PAGE 1 / 45

#### **REPORT OF RECEIPTS AND DISBURSEMENTS**

FORM 3		thorized Com			Offi	ce Use Only
NAME OF     COMMITTEE (in full)	TYPE OR PRINT	•	cample: If typing, ver the lines.	type	L2FE4M5	
Gerson for Congress						1
	DO D 4405					
ADDRESS (number and street)	PO Box 1465					
▼ Check if different						
than previously reported. (ACC)	Burnsville				MN 553	37
		CITY ▲		STA	ATE A	ZIP CODE ▲
2. FEC IDENTIFICATION N	IUMBER <b>V</b>					STATE ▼ DISTRICT
C C00523738		3. IS THIS REPORT	NEW (N)	OR	AMENDED (A)	MN 02
April 15 Quarterly  July 15 Quarterly	Report (Q1)	(b) 12-Day <b>PRE</b>	E-Election Report Primary (12P) Convention (12		General (12G) Special (12S)	Runoff (12R)
October 15 Quart		Election on	M M /	D D / Y	YYY	in the State of
January 31 Year-E	End Report (YE)	(c) 30-Day <b>POS</b>	<b>ST</b> -Election Repo	rt for the:		
			General (30G)		Runoff (30R)	Special (30S)
Termination Report	t (TER)	Election on	M M /	D D / Y	YYY	in the State of
5. Covering Period	01 D D /	Y Y Y Y Y 2017	through	M M M /	31 Y	Y Y Y 2017
certify that I have examined	Gerson, David,		nowledge and be	lief it is true,	correct and co	mplete.
Гуре or Print Name of Treasur	er 					
Ge Signature of Treasurer	rson, David, , ,		[Electronically Fil	[ed] Date	07	16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of false, error	neous, or incomplete	information may	subject the perso	n signing this	Report to the po	enalties of 52 U.S.C. §30109
Office Use Only					ı	FEC FORM 3 (Revised 05/2016)

#### **SUMMARY PAGE**

of Receipts and Disbursements

PAGE 2 / 45

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name Gerson for Congress

2017 2017 03 01 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 0.00 0.00 (other than loans) (from Line 11(e)) .... (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) ..... (c) Net Contributions (other than loans) 0.00 0.00 (subtract Line 6(b) from Line 6(a)) ...... 7. Net Operating Expenditures (a) Total Operating Expenditures 131.93 631.93 (from Line 17) ..... (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 631.93 131.93 (subtract Line 7(b) from Line 7(a)) ...... Cash on Hand at Close of 103539.64 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 275000.00 Schedule C and/or Schedule D).....

#### 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**

FEC Form 3 (Revised 05/2016)

of Receipts

PAGE 3 / 45

Write or Type Committee Name **Gerson for Congress** 2017 03 31 2017 Report Covering the Period: From: To:

	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date			
11. C	CONTRIBUTIONS (other than loans) FROM:					
(a	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			
(1	b) Political Party Committees	0.00	0.00			
(0	c) Other Political Committees (such as PACs)	0.00	0.00			
`	d) The Candidatee) TOTAL CONTRIBUTIONS	0.00	0.00			
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	0.00			
	TRANSFERS FROM OTHER	0.00	0.00			
	AUTHORIZED COMMITTEES	0.00	0.00			
	OANS:  a) Made or Guaranteed by the					
(4	Candidate	0.00	0.00			
(1	b) All Other Loans	0.00	0.00			
(0	c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	0.00			
	DFFSETS TO OPERATING					
	EXPENDITURES Refunds, Rebates, etc.)	0.00	0.00			
	OTHER RECEIPTS Dividends, Interest, etc.)	0.00	0.00			
1	TOTAL RECEIPTS (add Lines 1(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)

PAGE 4 / 45

		II. DISBURSEMENTS	COLUMN B Election Cycle-to-Date		
17.	OPI	ERATING EXPENDITURES	131.93	631.93	
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	0.00	
	(b)	Of All Other Loans	0.00	0.00	
	(c)	TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00	
20.	REF	FUNDS OF CONTRIBUTIONS TO:			
	(a)	Individuals/Persons Other Than Political Committees	0.00	0.00	
	(1.)		0.00	0.00	
	(b)	Political Party Committees Other Political Committees	, , ,	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	
22.		TAL DISBURSEMENTS d Lines 17, 18, 19(c), 20(d), and 21)	131.93	631.93	
		III. CASH SU	MMARY		
23.	CAS	SH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	103671.57	
24	тот	TAL RECEIPTS THIS PERIOD (from Line 1	16, page 3)	0.00	
25.	SUI	BTOTAL (add Line 23 and Line 24)		103671.57	
26.	TOT	TAL DISBURSEMENTS THIS PERIOD (fron	m Line 22)	131.93	
27.		SH ON HAND AT CLOSE OF REPORTING	S PERIOD	103539.64	

