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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An A	Authorized Com	mittee	Offic	ce Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRIN		cample: If typing, type er the lines.	12FE4M5	
Gerson for Cong	ress				1
ADDRESS (number and st	treet) PO Box 1465				
▼ Check if differe	ont.				
than previously reported. (ACC	Burnsville			MN 5533	37
		CITY ▲		STATE ▲	ZIP CODE ▲
P. FEC IDENTIFICAT	ION NUMBER V				STATE ▼ DISTRICT
C C00523738		3. IS THIS REPORT	NEW (N) OR	AMENDED (A)	MN
		<u> </u>			
I. TYPE OF REPO		(b) 12-Day PRE	-Election Report for t	he:	
(a) Quarterly Repo	rts:	П	Primary (12P)	General (12G)	Runoff (12R)
April 15 Qu	uarterly Report (Q1)	Ē			
✗ July 15 Qu	arterly Report (Q2)		Convention (12C)	Special (12S)	
October 15	Quarterly Report (Q3)	Election on	M M / D C) / Y Y Y Y	in the State of
January 31	Year-End Report (YE)	(c) 30-Day POS	ST -Election Report for	the:	
			General (30G)	Runoff (30R)	Special (30S)
Termination	n Report (TER)	Election on	M M / D C) / Y Y Y Y	in the State of
i. Covering Period	M M / D D /	Y Y Y Y Y 2020	through	06 / D D / Y	Y Y Y Z020
certify that I have exan			nowledge and belief it	is true, correct and cor	mplete.
Type or Print Name of T	Gerson, Davi reasurer	u, , ,			
Signature of Treasurer	Gerson, David, , ,		[Electronically Filed]	Date 07	04 / Y Y Y Y Y Y Y 2020
NOTE: Submission of false	e, erroneous, or incomple	ete information may	subject the person sign	ning this Report to the pe	enalties of 52 U.S.C. §3010
Office		a.ion may		l lopoit to the pe	
Use					FEC FORM 3 (Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

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FEC Form 3 (Revised 05/2016)

Write or Type Committee Name Gerson for Congress

R	epor	t Covering the Period: From:	04 01 Y Y Y Y Y Y TO:	M06 ^M / 30 ^D / Y 2020 Y
			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))	0.00	0.00
	(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))	0.00	0.00
7.	Net	Operating Expenditures		
	(a)	Total Operating Expenditures (from Line 17)	0.00	0.00
	(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))	0.00	0.00
8.		sh on Hand at Close of porting Period (from Line 27)	0.00	
9.	the	ots and Obligations Owed TO Committee (Itemize all on a sedule C and/or Schedule D)	0.00	
10.	the	ots and Obligations Owed BY Committee (Itemize all on needule C and/or Schedule D)	171460.36	

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 05/2016)

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Write or Type Committee Name

Gerson for Congress

	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date		
1.	CONTRIBUTIONS (other than loans) FROM:				
	(a) Individuals/Persons Other Than				
	Political Committees (i) Itemized (use Schedule A)	0.00	0.00		
	(ii) Unitemized	0.00	0.00		
	(iii) TOTAL of contributions from individuals	0.00	0.00		
	(b) Political Party Committees	0.00	0.00		
	(c) Other Political Committees (such as PACs)	0.00	0.00		
	(d) The Candidate	0.00	0.00		
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	0.00		
2.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00		
3.	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		
1.	OFFSETS TO OPERATING				
	EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00		
5.	OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00		
).	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	0.00	0.00		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 05/2016)

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II. DISBURSEMENTS			JRSEMENTS COLUMN A Total This Period		
17.	OPI	ERATING EXPENDITURES	0.00	0.00	
18.		ANSFERS TO OTHER THORIZED COMMITTEES	0.00	0.00	
19.	LOA	AN REPAYMENTS:			
	(a)	Of Loans Made or Guaranteed by the Candidate	0.00	103539.64	
	(b)	Of All Other Loans	0.00	0.00	
	(c)	TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	103539.64	
20.	REF	FUNDS OF CONTRIBUTIONS TO:			
	(a)	Individuals/Persons Other Than Political Committees	0.00	0.00	
			0.00	0.00	
	(b)	Political Party Committees Other Political Committees	0.00	0.00	
	(-)	(such as PACs)	0.00	0.00	
	(d)	TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00	
21.	ОТН	HER DISBURSEMENTS	0.00	0.00	
<u> </u>		TAL DISBURSEMENTS d Lines 17, 18, 19(c), 20(d), and 21)	0.00	103539.64	
		III. CASH SU	MMARY		
23.	CAS	SH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	0.00	
24	тот	TAL RECEIPTS THIS PERIOD (from Line 1	16, page 3)	0.00	
25.	SUE	BTOTAL (add Line 23 and Line 24)		0.00	
26.	TOT	TAL DISBURSEMENTS THIS PERIOD (fron	m Line 22)	0.00	
27.		SH ON HAND AT CLOSE OF REPORTING	G PERIOD	0.00	

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

PAGE 5
FOR LINE NUMBER: (check only one)

