

**FEC
FORM 3X**

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

RECEIVED
FEC MAIL CENTER

2021 APR 15 AM 8:20

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

NATIONAL Association of Letter Carriers
of the United States PAL 9

ADDRESS (number and street) 7032 Jersey Ave

Check if different than previously reported. (ACC) Brooklyn Park MM 55401-1700

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C00114314

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) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

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

Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12S)

Election on MM / DD / YYYY in the State of

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

General (30G) Runoff (30R) Special (30S)

Election on MM / DD / YYYY in the State of

5. Covering Period MM / DD / 2021 through MM / DD / 2021

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 James F Fodstad

Signature of Treasurer *James F Fodstad* Date MM / DD / 2021

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

NON-FEDERAL CAMPAIGN

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

NALC PAL 9

Report Covering the Period: From:

01 / 01 / 2021

To:

03 / 31 / 2021

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2021		9,483.04
(b) Cash on Hand at Beginning of Reporting Period.....	8,483.04	
(c) Total Receipts (from Line 19).....	9,307.21	9,307.21
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	17,790.25	17,790.25
7. Total Disbursements (from Line 31).....	2,225.00	2,225.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	15,565.25	15,565.25
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....		

NON-FUNCTIONAL DOWN

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

For further information contact:

Federal Election Commission
1050 First Street, N.E.
Washington, DC 20463

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

NALC PAL9

Report Covering the Period: From: ^{M M / O O / Y Y Y Y} 01 01 2021 To: ^{M M / O O / Y Y Y Y} 03 31 2021

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

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.....	, 9,307.21	, 9,307.21
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	, 9,307.21	, 9,307.21
(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).....▶	, 9,307.21	, 9,307.21
12. Transfers From Affiliated/Other Party Committees.....	,	,
13. All Loans Received.....	,	,
14. Loan Repayments Received.....	,	,
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	,	,
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).....	,	,
(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)).....▶	, 9,307.21	, 9,307.21
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	, 9,307.21	, 9,307.21

NON-FEDERAL ACCOUNT

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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
 (ii) Non-Federal Share.....
 (b) Other Federal Operating Expenditures
 (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)).....▶

22. Transfers to Affiliated/Other Party Committees.....
 23. Contributions to Federal Candidates/Committees and Other Political Committees.....

24. Independent Expenditures (use Schedule E)
 25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....

26. Loan Repayments Made.....

27. Loans Made.....

28. Refunds of Contributions To:
 (a) Individuals/Persons Other Than Political Committees
 (b) Political Party Committees
 (c) Other Political Committees (such as PACs).....
 (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....▶

29. Other Disbursements (Including Non-Federal Donations).....

30. Federal Election Activity (52 U.S.C. § 30101(20))
 (a) Allocated Federal Election Activity (from Schedule H6)
 (i) Federal Share
 (ii) "Levin" Share.....
 (b) Federal Election Activity Paid Entirely With Federal Funds
 (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).....▶

31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..

32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....▶

.....

.....

.....

.....

.....

..... 7,25.00

.....

.....

.....

.....

.....

.....

.....

..... 1,500.00

.....

.....

.....

.....

.....

..... 2,225.00

.....

\$ 2,225.00

.....

.....

.....

.....

.....

..... 725.00

.....

.....

.....

.....

.....

.....

.....

..... 1,500.00

.....

.....

.....

.....

.....

..... 2,225.00

.....

..... 2,225.00

NON-FEDERAL DONATIONS

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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

0000470001401021202

**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 1

21b 22 23 26 27
 28a 28b 28c 29 30b

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)
NALC PAL9

A.

Full Name (Last, First, Middle Initial)
Klobuchar, Amy

Date of Disbursement
03 / 13 / 2021

Mailing Address
PO Box 4146

City
ST PAUL State
MN Zip Code
55104

Purpose of Disbursement
Klobuchar for Mn.

FEC Identification Number
C00431353

Candidate Name
Amy Klobuchar

Amount of Each Disbursement this Period
725.00

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

State: **MN** District:

Memo Item

B.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement

FEC Identification Number

Candidate Name

Amount of Each Disbursement this Period

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

State: District:

Memo Item

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement

FEC Identification Number

Candidate Name

Amount of Each Disbursement this Period

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

State: District:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ **725.00**

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

NON-PROFIT ORGANIZATION

**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 <u>1</u> OF <u>1</u>
	<input type="checkbox"/> 21b <input type="checkbox"/> 22 <input type="checkbox"/> 23 <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	

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)
NALC PAL 9

A. Full Name (Last, First, Middle Initial)
Walz Tim

Date of Disbursement
MM ' DD ' YYYY
01 ' 01 ' 2021

Mailing Address
110 E Liberty St

City **Mankato** State **Mn** Zip Code **55601**

Purpose of Disbursement
Tim Walz for Governor

Candidate Name
Tim Walz

Office Sought: House Senate President
Governor

Disbursement For: Primary General Other (specify) ▼

State: **Mn** District: **.**

FEC Identification Number
C

Amount of Each Disbursement this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Mn DFL

Date of Disbursement
MM ' DD ' YYYY
03 ' 12 ' 2021

Mailing Address
255 Plato Blvd

City **St Paul** State **Mn** Zip Code **55104**

Purpose of Disbursement
Founders Day

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: **Mn** District:

FEC Identification Number
C

Amount of Each Disbursement this Period
1,000.00

Memo Item

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

Date of Disbursement
MM ' DD ' YYYY

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number
C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ **1,500.00**

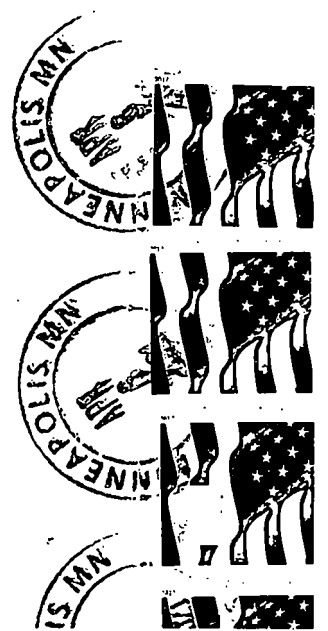
TOTAL This Period (last page this line number only) ▶

2025 RELEASE UNDER E.O. 14176

NALC 'at 7
7032 Seney Ave
Brooklyn Park mn
55428

RECEIVED
FEC MAIL CENTER
2021 APR 15 AM 9:20

Federal Election Commission
1050 First St NE
Washington DC
20463



NONPROFIT ORGANIZATION

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 checked="" type="checkbox"/> USPS First Class Mail	Date of Receipt 4/15/21
Postmarked 4/16/21	
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<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

SPM
 PREPARER

4/16/21
 DATE PREPARED

NON-FEDERAL ELECTION COMMISSION