

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

RECEIVED  
FEC MAIL CENTER

2009 JUN 19 A 10:43

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Eighth Congressional District Republican Party of Minnesota

ADDRESS (number and street)

303 Douglas Avenue

Check if different than previously reported. (ACC)

Eveleth MN 55734 - 1511

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C 00361485

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

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)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

- Feb 20 (M2)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

- Primary (12P)
  - General (12G)
  - Runoff (12R)
  - Convention (12C)
  - Special (12S)
- Election on [ ] / [ ] / [ ] in the State of [ ]

(d) 30-Day POST-Election Report for the:

- General (30G)
  - Runoff (30R)
  - Special (30S)
- Election on [ ] / [ ] / [ ] in the State of [ ]

5. Covering Period

05 / 01 / 2009 through 05 / 31 / 2009

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 Ronald L. Britton

Signature of Treasurer



Date

06 / 17 / 2009

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 3X  
Rev. 12/2004

29030102683

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**Eighth Congressional District Republican Party of Minnesota**

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="2008"/>		<input type="text" value="4,956,911"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="9,697,371"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="3,787,212"/>	<input type="text" value="1,228,453"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	<input type="text" value="1,007,609"/>	<input type="text" value="1,724,144"/>
7. Total Disbursements (from Line 31) .....	<input type="text" value="1,012,744"/>	<input type="text" value="8,178,099"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<input type="text" value="9,063,355"/>	<input type="text" value="9,063,355"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="999,999"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="999,999"/>	

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

29030102684

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name  
Eighth Congressional District Republican Party of Minnesota

Report Covering the Period: From: 

MM	DD	YY
05	01	2009

 To: 

MM	DD	YY
05	31	2009

**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).....
  - (ii) Unitemized.....
  - (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

1 1 6 7 8
9 5 0 0
2 1 1 7 8

1 5 9 4 7 3
7 7 9 0 0 0
9 4 0 9 7 3

- (b) Political Party Committees.....
- (c) Other Political Committees (such as PACs).....
- (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

2 1 1 7 8
-----------

9 4 0 9 7 3
-------------

12. Transfers From Affiliated/Other Party Committees.....

1 6 6 9 4
-----------

2 8 7 4 8 0
-------------

13. All Loans Received.....

--

--

14. Loan Repayments Received.....

--

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15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

--

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16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

--

--

17. Other Federal Receipts (Dividends, Interest, etc.).....

--

--

18. Transfers from Non-Federal and Levin Funds

- (a) Non-Federal Account (from Schedule H3).....

--

--

- (b) Levin Funds (from Schedule H5).....

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- (c) Total Transfers (add 18(a) and 18(b))..

--

--

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

3 7 8 7 2
-----------

1 2 2 8 4 5 3
---------------

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

3 7 8 7 2
-----------

1 2 2 8 4 5 3
---------------

29030102685



**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) .....	2 1 1 7 8	9 4 0 9 7 3
34. Total Contribution Refunds (from Line 28(d)) .....		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2 1 1 7 8	9 4 0 9 7 3
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	1 0 1 2 7 4	8 1 7 8 0 9
37. Offsets to Operating Expenditures (from Line 15, page 3) .....		
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1 0 1 2 7 4	8 1 7 8 0 9

29030102687

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 1 OF 1	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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)  
**Eighth Congressional District Republican Party of Minnesota**

**A. Britton, Ronald L.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
**303 Douglas Avenue**  
 City State Zip Code  
**Eveleth MN 55734**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation retired  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
**1 0 3 8 0 6**

Date of Receipt  
**0 5 / 1 3 / 2 0 0 9**  
 Amount of Each Receipt this Period  
**9 6 5 0**  
 Contribution In-Kind - FEC report postage

**B. Britton, Ronald L.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
**303 Douglas Avenue**  
 City State Zip Code  
**Eveleth MN 55734**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation retired  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
**1 0 3 8 0 6**

Date of Receipt  
**0 4 / 1 6 / 2 0 0 9**  
 Amount of Each Receipt this Period  
**2 0 2 8**  
 Contribution In-Kind - Phone book ads (Dex)

**C. Itasca County Republican Party of Minnesota**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
**Box 276**  
 City State Zip Code  
**Marble MN 55764**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
**Party transfer**  
 Aggregate Year-to-Date ▼  
**1 6 6 9 4**