13a

				Detailed 0	diffillary i	age				13b
AME OF COMMITTEE (In Full) Gerson for Congress					Trans	action IC) : SC/10.43	92		
LOAN SOURCE Full Name (Last, For Gerson, David, Adam, , Mailing Address PO Box 1465	First, Middle	e Initial)			Memo Iter	_ X	cion: 2012 Primary General Other (spec			
City Burnsville		ate MN	ZIP Cod 55337	e			Personal F	unds of the	Cano	didate
Original Amount of Loan	Original Amount of Loan Cumulative Payment To			Oate 0.00		llance O	utstanding a	at Close of	This F	Period
TERMS Date Incurred M05M / D29D / Y Z01Z					Interest Ra (If none, ent		% (apr)	Secure Ye	·	No
List All Endorsers or Guarantors (= :	oan Source								
1. Full Name (Last, First, Middle In	itial)			Name of Emp	oloyer					
Mailing Address				Occupation						
City	State	ZIP Code		Amount Guaranteed Outstanding:		,	- ,			
2. Full Name (Last, First, Middle Ini	tial)			Name of Employer						
Mailing Address				Occupation						
City	State	ZIP Code		Amount Guaranteed Outstanding:		7	- 7			
3. Full Name (Last, First, Middle Ini	tial)			Name of Emp	oloyer					
Mailing Address				Occupation						
City	State	ZIP Code		Amount Guaranteed Outstanding:		7	. ,			
4. Full Name (Last, First, Middle Ini	tial)			Name of Emp	oloyer					
Mailing Address				Occupation						
City	State	ZIP Code		Amount Guaranteed Outstanding:		7	7			
SUBTOTALS This Period This Page (o					···•• [7	1655	54.96	
Carry outstanding balance only to LIN	IE 3, Sched	ule D, for this	line. If n	o Schedule I	D, carry fo	rward to	appropria	te line of S	Summ	arv.

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

PAGE 6
FOR LINE NUMBER: (check only one)

13a

OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4365
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2012
Gerson, David, Adam, ,	madie miliary	Memo Item Clection: 2012
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
10000.00		0.00 10000.00
TERMS Date Incurred	[Date Due Interest Rate Secured: (If none, enter 0)
M07 ^M / D19 ^D / Y Ž01Ž Y	M M / D D	/ Y YNAY Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	·	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optiona	N	
CODICIALO IIIIS I ellou IIIIS Page (optiona		10000.00
TOTALS This Period (last page in this line o	nly)	······································
Carry outstanding balance only to LINE 3, S	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

PAGE 7
FOR LINE NUMBER: (check only one)

13a

OF

						130		
	ME OF COMMITTEE (In Full) Serson for Congress				Trans	saction ID : SC/10.4381		
Ľ								
	LOAN SOURCE Full Name (Last, Gerson, David, Adam, ,	First, Mic	ldle Initial)		☐ Memo Ite	m Election: 2012 x Primary		
	Mailing Address PO Box 1465					General Other (specify) ▼		
	City		State	ZIP Co	de			
	Burnsville		MN	55337		Personal Funds of the Candidate		
	Original Amount of Loan		Cumulative Pay	yment To	Date B	alance Outstanding at Close of This Period		
	5000	0.00	9		0.00	5000.00		
	TERMS Date Incurred		С	Date Due	Interest R (If none, er			
	^M 07 ^M / ^D 24 ^D / Y Ž01Ž	Y	M M / D D	/ Y	YNA Y	0.00 % (apr) Yes No		
	List All Endorsers or Guarantors	(if any) to	o Loan Source					
	Full Name (Last, First, Middle Initial)				Name of Employer			
	Mailing Address				Occupation			
					Amount			
	City	State	ZIP Code		Guaranteed Outstanding:	, , , , , ,		
	2. Full Name (Last, First, Middle In	itial)			Name of Employer			
	Mailing Address				Occupation			
					Amount			
	City	State	ZIP Code		Guaranteed Outstanding:	, , , , , , , ,		
	3. Full Name (Last, First, Middle In	itial)			Name of Employer			
	Mailing Address				Occupation			
					Amount			
	City	State	ZIP Code		Guaranteed Outstanding:	7		
	4. Full Name (Last, First, Middle In	itial)	•		Name of Employer			
	Mailing Address				Occupation			
					Amount			
	City	State	ZIP Code		Guaranteed Outstanding:	9 9		
SI	UBTOTALS This Period This Page (optional)			<u> </u>	5000.00		
T	OTALS This Period (last page in this	s line only	y)		······	, , , , , , , , , , , , , , , , , , , ,		
С	carry outstanding balance only to LI	NE 3, Sch	nedule D, for this	s line. If	no Schedule D, carry fo	orward to appropriate line of Summary.		
	——————————————————————————————————————	-	•		<u> </u>			

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

FOR LINE NUMBER: (check only one)