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

FOR LINE NUMBER: (check only one)

**PAGE** 

5

**X** 13a 13b

OF

45

Transaction ID: SC/10.4392 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 16554.96 0.00 16554.96 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 <sup>D</sup>29<sup>D</sup> M 05M Ž01Ž 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)..... 16554.96 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

PAGE 6
FOR LINE NUMBER: (check only one)

13a

OF

						10	,D
AME OF COMMITTEE (In Full) Gerson for Congress					Transa	ction ID : SC/10.4365	
LOAN SOURCE Full Name (Last,	irst, Mic	ddle Initial)			Memo Item	Election: 2012	
Gerson, David, Adam,	,	,			j wemo item	rimary	
Gerson, David, Adam,						General	
Mailing Address PO Box 1465					Other (specify) ▼		
City		State MN	ZIP Cod 55337	de		Personal Funds of the Candid	late
Burnsville		IVIIA	33337				
Original Amount of Loan Cumulative Payment To				Date	Bal	ance Outstanding at Close of This Pe	riod
10000	00			0.00		10000.00	
TERMS Date Incurred		D	ate Due		Interest Rat		
M07 <sup>M</sup> / D19 <sup>D</sup> / Y Z01Z	Υ	M M / D D	/ Y	YNA Y		0.00	No
List All Endorsers or Guarantors	if any) t	o Loan Source				- (	
Full Name (Last, First, Middle Ir)		o Loan Godice		Name of Em	ployer		
Mailing Address				Occupation			
				Amount			
City State ZIP Code			Guaranteed Outstanding:				
2. Full Name (Last, First, Middle Ini	tial)			Name of Employer			
Mailing Address				Occupation			
				Amount			
City	State	ZIP Code		Guaranteed Outstanding:			
3. Full Name (Last, First, Middle Ini	tial)	·		Name of Employer			
Mailing Address				Occupation			
				Amount			
City	State	ZIP Code		Guaranteed Outstanding:		7	
4. Full Name (Last, First, Middle Ini	tial)			Name of Employer			
Mailing Address			Occupation				
				Amount			
City	State	ZIP Code		Guaranteed Outstanding:		7	
CURTOTALO This Deviced This Days (s	<b></b> N	•					_
SUBTOTALS This Period This Page (c	puonai).				···· <b>&gt;</b>	10000.00	╛
TOTALS This Period (last page in this	line only	y)			▶	, ,	
Carry outstanding balance only to LIN	IE 3, ScI	nedule D, for this	s line. If ı	no Schedule	D, carry for	ward to appropriate line of Summar	 ry.

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

PAGE 7
FOR LINE NUMBER: (check only one)

13a 13b

		13b
AME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4381
LOAN SOURCE Full Name (Last, First, Mailing Address PO Box 1465	Middle Initial)	☐ Memo Item  Election: 2012  ## Primary  General  Other (specify) ▼
City Burnsville	State	ZIP Code  55337  Personal Funds of the Candidate
Original Amount of Loan 5000.00	Cumulative Pa	byment To Date  Balance Outstanding at Close of This Period  0.00  5000.00
TERMS Date Incurred	M " M / D " D	Date Due Interest Rate (If none, enter 0)  O / 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
City	ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City	ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City	ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	<b>'</b>	Name of Employer
Mailing Address		Occupation
City	ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional		, , , , , , , , , , , , , , , , , , , ,
	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 8
FOR LINE NUMBER: (check only one)

**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, ,	☐ 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)

PAGE

9

13a

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, ,	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	J.,	0.00 5000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M07 <sup>M</sup> / D26 <sup>D</sup> / 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

FOR LINE NUMBER: (check only one)

**PAGE** 

10 OF

×	13a
	13b

45

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 <sup>M</sup>80<sup>M</sup> 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)

