

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Dorsey National Fund

ADDRESS (number and street) 50 South Sixth Street
 Check if different than previously reported. (ACC)
Minneapolis MN 55402

2. **FEC IDENTIFICATION NUMBER** C00018945
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 Quarterly 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 (12G)
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 01 01 2007 through 06 30 2007

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 Kevin Tracey

Signature of Treasurer Electronically Filed by Kevin Tracey Date 07 31 2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Dorsey National Fund

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date										
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>		<table border="1" style="width: 100%;"><tr><td align="right">16396.81</td></tr></table>	16396.81
Y	Y	Y	Y									
2	0	0	7									
16396.81												
(b) Cash on Hand at Beginning of Reporting Period	<table border="1" style="width: 100%;"><tr><td align="right">16396.81</td></tr></table>	16396.81										
16396.81												
(c) Total Receipts (from Line 19)	<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00	<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00								
0.00												
0.00												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<table border="1" style="width: 100%;"><tr><td align="right">16396.81</td></tr></table>	16396.81	<table border="1" style="width: 100%;"><tr><td align="right">16396.81</td></tr></table>	16396.81								
16396.81												
16396.81												
7. Total Disbursements (from Line 31)	<table border="1" style="width: 100%;"><tr><td align="right">13650.00</td></tr></table>	13650.00	<table border="1" style="width: 100%;"><tr><td align="right">13650.00</td></tr></table>	13650.00								
13650.00												
13650.00												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table border="1" style="width: 100%;"><tr><td align="right">2746.81</td></tr></table>	2746.81	<table border="1" style="width: 100%;"><tr><td align="right">2746.81</td></tr></table>	2746.81								
2746.81												
2746.81												
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00										
0.00												
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td align="right">540.00</td></tr></table>	540.00										
540.00												

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Dorsey National Fund

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

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	0.00	0.00
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ▶	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ▶	0.00	0.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	0.00	0.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	0.00	0.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	12650.00	12650.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	1000.00	1000.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	13650.00	13650.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	13650.00	13650.00

DETAILED SUMMARY PAGE
of Disbursements

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)	0.00	0.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

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

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

NAME OF COMMITTEE (In Full)
Dorsey National Fund

Full Name (Last, First, Middle Initial) A. Michael Ahern		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 7	
Mailing Address 50 South Sixth Street		Transaction ID: SA11A1.6781	
City State Zip Code Minneapolis MN 55402	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C	Exempt Legal Fees [MEMO ITEM]		
Name of Employer Occupation Dorsey & Whitney LLP Lawyer	Aggregate Year-to-Date .00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) B. Chris Kausch		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 7	
Mailing Address 50 South Sixth Street		Transaction ID: SA11A1.6782	
City State Zip Code Minneapolis MN 55402	Amount of Each Receipt this Period 700.00		
FEC ID number of contributing federal political committee. C	Exempt Accounting Fees [MEMO ITEM]		
Name of Employer Occupation Accountant	Aggregate Year-to-Date .00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) C. Lynnette Slater Crandall		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 7	
Mailing Address 50 South Sixth Street		Transaction ID: SA11A1.6789	
City State Zip Code Minneapolis MN 55402	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C	Exempt Legal Fees [MEMO ITEM]		
Name of Employer Occupation Dorsey & Whitney LLP Lawyer	Aggregate Year-to-Date .00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 7 / 14	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Dorsey National Fund

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

Mailing Address 50 South Sixth Street

City State Zip Code
Minneapolis MN 55402

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

Name of Employer Occupation
Dorsey & Whitney LLP Administrator

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	7

Transaction ID: SA11A1.6783

Amount of Each Receipt this Period
200.00

Exempt Accounting Fees

[MEMO ITEM]

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Dorsey National Fund

Full Name (Last, First, Middle Initial) A. COLE FOR CONGRESS		Transaction ID: SB23.6758 Date of Disbursement
Mailing Address P.O. Box 722256		<input type="text" value="03"/> / <input type="text" value="16"/> / <input type="text" value="2007"/>
City Norman	State OK	Zip Code 73070
Purpose of Disbursement	<input type="text" value="011"/> Category/ Type	
Candidate Name TOM COLE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OK	District: 4	
		Amount of Each Disbursement this Period <input type="text" value="500.00"/>

Full Name (Last, First, Middle Initial) B. DAY FOR CONGRESS		Transaction ID: SB23.6766 Date of Disbursement
Mailing Address PO BOX 616		<input type="text" value="06"/> / <input type="text" value="05"/> / <input type="text" value="2007"/>
City OWATONNA	State MN	Zip Code 55060
Purpose of Disbursement	<input type="text" value="011"/> Category/ Type	
Candidate Name DICK DAY		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MN	District: 01	
		Amount of Each Disbursement this Period <input type="text" value="150.00"/>

Full Name (Last, First, Middle Initial) C. DEMOCRATIC SENATORIAL CAMPAIGN COMMITTEE		Transaction ID: SB23.6775 Date of Disbursement
Mailing Address 120 MARYLAND AVENUE NE		<input type="text" value="02"/> / <input type="text" value="21"/> / <input type="text" value="2007"/>
City WASHINGTON	State DC	Zip Code 20002
Purpose of Disbursement	<input type="text" value="011"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	
		Amount of Each Disbursement this Period <input type="text" value="2000.00"/>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2650.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Dorsey National Fund