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X 13a

OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4468
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Floation: 2042
Gerson, David, Adam, ,	viidule iriitiai)	☐ Memo Item
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
5.00	9	0.00 5.00
TERMS Date Incurred	[Date Due Interest Rate Secured: (If none, enter 0)
M 07M / D24D / Y Ž01Ž Y	M M / D D	y YNA Y 0.00
List All Endorsers or Guarantors (if any) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	·	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional		5.00
TOTALS This Period (last page in this line of	nly)	······
Carry outstanding balance only to LINE 3, S	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4128
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2012
Gerson, David, Adam, ,	viidaio iriitiaiy	Memo Item Clection: 2012
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
5000.00	,	0.00 5000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M07 ^M / D26 ^D / Y Ž01Ž Y	M M / D D	/ Y YNA Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	<u>'</u>	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optiona	I)	
CODICIALS THIS FERIOR THIS Fage (options		5000.00
TOTALS This Period (last page in this line of	nly)	······································
Carry outstanding balance only to LINE 3, S	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

PAGE FOR LINE NUMBER: (check only one)

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×	13a
	13b

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Transaction ID: SC/10.4389 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D01D ^M80^M Ž01Ž Yna Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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OF

		130			
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4129			
		T=: .:			
LOAN SOURCE Full Name (Last, First, Mic Gerson, David, Adam, ,	ldle Initial)	☐ Memo Item Election: 2012 x Primary			
Mailing Address		General Other (specify) ▼			
PO Box 1465					
City Burnsville	State MN	ZIP Code 55337 Personal Funds of the Candidate			
Original Amount of Loan	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period			
5000.00		0.00 5000.00			
TERMS Date Incurred		ate Due Interest Rate Secured:			
M08 ^M / P10 ^D / Y Ž01Ž Y	M M / D D	(If none, enter 0)			
		% (apr) Yes No			
List All Endorsers or Guarantors (if any) to 1. Full Name (Last, First, Middle Initial)	o Loan Source	Name of Employer			
Mailing Address		Occupation			
Mailing Address					
City State	ZIP Code	Amount Guaranteed Outstanding:			
2. Full Name (Last, First, Middle Initial)		Outstanding: Name of Employer			
		Occupation			
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed			
,	2 0000	Outstanding:			
3. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
	I=== 0 .	Amount Guaranteed			
City State	ZIP Code	Outstanding:			
4. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
		Amount			
City State	ZIP Code	Guaranteed Outstanding:			
	•				
SUBTOTALS This Period This Page (optional)		5000.00			
TOTALS This Period (last page in this line only	r)	······			
Carry outstanding balance only to LINE 3, Sch	nedule D, for this	line. If no Schedule D, carry forward to appropriate line of Summary.			

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

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FOR LINE NUMBER: (check only one)

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4470
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Election: 0040
Gerson, David, Adam, ,	viidale Illitial)	☐ Memo Item
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
6.00		0.00 6.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
^M 08 ^M / □10 □ / □ Ž01Ž □ Y	M M / D D	/ Y YNA Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	·	Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (options	al)	
CODICIALS THIS FEHOU THIS FAGE (OPHONE	٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠	6.00
TOTALS This Period (last page in this line of	only)	······································
Carry outstanding balance only to LINE 3,	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

PAGE 13

13a 13b

OF

NAME OF COMMITTEE (In Full Gerson for Congress	1)		Trans	action ID : SC/10.4130	
Gerson, David, Adar	•	Idle Initial)	☐ Memo Itel	Election: 2012 X Primary General	
Mailing Address PO Box 1465			Other (specify) ▼		
City		State	ZIP Code	▼ Personal Funds of the Candidate	
Burnsville Original Amount of Loan		MN Cumulative Pa	55337	alance Outstanding at Close of This Period	
Original Amount of Loan	1000.00	Outfluidilive 1 a	0.00	1000.00	
TERMS Date Incurre	d	С	ate Due Interest Ra		
M08 ^M / D17 ^D / Y	ž01ž ^Y	M M / D D		0.00 % (apr) Yes X No	
List All Endorsers or Guar	rantors (if any) to	o Loan Source			
1. Full Name (Last, First, I	Middle Initial)		Name of Employer		
Mailing Address			Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:	7	
2. Full Name (Last, First, M	liddle Initial)		Name of Employer	Name of Employer	
Mailing Address			Occupation		
			Amount Guaranteed		
City	State	ZIP Code	Outstanding:	7	
3. Full Name (Last, First, M	fiddle Initial)		Name of Employer		
Mailing Address			Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:	9 9	
4. Full Name (Last, First, N	liddle Initial)		Name of Employer		
Mailing Address					
			Amount		
City	State	ZIP Code	Guaranteed Outstanding:	9 9	
SUBTOTALS This Period This	Page (optional)			1000.00	
TOTALS This Period (last pag	e in this line only	')		7 7 7	
Carry outstanding balance on	alv to LINE 3 Sch	edule D. for this	s line. If no Schedule D. carry to	prward to appropriate line of Summary.	