PAGE 11

X	13a
	13b

OF

AME OF COMMITTEE (In Full) Gerson for Congress					Transac	tion ID : SC	/10.4129		
LOAN SOURCE Full Name (Last, F Gerson, David, Adam, ,	First, Midd	dle Initial)			Memo Item	Election:  Prima Gener	ral		
Mailing Address PO Box 1465						Other	(specify)	▼	
City	:	State	ZIP Co	de		<b>V</b> D		de et de e	Candidate
Burnsville		MN	55337			<b>✗</b> Pers	onal Fund	as or the	
Original Amount of Loan	ment To			nce Outstar	nding at C	-			
5000.	00			0.0	0			500	).00
TERMS Date Incurred		D	ate Due		Interest Rate (If none, enter			Secured	l:
M08M / D10D / Y Ž01Ž	Y	M / D D	/ Y	YNA Y	0.0		(apr)	Yes	x No
List All Endorsers or Guarantors (	f any) to	Loan Source							
1. Full Name (Last, First, Middle In	itial)			Name of En	nployer				
Mailing Address				Occupation					
		_		Amount Guaranteed					
City	State	ZIP Code		Outstanding		7	7		_
2. Full Name (Last, First, Middle Init	ial)			Name of En	nployer				
Mailing Address				Occupation					
				Amount					_
City	State	ZIP Code		Guaranteed Outstanding		7	7		
3. Full Name (Last, First, Middle Init	ial)			Name of En	nployer				
Mailing Address				Occupation					
				Amount					_
City	State	ZIP Code		Guaranteed Outstanding		7	7		
4. Full Name (Last, First, Middle Init	ial)			Name of Employer					
Mailing Address				Occupation					
				Amount	_				_
City	State	ZIP Code		Guaranteed Outstanding		7	7		
SUBTOTALS This Period This Page (o	ptional)				}		7	5000	).00
FOTALS This Period (last page in this	line only)				▶	7			
Carry outstanding balance only to LIN	E 3, Sche	edule D, for this	line. If	no Schedule	D, carry forw	ard to app	ropriate	line of Si	ımmary.

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

FOR LINE NUMBER: (check only one)

PAGE 12

13a

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, ,	☐ 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)
<sup>M</sup> 08 <sup>M</sup> / □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
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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

PAGE 13
FOR LINE NUMBER: (check only one)

13a

OF

						130			
	ME OF COMMITTEE (In Full) Serson for Congress				Trans	saction ID : SC/10.4130			
Ľ									
	LOAN SOURCE Full Name (Last, Gerson, David, Adam, ,	First, Mic	ldle Initial)		☐ Memo Ite	Election: 2012  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 B	alance Outstanding at Close of This Period			
	1000	0.00			0.00	1000.00			
	TERMS Date Incurred Date Due				Interest R (If none, er				
					YNA Y	0.00 % (apr) Yes No			
	List All Endorsers or Guarantors	(if any) to	o Loan Source						
	1. Full Name (Last, First, Middle I				Name of Employer				
	Mailing Address				Occupation				
					Amount				
	City	State	ZIP Code		Guaranteed Outstanding:	9 9			
	2. Full Name (Last, First, Middle Initial)				Name of Employer				
	Mailing Address				Occupation  Amount				
	City	State	ZIP Code		Guaranteed Outstanding:	7			
	3. Full Name (Last, First, Middle In	itial)			Name of Employer  Occupation				
	Mailing Address								
					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			
			·						
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C	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.			
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Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 14

13a

OF

						130	
	ME OF COMMITTEE (In Full) Serson for Congress				Trans	eaction ID : SC/10.4131	
		Circh NA:-	-  -  :4:- \			Fr	
	<b>LOAN SOURCE</b> Full Name (Last, Gerson, David, Adam, ,	FIRST, IVIIC	idie initial)		☐ Memo Ite	x Primary	
	Mailing Address PO Box 1465					General Other (specify) ▼	
	City		State	ZIP Cod	de	✗ Personal Funds of the Candidate	
	Burnsville		MN	55337		1 ersonal runus of the Candidate	
	Original Amount of Loan		Cumulative Pay	ment To	Date B	alance Outstanding at Close of This Period	
	1000	0.00	7		0.00	1000.00	
	TERMS Date Incurred		D	ate Due	Interest R (If none, er		
	M08M / D20D / Y Ž01Ž	Y	M M / D D	/ Y	YNA Y	0.00 % (apr) Yes X 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:	. , . , ,	
	Full Name (Last, First, Middle Initial)  Mailing Address				Name of Employer		
					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:	7 7	
		•	•				
S	UBTOTALS This Period This Page (	optional)			······	1000.00	
T	OTALS This Period (last page in this	line only	·)		······	7	
c	Carry outstanding balance only to LI	NE 3, Sch	edule D, for this	s line. If	no Schedule D, carry fo	prward to appropriate line of Summary.	