Full Name (Last, First, Middle Initial) A. ELLISON FOR CONGRESS		Transaction ID: SB23.6760 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 7
Mailing Address PO BOX 11818		Amount of Each Disbursement this Period 1000.00
City MINNEAPOLIS State MN Zip Code 55411	Purpose of Disbursement 011 Category/Type	
Candidate Name KEITH MAURICE ELLISON		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MN District: 05		

Full Name (Last, First, Middle Initial) B. FRIENDS OF JIM OBERSTAR		Transaction ID: SB23.6759 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 3 / 2 0 0 7
Mailing Address 1017 8th St. NE		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20002	Purpose of Disbursement 011 Category/Type	
Candidate Name JAMES L. OBERSTAR		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MN District: 08		

Full Name (Last, First, Middle Initial) C. JOHN MCCAIN 2008 INC.		Transaction ID: SB23.6780 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 9 / 2 0 0 7
Mailing Address PO BOX 16118		Amount of Each Disbursement this Period 1000.00
City ARLINGTON State VA Zip Code 22215	Purpose of Disbursement 011 Category/Type	
Candidate Name JOHN S MCCAIN		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AZ District: 00		

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

PAGE 10 / 14

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

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NAME OF COMMITTEE (In Full)
Dorsey National Fund

Full Name (Last, First, Middle Initial) A. KLOBUCHAR FOR MINNESOTA		Transaction ID: SB23.6761 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 0 7
Mailing Address 1430 CONCORDIA AVENUE PO BOX 4146		Amount of Each Disbursement this Period 500.00
City SAINT PAUL State MN Zip Code 55104	011 Category/ Type	
Purpose of Disbursement		
Candidate Name AMY KLOBUCHAR		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 00	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. MARK UDALL FOR CONGRESS INC.		Transaction ID: SB23.6774 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 7
Mailing Address 8690 Wolff Court #200 8690 Wolff Court #200		Amount of Each Disbursement this Period 1500.00
City Westminster State CO Zip Code 80031	011 Category/ Type	
Purpose of Disbursement		
Candidate Name MARK UDALL		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 02	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. MCCOLLUM FOR CONGRESS		Transaction ID: SB23.6757 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 1 / 2 0 0 7
Mailing Address P.O. Box 14131		Amount of Each Disbursement this Period 1000.00
City St. Paul State MN Zip Code 55114	011 Category/ Type	
Purpose of Disbursement		
Candidate Name BETTY MCCOLLUM		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 04	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 11 / 14

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

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NAME OF COMMITTEE (In Full)
Dorsey National Fund

Full Name (Last, First, Middle Initial) A. RICHARDSON FOR PRESIDENT INC.		Transaction ID: SB23.6773 Date of Disbursement 06 / 15 / 2007	
Mailing Address PO BOX 26208		Amount of Each Disbursement this Period 1000.00	
City ALBUQUERQUE State NM Zip Code 87125	Purpose of Disbursement	011 Category/Type	
Candidate Name BILL RICHARDSON			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Full Name (Last, First, Middle Initial) B. TIM WALZ FOR US CONGRESS		Transaction ID: SB23.6770 Date of Disbursement 06 / 14 / 2007	
Mailing Address PO BOX 938		Amount of Each Disbursement this Period 3000.00	
City MANKATO State MN Zip Code 56002	Purpose of Disbursement	011 Category/Type	
Candidate Name TIMOTHY J WALZ			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 1	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ►

4000.00

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

12650.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 12 / 14

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

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NAME OF COMMITTEE (In Full)
Dorsey National Fund

Full Name (Last, First, Middle Initial)
A. Not Another Elevated Viaduct Campaign

Transaction ID: SB29.6777

Date of Disbursement

Mailing Address P.O. Box 9100

^M 0	^M 2	/	^D 1	^D 5	/	^Y 2	^Y 0	^Y 0	^Y 7
----------------	----------------	---	----------------	----------------	---	----------------	----------------	----------------	----------------

City State Zip Code
Seattle WA 98109

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Nonfederal Contribution

--

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

1000.00

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

1000.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 13 / 14	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Dorsey National Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Dorsey & Whitney, LLP	Nature of Debt (Purpose): Administrative
Mailing Address 50 South Sixth Street	
City State ZIP Code Minneapolis MN 55402	

Outstanding Balance Beginning This Period 90.00	Transaction ID: SD10.6291	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 90.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Dorsey & Whitney, LLP	Nature of Debt (Purpose): Administration
Mailing Address 50 South Sixth Street	
City State ZIP Code Minneapolis MN 55402	

Outstanding Balance Beginning This Period 90.00	Transaction ID: SD10.6303	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 90.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Dorsey & Whitney, LLP	Nature of Debt (Purpose): Administrative
Mailing Address 50 South Sixth Street	
City State ZIP Code Minneapolis MN 55402	

Outstanding Balance Beginning This Period 90.00	Transaction ID: SD10.6360	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 90.00

1) SUBTOTALS This Period This Page (optional).....	▶	270.00
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Dorsey National Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Dorsey & Whitney, LLP	Nature of Debt (Purpose): Administrative
Mailing Address 50 South Sixth Street	
City State ZIP Code Minneapolis MN 55402	

Outstanding Balance Beginning This Period 90.00	Transaction ID: SD10.6748	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 90.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Dorsey & Whitney, LLP	Nature of Debt (Purpose): Administration
Mailing Address 50 South Sixth Street	
City State ZIP Code Minneapolis MN 55402	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD10.6790	
Amount Incurred This Period 180.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 180.00

1) SUBTOTALS This Period This Page (optional).....	270.00
2) TOTALS This Period (last page this line number only).....	540.00
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	