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

PAGE 14 C FOR LINE NUMBER: (check only one)

X	13a
	13b

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4131
LOAN SOURCE Full Name (Last, First, I	Middle Initial)	Memo Item Election: 2012
Gerson, David, Adam, ,	viidale iiitialij	Memo Item Clection: 2012
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
1000.00	l ,	0.00 1000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M08M / D20D / Y Ž01Ž Y	M M / D D	0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any) to Loan Source	
Full Name (Last, First, Middle Initial)	<u>, </u>	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
	I	Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	-	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
CURTOTAL C This Deviced This Degre (entires	Α.	
SUBTOTALS This Period This Page (optional		1000.00
TOTALS This Period (last page in this line of	nly)	······································
Carry outstanding balance only to LINE 3, \$	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

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FOR LINE NUMBER: (check only one)

13a 13b

		Detaile	ed Summary Page		13b
AME OF COMMITTEE (In Full)		•	Transaction	D : SC/10.4442	
Gerson for Congress					
LOAN SOURCE Full Name (Last, First, M	liddle Initial)		INICITIO ILCITI	ection: 2014	
Gerson, David, Adam, ,				Primary General	
Mailing Address PO Box 1465				Other (specify) ▼	
City	State	ZIP Code			
Burnsville	MN	55337		Personal Funds of the Ca	andidate
Original Amount of Loan	Cumulative Page	yment To Date	Balance	Outstanding at Close of Thi	is Period
479.33	,)	0.00	479.	33
TERMS Date Incurred	С	Pate Due	Interest Rate (If none, enter 0)	Secured:	
M02 ^M / D22 ^D / Y Ž013 Y	M M / D D	/ Y 1/Ĭ/20Ž0 Y	0.00	% (apr) Yes	× No
List All Endorsers or Guarantors (if any)	to Loan Source				
1. Full Name (Last, First, Middle Initial)		Name of	Employer		
Mailing Address		Occupation	on		
		Amount			
City	ZIP Code	Guarante Outstand		· · · · · · · · · · · · · · · · · · ·	_
2. Full Name (Last, First, Middle Initial)	,	Name of	Name of Employer		
Mailing Address		Occupation	on		
		Amount			7
City	ZIP Code	Guarante Outstand		7	_
3. Full Name (Last, First, Middle Initial)		Name of	Employer		
Mailing Address		Occupation	on		
		Amount			1
City	ZIP Code	Guarante Outstand		7	_
4. Full Name (Last, First, Middle Initial)		Name of	Employer		
Mailing Address			on		
		Amount			_
City	ZIP Code	Guarante Outstand			_
SUBTOTALS This Period This Page (optional)					
CODICIALO IIIIS FERIOU IIIIS FAGE (OPLIONAI	,			479.3	33
OTALS This Period (last page in this line only)					
Carry outstanding balance only to LINE 3, Se	chedule D, for this	s line. If no Schedu	ıle D, carry forward	I to appropriate line of Sur	nmary.

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

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13b NAME OF COMMITTEE (In Full) Transaction ID: SC/10.4444 Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 3000.00 0.00 3000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 ^D25^D M 02M ž013 Y 1/1/2020 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 3000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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OF

						130
	ME OF COMMITTEE (In Full) Serson for Congress				Tran	saction ID : SC/10.4464
						T =: -
	LOAN SOURCE Full Name (Last, Gerson, David, Adam, ,	First, Mic	ldle Initial)		☐ Memo Ite	em Election: 2014 x Primary
	Mailing Address					General Other (specify) ▼
	PO Box 1465					— Other (speedly) •
	City		State	ZIP Co	de	Personal Funds of the Candidate
	Burnsville		MN	55337		1 ersonal i unus oi the Candidate
	Original Amount of Loan		Cumulative Pay	yment To	Date E	Balance Outstanding at Close of This Period
	3000	0.00	7		0.00	3000.00
	TERMS Date Incurred		D	ate Due	Interest F (If none, e	
	M03 ^M / D26 ^D / Y Ž013	Y	M M / D D	/ Y	(ii Nolle, e	0.00 % (apr) Yes X No
	List All Endorsers or Guarantors	(if any) to	o Loan Source			, o (upi)
	Full Name (Last, First, Middle I		200.7 300.70		Name of Employer	
	Mailing Address				Occupation	
					Amount	
	City	State	ZIP Code		Guaranteed Outstanding:	9 9
	2. Full Name (Last, First, Middle In	itial)			Name of Employer	
	Mailing Address				Occupation	
					Amount	
	City	State	ZIP Code		Guaranteed Outstanding:	y y
	3. Full Name (Last, First, Middle In	itial)	·		Name of Employer	
	Mailing Address				Occupation	
					Amount	
	City	State	ZIP Code		Guaranteed Outstanding:	
	4. Full Name (Last, First, Middle In	itial)			Name of Employer	
	Mailing Address				Occupation	
					Amount	
	City	State	ZIP Code		Guaranteed Outstanding:	7 7
S	UBTOTALS This Period This Page (optional)			······································	3000.00
T	OTALS This Period (last page in this	line only	·)		······	· · · · · · · · · · · · · · · · · · ·
_ c	Carry outstanding balance only to LI	NE 3, Sch	nedule D, for this	s line. If	no Schedule D, carry 1	forward to appropriate line of Summary.
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Use separate schedule(s) for each category of the Detailed Summary Page