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

PAGE 15
FOR LINE NUMBER: (check only one)

13a

OF

						130	
	ME OF COMMITTEE (In Full)				Trans	saction ID : SC/10.4442	
Ľ							
	LOAN SOURCE Full Name (Last,	First, Mic	ldle Initial)		☐ Memo Ite		
	Gerson, David, Adam, ,					Primary	
	Mailing Address					General Others (conseits)	
	Mailing Address PO Box 1465					Other (specify) ▼	
	City		State	ZIP Co	de	✗ Personal Funds of the Candidate	
	Burnsville		MN	55337		Toronal Fundo of the Canadate	
	Original Amount of Loan		Cumulative Pay	yment To	Date B	alance Outstanding at Close of This Period	
	479	9.33			0.00	479.33	
	TERMS Date Incurred			Date Due	Interest R		
	MO2M / P22D / Y 3013	V	M M / D D	/ V	(If none, er	0.00	
	M02M / D22D / Y 2013	ا لــ			/1/2020 <sup>Y</sup>	% (apr) Yes 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)				Name of Employer	,	
	•						
	Mailing Address				Occupation		
					Amount		
	City	State	ZIP Code		Guaranteed Outstanding:	7 7	
	3. Full Name (Last, First, Middle In	itial)			Name of Employer  Occupation		
	Mailing Address						
					Amount		
	City	State	ZIP Code		Guaranteed		
	2,				Outstanding:	, ,	
	4. Full Name (Last, First, Middle In	itial)			Name of Employer		
	Mailing Address				Occupation		
					Amount		
	City	State	ZIP Code		Guaranteed Outstanding:	9 9	
					I		
SI	UBTOTALS This Period This Page (	ontional)				470.00	
Ľ		٠,٠٠٠ ١٥١١ ١٥١١ ١٥١٠				479.33	
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	erry outstanding balance only to LII	NE 3 Sob	adula D for this	s line If	no Schedule D. carry fr	prward to appropriate line of Summary.	
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Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 16

13a

OF

						130	
	ME OF COMMITTEE (In Full) Serson for Congress				Trans	saction ID : SC/10.4444	
Ľ							
	LOAN SOURCE Full Name (Last, Gerson, David, Adam, ,	First, Mic	ldle Initial)		☐ Memo Ite	m Election: 2014  x Primary	
						General	
	Mailing Address PO Box 1465					Other (specify)	
	City State 2			ZIP Co	de	✗ Personal Funds of the Candidate	
	Burnsville		MN		1 ersonal runus of the Candidate		
	Original Amount of Loan		Cumulative Pay	yment To	Date B	alance Outstanding at Close of This Period	
	3000	0.00			0.00	3000.00	
	TERMS Date Incurred		D	Date Due	Interest R (If none, er		
	<sup>M</sup> 02 <sup>M</sup> / <sup>D</sup> 25 <sup>D</sup> / Y Ž013	Y	M M / D D	/ Y	/1/2020 Y	0.00 % (apr) Yes No	
	List All Endorsers or Guarantors	(if any) to	o Loan Source				
	1. Full Name (Last, First, Middle I				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)	<u>'</u>		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	
			•				
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Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 17
FOR LINE NUMBER: (check only one)

13a

OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4464
LOAN SOURCE Full Name (Last, First, N	liddle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	induc 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
3000.00	,	0.00 3000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M03M / D26D / Y Ž013 Y	M M / D D	/ Y 1/1/2020 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 State	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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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)

PAGE 18

13a

OF

		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)
<sup>M</sup> 04 <sup>M</sup> / □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:
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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 19