Date of Receipt  
**0 5 / 0 2 / 2 0 0 9**  
 Amount of Each Receipt this Period  
**1 6 6 9 4**

**SUBTOTAL** of Receipts This Page (optional).....▶ **2 8 3 7 2**  
**TOTAL** This Period (last page this line number only).....▶ **2 8 3 7 2**

29030102688

**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)

PAGE 1 OF 2

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Eighth Congressional District Republican Party of Minnesota**

Full Name (Last, First, Middle Initial)

<p><b>A.</b> Britton, Ronald L.</p>		<p>Date of Disbursement</p> <p>05 / 13 / 2009</p>	
<p>Mailing Address</p> <p>303 Douglas Ave</p>			
<p>City</p> <p>Eveleth</p>	<p>State</p> <p>MN</p>	<p>Zip Code</p> <p>55734</p>	
<p>Purpose of Disbursement</p> <p>In-kind FEC report postage</p>		<p>Amount of Each Disbursement this Period</p> <p>2028</p>	
<p>Candidate Name</p>		<p>Category/Type</p> <p>001</p>	
<p>Office Sought:</p> <p><input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For:</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State:</p>	<p>District:</p>		

<p><b>B.</b> Britton, Ronald L.</p>		<p>Date of Disbursement</p> <p>05 / 25 / 2009</p>	
<p>Mailing Address</p> <p>303 Douglas Ave</p>			
<p>City</p> <p>Eveleth</p>	<p>State</p> <p>MN</p>	<p>Zip Code</p> <p>55734</p>	
<p>Purpose of Disbursement</p> <p>Reimbursement for NCOA<sup>LINK®</sup>, LACS<sup>LINK®</sup>, CASS USPS authorized address correction by Anchor Computer</p>		<p>Amount of Each Disbursement this Period</p> <p>11605</p>	
<p>Candidate Name</p>		<p>Category/Type</p> <p>003</p>	
<p>Office Sought:</p> <p><input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For:</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State:</p>	<p>District:</p>		

<p><b>C.</b> Britton, Ronald L.</p>		<p>Date of Disbursement</p> <p>05 / 29 / 2009</p>	
<p>Mailing Address</p> <p>303 Douglas Ave</p>			
<p>City</p> <p>Eveleth</p>	<p>State</p> <p>MN</p>	<p>Zip Code</p> <p>55734</p>	
<p>Purpose of Disbursement</p> <p>In-kind contribution phone book ads</p>		<p>Amount of Each Disbursement this Period</p> <p>9650</p>	
<p>Candidate Name</p>		<p>Category/Type</p> <p>001</p>	
<p>Office Sought:</p> <p><input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For:</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State:</p>	<p>District:</p>		

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

23283

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

29030102689

**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)						PAGE 2 OF 2				
	<input checked="" 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 type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**Eighth Congressional District Republican Party of Minnesota**

**A.**

Full Name (Last, First, Middle Initial)  
**Range Office Supply**

Date of Disbursement  
MM / DD / YYYY  
05 / 18 / 2009

Mailing Address  
**319 Chestnut St**

City State Zip Code  
**Virginia MN 55792**

Purpose of Disbursement  
**Paper & index cards for fundraising**

Candidate Name  
**003**

Amount of Each Disbursement this Period  
7805

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

**B.**

Full Name (Last, First, Middle Initial)  
**Range Office Supply**

Date of Disbursement  
MM / DD / YYYY  
05 / 20 / 2009

Mailing Address  
**319 Chestnut St**

City State Zip Code  
**Virginia MN 55792**

Purpose of Disbursement  
**Index cards for fundraising**

Candidate Name  
**003**

Amount of Each Disbursement this Period  
4441

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

**C.**

Full Name (Last, First, Middle Initial)  
**Range Office Supply**

Date of Disbursement  
MM / DD / YYYY  
05 / 21 / 2009

Mailing Address  
**319 Chestnut St**

City State Zip Code  
**Virginia MN 55792**

Purpose of Disbursement  
**Inkjet and laser cartridges for fundraising**

Candidate Name  
**003**

Amount of Each Disbursement this Period  
25982

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....▶ **38228**

**TOTAL** This Period (last page this line number only).....▶ **61511**

29030102690

**Federal Election Commission**  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input checked="" type="checkbox"/> USPS Express Mail	Postmarked 6/17/09
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

*Qsel*  
 PREPARER

6/19/09  
 DATE PREPARED

29030102691