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		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4502
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	wilder initial)	Memo Item Clection: 2014
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
4000.00	J,	0.00 4000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
^M 04 ^M / □18□ / Y Ž013 Y	M M / D D	/ Y 1½1/2Ŏ Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any) to Loan Source	
Full Name (Last, First, Middle Initial)	,	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	1	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (options		
ODDIVIALS THIS PERIOD THIS Page (options	ai)	4000.00
TOTALS This Period (last page in this line of	only)	······································
Carry outstanding balance only to LINE 3,	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

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OF

		130
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4545
	lalla laiti-!\	Te: ··
Gerson, David, Adam, ,	iale initial)	☐ Memo Item
Mailing Address PO Box 1465		Other (specify) ▼
City	State	ZIP Code ** Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period
4000.00		0.00 4000.00
TERMS Date Incurred	D	ate Due Interest Rate Secured: (If none, enter 0)
M05 ^M / D13 ^D / Y Ž013 Y	M M / D D	/ Y 1/√1/20 Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any) to	o Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	<u>'</u>	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	·	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	,	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
	·	
SUBTOTALS This Period This Page (optional)		4000.00
TOTALS This Period (last page in this line only	y)	·······
Carry outstanding balance only to LINE 3, Sch	nedule D, for this	line. If no Schedule D, carry forward to appropriate line of Summary.

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OF

		130
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4591
	lalla laiti-!\	Te
Gerson, David, Adam, ,	iale initial)	☐ Memo Item
Mailing Address PO Box 1465		Other (specify) ▼
City	State	ZIP Code ** Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period
5000.00	9	0.00 5000.00
TERMS Date Incurred	D	ate Due Interest Rate Secured: (If none, enter 0)
M06 ^M / D10 ^D / Y Ž013 Y	M M / D D	/ Y 1 ¹ /1/2 ¹ /2 Yes
List All Endorsers or Guarantors (if any) to	o Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	•	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
	·	
SUBTOTALS This Period This Page (optional)		5000.00
TOTALS This Period (last page in this line only	y)	······································
Carry outstanding balance only to LINE 3, Sch	nedule D, for this	line. If no Schedule D, carry forward to appropriate line of Summary.

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OF

						130
	ME OF COMMITTEE (In Full) Serson for Congress				Tran	saction ID : SC/10.4622
		-· · • •				T =
	LOAN SOURCE Full Name (Last, Gerson, David, Adam, ,	First, Mic	ldle Initial)		☐ Memo Ite	em Election: 2014 x Primary
						General
	Mailing Address PO Box 1465					Other (specify)
	City		State	ZIP Co	de	Personal Funds of the Candidate
	Burnsville		MN	55337		reisonal runus of the Candidate
	Original Amount of Loan		Cumulative Pay	yment To	Date E	Balance Outstanding at Close of This Period
	131	.12	,		0.00	131.12
	TERMS Date Incurred		D	Date Due	Interest F (If none, e	
	M06 ^M / D30 ^D / Y Ž013	Y	M M / D D	/ Y	1)1/20 Y	0.00 % (apr) Yes No
	List All Endorsers or Guarantors	(if any) to	o Loan Source			
	1. Full Name (Last, First, Middle I	nitial)			Name of Employer	
	Mailing Address				Occupation	
					Amount	
	City	State	ZIP Code		Guaranteed Outstanding:	7
	2. Full Name (Last, First, Middle In	itial)			Name of Employer	
	Mailing Address				Occupation	
					Amount	
	City	State	ZIP Code		Guaranteed Outstanding:	, , , , , , , ,
	3. Full Name (Last, First, Middle In	itial)	'		Name of Employer	
	Mailing Address				Occupation	
					Amount	
	City	State	ZIP Code		Guaranteed Outstanding:	
	4. Full Name (Last, First, Middle In	itial)	'		Name of Employer	
	Mailing Address				Occupation	
					Amount	
	City	State	ZIP Code		Guaranteed Outstanding:	, , , , , , , , , , , , , , , , , , , ,
			'		_	
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T	OTALS This Period (last page in this	line only	r)		······	
_	Carry outstanding balance only to LI	NE 3, Sch	edule D, for this	s line. If	no Schedule D, carry f	orward to appropriate line of Summary.
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NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID: SC/10.5169
	d-H - 1	T =
LOAN SOURCE Full Name (Last, First, Mid Gerson, David, Adam, ,	adie Initial)	Memo Item Election: 2014 ** Primary Output
Mailing Address PO Box 1465		General Other (specify) ▼
City	State	ZIP Code X Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pay	rment To Date Balance Outstanding at Close of This Period
5000.00		0.00 5000.00
TERMS Date Incurred	D	ate Due Interest Rate Secured: (If none, enter 0)
^M 07 ^M / □05 □ / Y Ž01 Š Y	M M / D D	/ Y 1/1/20 Y 0.00
List All Endorsers or Guarantors (if any) t	o Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	1	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)		5000.00
TOTALS This Period (last page in this line only	/)	······································
Carry outstanding balance only to LINE 3, Sci	nedule D, for this	line. If no Schedule D, carry forward to appropriate line of Summary.