13a

OF

						130
AME OF COMMITTEE (In Full)  Gerson for Congress					Transa	ction ID : SC/10.4545
LOAN SOURCE Full Name (Last,	First, Mic	ddle Initial)			Memo Item	Election: 2014
Gerson, David, Adam,	,	,			j wemo item	rimary Primary
						General
Mailing Address PO Box 1465						Other (specify)
City		State	ZIP Cod	de		✗ Personal Funds of the Candidate
Burnsville		MN	55337			To contain and on the canadam
Original Amount of Loan		Cumulative Page	yment To	Date	Bala	ance Outstanding at Close of This Perio
4000	0.00	2		0.00	)	4000.00
TERMS Date Incurred		Г	Date Due		Interest Rat	
<sup>M</sup> 05 <sup>M</sup> / <sup>D</sup> 13 <sup>D</sup> / <sup>Y</sup> Ž013	Y	M M / D D	/ Y	1)1/20 Y		.00
List All Endorsers or Guarantors	(if any) t	to Loan Source				
Full Name (Last, First, Middle I	, ,,	Louis Course		Name of Em	ployer	
Mailing Address				Occupation		
				Amount		
City	City State ZIP Code			Guaranteed Outstanding:		, ,
2. Full Name (Last, First, Middle In	itial)			Name of Em	ıployer	
Mailing Address				Occupation		
				Amount		
City	State	ZIP Code		Guaranteed Outstanding:		9 9
3. Full Name (Last, First, Middle In	itial)			Name of Em	nployer	
Mailing Address				Occupation		
				Amount		
City	State	ZIP Code		Guaranteed Outstanding:		7
4. Full Name (Last, First, Middle In	itial)	•		Name of Em	ployer	
Mailing Address	Mailing Address					
				Amount		
City State ZIP Code				Guaranteed Outstanding:		9 9
CURTOTALO This Desiral This Days (	t: N					
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Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 20
FOR LINE NUMBER: (check only one)

13a

OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4591
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	viidaio iriitiai,	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)
M06 <sup>M</sup> / D10 <sup>D</sup> / 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 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		5000.00
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

FOR LINE NUMBER: (check only one)

PAGE 21

13a

OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4622
LOAN SOURCE Full Name (Last, First, N	liddle Initial)	Floation: 2044
Gerson, David, Adam, ,	ilidale li littalij	☐ 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
131.12		0.00 131.12
TERMS Date Incurred	[	Date Due Interest Rate Secured: (If none, enter 0)
M06 <sup>M</sup> / D30 <sup>D</sup> / Y Ž013 Y	M M / D D	/ Y 1/1/20 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 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 State	ZIP Code	Guaranteed Outstanding:
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GODICIALS THIS PERIOD THIS Page (optional	)	131.12
TOTALS This Period (last page in this line or	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

FOR LINE NUMBER: (check only one)

PAGE 22

13a

OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5169
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	ivildale iliitalij	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)
M07 <sup>M</sup> / D05 <sup>D</sup> / Y 2013 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 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:
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Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 23
FOR LINE NUMBER: (check only one)

13a

OF

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	AME OF COMMITTEE (In Full) Gerson for Congress				Trans	saction ID : SC/10.5170	
		Circh NA:-	-  -  :4:- \			T = 1:	
	Gerson, David, Adam, ,	First, Mic	idie initial)		☐ Memo Ite	<b>x</b> Primary	
	Mailing Address PO Box 1465					General Other (specify) ▼	
	City		State	ZIP Cod	de	✗ Personal Funds of the Candidate	
	Burnsville		MN	55337		reisonal runds of the Candidate	
	Original Amount of Loan		Cumulative Pay	yment To	Date B	dalance Outstanding at Close of This Period	
	5000	0.00	7		0.00	5000.00	
	TERMS Date Incurred		D	ate Due	Interest R (If none, er		
	M <sub>07</sub> M / D <sub>29</sub> 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 I	nitial)			Name of Employer		
	Mailing Address				Occupation		
					Amount		
	City	State	ZIP Code		Guaranteed Outstanding:	9 9 9	
	2. Full Name (Last, First, Middle In	itial)			Name of Employer		
	Mailing Address				Occupation Amount		
	City	State	ZIP Code		Guaranteed Outstanding:	7	
	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:	9 9	
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Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 24

