 | 0.00 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 0.00 | 0.00 |

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

| | | | |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 6 OF 11 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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

NAME OF COMMITTEE (In Full)
DORSEY NATIONAL FUND

| | | |
|---|-----------------------------------|---|
| Full Name (Last, First, Middle Initial) A. Michael Ahern | | Date of Receipt MM / DD / YYYY 06 / 28 / 2013 |
| Mailing Address 50 South Sixth Street | | Transaction ID : SA11AI.7512 |
| City Minneapolis | State MN | Zip Code 55402 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 25.00 |
| Name of Employer Dorsey & Whitney LLP | Occupation Lawyer | [MEMO ITEM] |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 77.89 | |

| | | |
|---|-----------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Lynnette S Crandall | | Date of Receipt MM / DD / YYYY 06 / 28 / 2013 |
| Mailing Address 50 South Sixth Street STE 1500 | | Transaction ID : SA11AI.7513 |
| City Minneapolis | State MN | Zip Code 55402 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 25.00 |
| Name of Employer Dorsey & Whitney LLP | Occupation Lawyer | [MEMO ITEM] |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 66.56 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Philippe Oman | | Date of Receipt MM / DD / YYYY 06 / 28 / 2013 |
| Mailing Address 50 South Sixth Street | | Transaction ID : SA11AI.7514 |
| City Minneapolis | State MN | Zip Code 55402 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100.00 |
| Name of Employer Dorsey & Whitney LLP | Occupation Accountant | [MEMO ITEM] |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 200.00 | |

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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

FOR LINE NUMBER: PAGE 7 OF 11
(check only one)

| | | | | | | | | |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)
DORSEY NATIONAL FUND

A. Full Name (Last, First, Middle Initial)
Rose Wilson

Mailing Address 50 South Sixth Street

City State Zip Code
Minneapolis MN 55402

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

Name of Employer Occupation
Dorsey & Whitney LLP Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100.00

Date of Receipt
MM / DD / YYYY
06 / 28 / 2013

Transaction ID : SA11AI.7515

Amount of Each Receipt this Period
50.00

[MEMO ITEM]

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) ▼

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY

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) ▼

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| TOTAL This Period (last page this line number only).....▶ | 0.00 |

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

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

FOR LINE NUMBER:
(check only one)

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
DORSEY NATIONAL FUND

Full Name (Last, First, Middle Initial)

A. CORY BOOKER FOR SENATE

Mailing Address PO BOX 32237

City NEWARK State NJ Zip Code 07102

Purpose of Disbursement
Political Contribution

011

Candidate Name
CORY A BOOKER

Category/
Type

Office Sought: House
 Senate
 President
State: NJ District: 00

Disbursement For: 2013
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Transaction ID : **SB23.7657**

Amount of Each Disbursement this Period

2600.00

Full Name (Last, First, Middle Initial)

B. ROUNDS FOR SENATE

Mailing Address PO BOX 250
223 E CAPITOL AVENUE

City PIERRE State SD Zip Code 57501

Purpose of Disbursement
Political Contribution

011

Candidate Name
MARION MICHAEL ROUNDS

Category/
Type

Office Sought: House
 Senate
 President
State: SD District: 00

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Transaction ID : **SB23.7505**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

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

3100.00

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

3100.00

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

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

FOR LINE NUMBER:
(check only one)

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
DORSEY NATIONAL FUND

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Bruce Harrell for Mayer | | Date of Disbursement MM / DD / YYYY 05 / 01 / 2013 |
| Mailing Address P.O. Box 221005 | | Transaction ID : SB29.7522 |
| City Seattle | State WA | |
| Purpose of Disbursement Non-Federal Contribution | | Amount of Each Disbursement this Period 200.00 |
| Candidate Name Bruce Harrell | | Category/ Type 011 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Dorsey & Whitney LLP | | Date of Disbursement MM / DD / YYYY 06 / 13 / 2013 |
| Mailing Address 50 South Sixth Street | | Transaction ID : SB29.7510 |
| City Minneapolis | State MN | |
| Purpose of Disbursement Administrative/Overhead Expenses | | Amount of Each Disbursement this Period 90.00 |
| Candidate Name | | Category/ Type 001 |
| 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. Friends of Dow Constantine | | Date of Disbursement MM / DD / YYYY 05 / 01 / 2013 |
| Mailing Address P.O. Box 16285 | | Transaction ID : SB29.7531 |
| City Seattle | State WA | |
| Purpose of Disbursement Non-Federal Contribution | | Amount of Each Disbursement this Period 200.00 |
| Candidate Name Dow Constantine | | Category/ Type 011 |
| 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).....▶ | 490.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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

FOR LINE NUMBER:
(check only one)

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
DORSEY NATIONAL FUND

Full Name (Last, First, Middle Initial)

A. People for Richard Conlin

Mailing Address P.O. Box 22318

City State Zip Code
Seattle WA 98122

Purpose of Disbursement
Non-Federal Contribution

011

Candidate Name

Richard Conlin

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 01 / 2013

Transaction ID : SB29.7528

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

B. Pete Lewis for Port of Seattle Commission

Mailing Address P.O. Box 3022

City State Zip Code
Seattle WA 98113

Purpose of Disbursement
Non-Federal Contribution

011

Candidate Name

Pete Lewis

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 05 / 2013

Transaction ID : SB29.7516

Amount of Each Disbursement this Period

400.00

Full Name (Last, First, Middle Initial)

C. Re-Elect Albro for Port

Mailing Address P.O. Box 2398

City State Zip Code
Auburn WA 98071

Purpose of Disbursement
Non-Federal Contribution

011

Candidate Name

Tom Albro

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 05 / 2013

Transaction ID : SB29.7519

Amount of Each Disbursement this Period

200.00

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

800.00

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

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

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

FOR LINE NUMBER:
(check only one)

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
DORSEY NATIONAL FUND

Full Name (Last, First, Middle Initial)

A. Sally Bagshaw for Seattle City Council

Mailing Address P.O. Box 21171

City State Zip Code
Seattle WA 98111

Purpose of Disbursement
Non-Federal Contribution

011

Candidate Name

Sally Bagshaw

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 01 / 2013

Transaction ID : SB29.7525

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

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 Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

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 Y Y

Amount of Each Disbursement this Period

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

200.00

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

1490.00