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Transaction ID: SC/10.5170 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 ^D29^D M 07M ž013 1/1/20 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5172
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	nadic initialy	Memo Item Clection: 2014
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
5000.00	,	0.00 5000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M08M / D19D / Y 2013 Y	M M / D D	/ Y 1/1/20 Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any)	to Loan Source	
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	1	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optiona)	F000 00
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TOTALS This Period (last page in this line of	ıly)	•
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Transaction ID: SC/10.5173 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 ^D12^D M09M ž013 1/1/20 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5174
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	whate initial)	Memo Item Election: 2014
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
3000.00		0.00 3000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M09M / D30D / Y 2013 Y	M M / D D	/ Y 1ÿ1/2ŏ Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any) to Loan Source	
Full Name (Last, First, Middle Initial)	,	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	•	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
CURTOTAL C This Deviced TV D	-0	
SUBTOTALS This Period This Page (options	اt)	3000.00
TOTALS This Period (last page in this line of	only)	
Carry outstanding balance only to LINE 3,	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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Transaction ID: SC/10.5202 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) M 10^M 0.00 D04D ž013 1/1/20 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5203
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	viidaio iriitai)	Memo Item Clection: 2014
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
5000.00		0.00 5000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M10 ^M / D16 ^D / Y Ž01Š	M M / D D	/ Y 1ÿ1/2ŏ Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any) to Loan Source	
1. Full Name (Last, First, Middle Initial)	,	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)	·	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	<u>'</u>	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
CURTOTALS This Deviced This Dega (entire)	SI)	
SUBTOTALS This Period This Page (options	11)	5000.00
TOTALS This Period (last page in this line of	only)	······································
Carry outstanding balance only to LINE 3,	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5204
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	madio miliary	Memo Item Election: 2014
Mailing Address PO Box 1465		Other (specify) ▼
City	State	ZIP Code Representation of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	ment To Date Balance Outstanding at Close of This Period
5000.00		0.00 5000.00
TERMS Date Incurred	Г	ate Due Interest Rate Secured: (If none, enter 0)
M10M / D23D / Y Ž013 Y	M M / D D	/
List All Endorsers or Guarantors (if ar	ny) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	e ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City	e ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	•	Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	e ZIP Code	Outstanding:
4. Full Name (Last, First, Middle Initial)	•	Name of Employer
Mailing Address		Occupation
		Amount
City	e ZIP Code	Guaranteed Outstanding:
CURTOTAL C This Deviced This Deve (surfice	N	
SUBTOTALS This Period This Page (option	าสเ)	5000.00
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Carry outstanding balance only to LINE 3	Schedule D, for this	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

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FOR LINE NUMBER: (check only one)

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OF

							130
AME OF COMMITTEE (In Full) Gerson for Congress					Transac	ction ID : SC/10.5205	
LOAN SOURCE Full Name (Last,	First, Mi	ddle Initial)			Memo Item	Election: 2014	
Gerson, David, Adam,	,	,			j wemo nem	rimary Primary	
						General	
Mailing Address PO Box 1465						Other (specify)	
City		State	ZIP Cod	de		Personal Funds of the Ca	ındidate
Burnsville		MN	55337			To second it under or the od	
Original Amount of Loan		Cumulative Pa	yment To	Date	Bala	ance Outstanding at Close of This	3 Period
5000	0.00			0.00		5000.0	0
TERMS Date Incurred		Г	Date Due		Interest Rate		
M11M / D04D / Y Z013	Υ	M M / D D) / Y	1)1/20 Y		00	x No
List All Endorsers or Guarantors	(if any)	to Loan Source				- (-)	
Full Name (Last, First, Middle III)	,	to Loan Source		Name of Em	ployer		
Mailing Address				Occupation			
				Amount			
City	State	ZIP Code		Guaranteed			
Oity	Otato	211 0000		Outstanding:		7	
2. Full Name (Last, First, Middle Ir	nitial)	<u>.</u>		Name of Em	ployer		
Mailing Address				Occupation			
				Amount			1
City	State	ZIP Code		Guaranteed Outstanding:		, ,	
3. Full Name (Last, First, Middle Ir	nitial)			Name of Em	ployer		
Mailing Address				Occupation			
				Amount	_		1
City	State	ZIP Code		Guaranteed Outstanding:		y	
4. Full Name (Last, First, Middle Ir	nitial)	•		Name of Em	ployer		
				Occupation			
			Amount			1	
City	State	ZIP Code		Guaranteed Outstanding:		7	
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Corres outstanding belones only to 11	NE 2 C-	hadula D. far ##	o line 16 :	ao Cobadula	D 00m; fc	word to appropriate line of Com-	
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Use separate schedule(s) for each category of the Detailed Summary Page