13a 13b

OF

LOAN SOURCE Full Name Gerson, David, Adan	•	ddle Initial)	☐ Memo II	Election: 2014    X   Primary     General	
Mailing Address PO Box 1465				Other (specify) ▼	
City Burnsville		State	ZIP Code 55337	Personal Funds of the Candidate	
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			ate Due Interest (If none,	enter 0)	
M08M / P19P / Y	ž013 <sup>Y</sup>	M - M / D -	/ Y 1ÿ1/2Ŏ Y	0.00 % (apr) Yes X No	
List All Endorsers or Guar	, ,,	to Loan Source	Name of Employer		
1. Full Name (Last, First, N	/liddle Initial)		Name of Employer		
Mailing Address			Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:	· · · · · · · · · · · · · · · · · · ·	
2. Full Name (Last, First, M	iddle Initial)		Name of Employer		
Mailing Address			Occupation	Occupation	
			Amount		
City	State	ZIP Code	Guaranteed Outstanding:	9 9	
3. Full Name (Last, First, M	iddle Initial)		Name of Employer		
Mailing Address			Occupation	Occupation	
City	State	ZIP Code	Amount Guaranteed		
4. Full Name (Last, First, M	iddle Initial)		Outstanding:  Name of Employer	, , , -	
Mailing Address			Occupation		
			Amount		
City State ZIP Code			Guaranteed Outstanding:	7	
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Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 25

13a

OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5173
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	whate milal	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
5000.00		0.00 5000.00
TERMS Date Incurred	Г	Date Due Interest Rate Secured: (If none, enter 0)
M09M / D12D / Y Ž01Š 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:
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Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE

26 OF

×	13a
	13h

45

Transaction ID: SC/10.5174 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 3000.00 0.00 3000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D30 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)..... 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

FOR LINE NUMBER: (check only one)

PAGE

27 OF

×	13a
	13b

45

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<sup>M</sup> 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.

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

FOR LINE NUMBER: (check only one)

PAGE 28

13a

OF

		130
NAME OF COMMITTEE (In Full)  Gerson for Congress		Transaction ID: SC/10.5203
		·
LOAN SOURCE Full Name (Last, First, Mic Gerson, David, Adam, ,	ldle Initial)	☐ Memo Item Election: 2014   ▼ Primary
		General Other (consent )
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	rment To Date Balance Outstanding at Close of This Period
5000.00	7	0.00 5000.00
TERMS Date Incurred	С	ate Due Interest Rate Secured: (If none, enter 0)
M10M / D16D / Y Ž01Š 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	
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).		5000.00
TOTALS This Period (last page in this line only	y)	······································
Carry outstanding balance only to LINE 3, Sch	edule 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

PAGE 29
FOR LINE NUMBER: (check only one)

13a

OF

							100
AME OF COMMITTEE (In Full) Gerson for Congress					Transa	ction ID : SC/10.5204	
LOAN SOURCE Full Name (Last,	First, Mid	ddle Initial)			Memo Item	Election: 2014	
Gerson, David, Adam, ,	Gerson, David, Adam.					rimary	
						General	
Mailing Address PO Box 1465						Other (specify)   ———————————————————————————————————	
City		State	ZIP Cod	de			
Burnsville		MN	55337			Personal Funds of the Can	didate
Original Amount of Loan		Cumulative Pay	yment To	Date	Bal	lance Outstanding at Close of This	Period
5000	.00	3		0.00	)	5000.00	
TERMS Date Incurred		D	Date Due		Interest Rat		
M10 <sup>M</sup> / D23 <sup>D</sup> / Y Ž013	Υ	M M / D D	/ Y	1)1/20 Y	,	0.00	<b>x</b> No
List All Endorsers or Guarantors	(if any) t	o Loan Source					
Full Name (Last, First, Middle Ir		S Louir Course		Name of Em	ployer		
Mailing Address				Occupation			
				Amount			
City	State	ZIP Code		Guaranteed Outstanding:		7	
2. Full Name (Last, First, Middle Ini	tial)			Name of Employer			
Mailing Address				Occupation			
				Amount			
City	State	ZIP Code		Guaranteed Outstanding:		9 9	
3. Full Name (Last, First, Middle Ini	tial)			Name of Employer			
Mailing Address				Occupation			
				Amount			
City	State	ZIP Code		Guaranteed Outstanding:		y y	
4. Full Name (Last, First, Middle Ini	tial)			Name of Em	ployer		
Mailing Address				Occupation			
			ŀ	Amount			
City	State	ZIP Code		Guaranteed Outstanding:		7 7	
SUBTOTALS This Period This Page (c	ntinnal\						$\overline{}$
This Period This Page (C	φιισπαι).					5000.00	
<b>FOTALS</b> This Period (last page in this	line only	y)			▶	, ,	
Carry outstanding balance only to LIN	IE 3, Scl	nedule D, for this	s line. If r	no Schedule	D, carry for	ward to appropriate line of Sumn	nary.

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

PAGE 30
FOR LINE NUMBER: (check only one)

13a

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	<b>x</b> 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:			
2. Full Name (Last, First, Middle Ir	nitial)	<u>.</u>		Name of Employer			
Mailing Address				Occupation			
				Amount			1
City	State	ZIP Code		Guaranteed Outstanding:		, ,	
3. Full Name (Last, First, Middle Ir	nitial)			Name of Employer			
Mailing Address				Occupation			
				Amount	_		1
City	State	ZIP Code		Guaranteed Outstanding:		y	
4. Full Name (Last, First, Middle Ir	nitial)	•		Name of Em	ployer		
Mailing Address				Occupation			
				Amount			1
City	State	ZIP Code		Guaranteed Outstanding:		7	
SUBTOTALS This Period This Page (	optional)				▶	5000.0	0
TOTALS This Period (last page in this	s line onl	y)					
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-	
Carry outstanding balance only to LI	INE 3, 5C	nedule D, for this	s ime. if I	io scheanie	ט, carry for\	waru to appropriate line of Sum	mary.

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

FOR LINE NUMBER: (check only one)

PAGE 31

**X** 13a

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)	<b>'</b>	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optiona	)	4000 00
COLUMN TO THE TOTAL THE TAGE (OPTIONA	,	4000.00
TOTALS This Period (last page in this line of	ly)	······································
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)

**PAGE** 

32 OF

×	13a
	13h

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Transaction ID: SC/10.5207 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 3000.00 0.00 3000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 M 1 1 M <sup>D</sup>19<sup>D</sup> 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)..... 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

FOR LINE NUMBER: (check only one)

PAGE 33

**X** 13a 13b

OF

NAME OF COMMITTEE (In F Gerson for Congress			Transa	action ID : SC/10.5208				
Gerson, David, Ada	•	☐ 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 /	<sup>Y</sup> Ž013 <sup>Y</sup>	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	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:	<u> </u>				
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	Occupation				
City	State	ZIP Code	Amount Guaranteed					
Oity	State	ZIF Code	Outstanding:	9 9				
SUBTOTALS This Period Th	nis Page (optional)			4000.00				
TOTALS This Period (last pa	age in this line only	·) ·······		7 7 7				
Corns 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

PAGE 34
FOR LINE NUMBER: (check only one)

13a

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)	
COSTOTALO TINO I GNOW TINO Page (optiona	y	4000.00
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) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE

35 OF

**X** 13a 13b

45

Transaction ID: SC/10.5210 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 3000.00 0.00 3000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) M 12M 0.00 <sup>D</sup>16<sup>D</sup> 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)..... 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

FOR LINE NUMBER: (check only one)

PAGE 36

13a

OF

									130
AME OF COMMITTEE (In Full) Gerson for Congress					Trans	action I	ID : SC/10.55	42	
Gerson, David, Adam, ,					Memo Ite	m Elec	ction: 2014 Primary General Other (spec		
PO Box 1465									
City		State	ZIP Co	de		×	Personal F	unds of th	ne Candida
Burnsville		MN	55337						
Original Amount of Loan	-	Cumulative Pay	ment To			alance (	Outstanding a	-	
3000.0	0	9		0.00	)		7	3	3000.00
TERMS Date Incurred		D	ate Due		Interest R (If none, er			Secu	ıred:
M01M / D08D / Y Ž014	Y	/ M / D D	/ Y	1)1/20 Y		0.00	% (apr)		Yes X
List All Endorsers or Guarantors (if	any) to	Loan Source							
1. Full Name (Last, First, Middle Init	ial)			Name of Em	ployer				
Mailing Address				Occupation					
				Amount	_				
City	State	ZIP Code	Guaranteed Outstanding:		,	,			
2. Full Name (Last, First, Middle Initial	al)			Name of Employer					
Mailing Address				Occupation					
				Amount					
City	State	ZIP Code		Guaranteed Outstanding:		7	7		
3. Full Name (Last, First, Middle Initial	al)	1		Name of Em	ployer				
Mailing Address				Occupation					
				Amount					
City	State	ZIP Code		Guaranteed Outstanding:		7	- 7		
4. Full Name (Last, First, Middle Initial	al)	-1		Name of Em	ployer				
Mailing Address				Occupation					
				Amount	_				
City	State	ZIP Code		Guaranteed Outstanding:		7	7		
					Г				
SUBTOTALS This Period This Page (optional)									
TOTALS This Period (last page in this li	ne only	)			▶		,	,	
Carry outstanding balance only to LINE	3, Sch	edule D, for this	line. If	no Schedule	D, carry fo	orward t	to appropria	te line of	Summary