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5206
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	nadic iritialy	Memo Item Election: 2014
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
4000.00	,	0.00 4000.00
TERMS Date Incurred]	Date Due Interest Rate Secured: (If none, enter 0)
M11M / D13D / Y 2013 Y	M M / D D	/ Y 1//1/20 Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any)	to Loan Source	
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
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Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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			Detailed Garrinary 1	age	13b
NAME OF COMMITTEE (In Full)			Transa	action ID : SC/10.5207	
Gerson for Congress					
LOAN SOURCE Full Name (Last, First, Mid	ddle Initial)		☐ Memo Iter	n Election: 2014	
Gerson, David, Adam, ,				✗ Primary	
				General	
Mailing Address PO Box 1465				Other (specify)	
City	State	ZIP Code	9	X Personal Funds of the	Candidate
Burnsville	MN	55337		T craoriai i unua oi tiic	Carididate
Original Amount of Loan	Cumulative Page	yment To D	ate Ba	alance Outstanding at Close of T	īhis Period
3000.00			0.00	300	0.00
7 7	2	7		2 2	
TERMS Date Incurred		Date Due	Interest Ra (If none, ent		:t
M11M / P19P / Y Ž013 Y	M M / D D	/ Y 1	/1/2Ŏ ^Y	0.00 % (apr) Yes	s x No
List All Endorsers or Guarantors (if any) t	o Loan Source				
1. Full Name (Last, First, Middle Initial)		T:	Name of Employer		
Mailing Address		(Occupation		
011	710 0 1		Amount Guaranteed		
City	ZIP Code		Outstanding:	7	_
2. Full Name (Last, First, Middle Initial)	Full Name (Last, First, Middle Initial) Mailing Address				
Mailing Address					
		7	Amount		$\overline{}$
City	ZIP Code		Guaranteed Outstanding:	, , , , , , , , , , , , , , , , , , ,	
3. Full Name (Last, First, Middle Initial)	1	ı	Name of Employer		
Mailing Address		(Occupation		
			Amount		_
City State	ZIP Code		Guaranteed		
		(Outstanding:	, , , , , , , , , , , , , , , , , , , ,	
4. Full Name (Last, First, Middle Initial)		1	Name of Employer		
Mailing Address			Occupation		
			Amount		_
City State	ZIP Code		Guaranteed		
		(Outstanding:	, , , , , , , , , , , , , , , , , , , ,	
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Use separate schedule(s) for each category of the Detailed Summary Page

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OF

NAME OF COMMITTEE (In F Gerson for Congress			Transa	action ID : SC/10.5208
Gerson, David, Ada	•	Idle Initial)	☐ Memo Iter	n Election: 2014 x Primary General
Mailing Address PO Box 1465				Other (specify)
City		State	ZIP Code	Personal Funds of the Candidate
Burnsville		MN	55337	
Original Amount of Loan		Cumulative Page		lance Outstanding at Close of This Period
7 7	4000.00	7	0.00	4000.00
TERMS Date Incur	rred		Date Due Interest Ra	
M11M / D29D /	^Y Ž013 ^Y	M M / D D	/ Y 1)1/20 Y	0.00 % (apr) Yes X No
List All Endorsers or Gu	uarantors (if any) to	o Loan Source		
1. Full Name (Last, First	, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed	
City	Sidle	ZIP Code	Outstanding:	9 9
2. Full Name (Last, First,	Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed	
			Outstanding:	7
3. Full Name (Last, First,	Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed	
		Zii Gode	Outstanding:	9
4. Full Name (Last, First,	Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed	
Oity	State	ZIF Code	Outstanding:	9 9
SUBTOTALS This Period Th	nis Page (optional)			4000.00
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Corne outstanding halans	only to LINE 2. Cal	odulo D. for this	a line. If no Cohedule D. serve fo	www.d to oppropriate line of Commercial
Carry outstanging balance	only to LINE 3. Sch	ieauie D, for this	s line. It no Schedule D, carry to	rward to appropriate line of Summary.

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

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5209
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	madio miliary	Memo Item Election: 2014
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
4000.00	l ,	0.00 4000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured:
M12M / D09D / Y Ž01Š Y	M M / D D	/ Y 1ÿ1/2ŏ Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any)	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
2. Full Name (Last, First, Middle Initial)	1	Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City State	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	!	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optiona	ı)	
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TOTALS This Period (last page in this line o	nly)	······································
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