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

FOR LINE NUMBER: (check only one)

PAGE 37

13a

OF

		130			
AME OF COMMITTEE (In Full)  Gerson for Congress		Transaction ID : SC/10.5543			
LOAN SOURCE Full Name (Last, First Gerson, David, Adam, ,	, Middle Initial)	☐ Memo Item			
PO Box 1465					
City	State	ZIP Code  FE227  Personal Funds of the Candidate			
Burnsville		55337			
Original Amount of Loan 5000.00	Cumulative Pay	ment To Date  Balance Outstanding at Close of This Period  0.00  5000.00			
TERMS Date Incurred	D	ate Due Interest Rate Secured:			
M01 <sup>M</sup> / D16 <sup>D</sup> / Y Ž014 Y	M M / D D	/ Y 1/1/20 Y 0.00			
List All Endorsers or Guarantors (if a	ny) to Loan Source				
1. Full Name (Last, First, Middle Initial	)	Name of Employer			
Mailing Address		Occupation			
		Amount			
City	te ZIP Code	Guaranteed Outstanding:			
2. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
		Amount			
City	te ZIP Code	Guaranteed Outstanding:			
3. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
		Amount			
City	te ZIP Code	Guaranteed Outstanding:			
4. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
		Amount			
City	te ZIP Code	Guaranteed Outstanding:			
SUBTOTALS This Period This Page (optional)					
FOTALS This Period (last page in this line	only)				
Carry outstanding balance only to LINE 3	. Schedule D. for this	s line. If no Schedule D, carry forward to appropriate line of Summary.			
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Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 38 OF
FOR LINE NUMBER:
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13a

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5544
LOAN SOURCE Full Name (Last, First, M	iddle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	iddic iiiildij	Memo Item    Clection: 2014
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code  Second 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
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M02M / D26D / Y Ž014 Y	M M / D D	/
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
Oit.	71D O- 1-	Amount Guaranteed
City State	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
- In		Amount Guaranteed
City	ZIP Code	Outstanding:
4. Full Name (Last, First, Middle Initial)	•	Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
SUBTOTALS This Period This Page (optional)		
This renod This Page (optional)		10000.00
TOTALS This Period (last page in this line or	ıly)	······································
Carry outstanding balance only to LINE 3, Se	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

PAGE 39
FOR LINE NUMBER: (check only one)

13a

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 State	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 (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)

PAGE 40

13a

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) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE

41

I	X	13a
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OF

45

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)  $\blacktriangledown$ 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 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 <sup>D</sup>12<sup>D</sup> <sup>M</sup>80<sup>M</sup> 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)

PAGE 42

13a

OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5980
LOAN SOURCE Full Name (Last, First,	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
10000.00	J,	0.00 10000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
<sup>M</sup> 09 <sup>M</sup> / <sup>D</sup> 08 <sup>D</sup> / <sup>Y</sup> Ž01Š <sup>Y</sup>	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 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)	<u>'</u>	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (options		
SOBIOTALS THIS PERIOD THIS Page (options	11)	10000.00
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 43

13a

OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.6013
LOAN SOURCE Full Name (Last, First, I	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
33932.59		0.00 33932.59
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M09M / D30D / 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	
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)	<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		
SOBIOTALS THIS PERIOD THIS Page (options		33932.59
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

44 OF

×	13a
	13b

45

Transaction ID: SC/10.6284 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 50000.00 0.00 50000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) M 12M 0.00 <sup>D</sup>23<sup>D</sup> 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)..... 50000.00 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)

PAGE 45

13a

OF

		130
NAME OF COMMITTEE (In Full)  Gerson for Congress		Transaction ID : SC/10.6765
LOAN SOURCE Full Name (Last, First, Mid	ddla Initial)	
Gerson, David, Adam, ,	due iriitiai)	☐ 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	
25000.00		0.00 25000.00
TERMS Date Incurred	C	ate Due Interest Rate Secured: (If none, enter 0)
M03M / D30D / Y Ž01Ř Y	M M / D D	/ Y YNAY Y 0.00 % (apr) Yes X No
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)		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)		25000.00
TOTALS This Period (last page in this line only	/)	275000.00
Carry outstanding balance only to LINE 3, Sci	nedule D, for this	line. If no Schedule D, carry forward to appropriate line of Summary.