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OF

Burnsville			135
Gerson, David, Adam, , Mailing Address PO Box 1465 City Burnsville MN 55337			Transaction ID : SC/10.5210
City State ZIP Code MN S5337	Gerson, David, Adam, ,	Middle Initial)	rimary General
Burnsville MIN 55337 X Personal Funds of the Candid: Coriginal Amount of Loan	PO Box 1465		
Original Amount of Loan Original Amount of Lo			Y Personal Funds of the Candidate
TERMS Date Incurred Date Due Interest Rate (If none, enter 0) V			
List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Mailing Address Occupation Mailing Address Occupation Mailing Address Occupation Mailing Address Occupation Amount Guaranteed Outstanding: City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Mailing Address Occupation Amount Guaranteed Outstanding: 3. Full Name (Last, First, Middle Initial) Mailing Address Occupation Amount Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Occupation Amount Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Occupation Amount Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Occupation Amount Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Occupation Amount Guaranteed Outstanding: Substotals This Period This Page (optional) 3000.00		Cumulative Pay	
List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Mailing Address Occupation Amount City State ZIP Code Outstanding: Amount Guaranteed Outstanding: 3. Full Name (Last, First, Middle Initial) Mailing Address Occupation Amount Guaranteed Outstanding: City State ZIP Code Outstanding: Name of Employer Amount Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Occupation Amount Guaranteed Outstanding: Amount Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Occupation Amount Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Occupation Amount Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Occupation Amount Guaranteed Outstanding: 3000.00	TERMS Date Incurred	С	
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Mailing Address City State ZIP Code Guaranteed Outstanding: 2. Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code Cocupation Amount Guaranteed Outstanding: 3. Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code Cocupation Amount Guaranteed Outstanding: Amount Guaranteed Outstanding: Amount Guaranteed Outstanding: Amount Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Amount Guaranteed Outstanding:	List All Endorsers or Guarantors (if any	/) to Loan Source	
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City State ZIP Code Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code City State ZIP Code Amount Guaranteed Guaranteed Outstanding: Amount Guaranteed Outstanding: SUBTOTALS This Period This Page (optional) TOTALS This Period (last page in this line only)	3. Full Name (Last, First, Middle Initial)		Name of Employer
City State ZIP Code Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City State ZIP Code Guaranteed Outstanding: Amount Guaranteed Outstanding: SUBTOTALS This Period This Page (optional) 3000.00	Mailing Address		Occupation
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City State ZIP Code Guaranteed Outstanding: SUBTOTALS This Period This Page (optional) 3000.00 TOTALS This Period (last page in this line only)	Mailing Address		Occupation
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Use separate schedule(s) for each category of the Detailed Summary Page

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		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5542
LOAN SOURCE Full Name (Last, First, N	liddle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	nadio iriilary	Memo Item Election: 2014
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
3000.00	ļ,	0.00 3000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M01M / D08D / Y Ž014 Y	M M / D D	/ Y 1ÿ1/2ŏ Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any)	to Loan Source	
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	·	Name of Employer
Mailing Address		Occupation
	T	Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
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Use separate schedule(s) for each category of the Detailed Summary Page

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5543
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item Clection: 2014	
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
5000.00		0.00 5000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M01M / D16D / Y Z014 Y	M M / D D	/ Y 1)1/20 Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any)	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)	5000.00
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Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

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Transaction ID: SC/10.5544 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 10000.00 0.00 10000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 ^D26^D M 02M ž014 1/1/20 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 10000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5587
LOAN SOURCE Full Name (Last, First, N	liddle Initial)	Election: 0044
Gerson, David, Adam,	☐ Memo Item	
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
391.00	,	0.00 391.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M10M / D28D / Y 2014 Y	M M / D D	0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any)	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	·	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)	
COSTOTATO THIS FEROU THIS FAGE (OPLICHAL	,	391.00
TOTALS This Period (last page in this line or	ıly)	······································
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5608
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2016
Gerson, David, Adam, ,	Memo Item Clection: 2016	
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
3500.00	ļ ,	0.00 3500.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M03M / D04D / Y Ž01Š Y	M M / D D	/ Y YNAY Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any	to Loan Source	
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	·	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
4. Full Name (Last, First, Middle Initial)	<u> </u>	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
CURTOTAL C This Deviced This Degre (entires	n	
SUBTOTALS This Period This Page (optional	······································	3500.00
TOTALS This Period (last page in this line o	nly)	······································
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s)

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FOR LINE NUMBER: for each category of the **x** 13a (check only one) Detailed Summary Page 13b Transaction ID: SC/10.5867 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2016 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 ^D12^D ^M80^M Ž015 YNA Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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Transaction ID: SC/10.5980 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2016 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 10000.00 0.00 10000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D08D M09M Ž015 YNA Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 10000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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FOR LINE NUMBER:
(check only one)

13a

							130
AME OF COMMITTEE (In Full) Gerson for Congress					Transac	ction ID : SC/10.6013	
LOAN SOURCE Full Name (Last, Gerson, David, Adam, ,	First, Mi	ddle Initial)			Memo Item	x Primary	
Mailing Address PO Box 1465						General Other (specify) ▼	
City		State	ZIP Cod	le		✗ Personal Funds of the	Candidate
Burnsville		MN	55337				
Original Amount of Loan		Cumulative Pay	yment To			ance Outstanding at Close of T	
3393	2.59	7		28539.64		539	2.95
TERMS Date Incurred			Date Due		Interest Rate (If none, enter		d:
M09 ^M / D30 ^D / Y Ž015	Υ	M M / D D	/ Y	YNA Y	0.	.00 % (apr) Yes	s 🗶 No
List All Endorsers or Guarantors	(if any)	to Loan Source					
1. Full Name (Last, First, Middle	Initial)			Name of Em	ployer		
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:		g g	
2. Full Name (Last, First, Middle In	nitial)			Name of Em	ployer		
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:		9 9	
3. Full Name (Last, First, Middle In	nitial)			Name of Em	ployer		
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:		, ,	
4. Full Name (Last, First, Middle In	nitial)			Name of Em	ployer		
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:		9 9	
SUBTOTALS This Period This Page (s line onl	у)				171460	/K
Carry outstanding balance only to LI	NE 3, Sc	hedule D, for this	s line. If r	o Schedule I	D, carry for	ward to appropriate line of S	ummary.