

# 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  
COLEMAN MINNESOTA RECOUNT COMMITTEE

ADDRESS (number and street) PO BOX 14483  
 Check if different than previously reported. (ACC)  
ST PAUL MN 55114

2. **FEC IDENTIFICATION NUMBER** C00457564  
**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 04 01 2009 through 06 30 2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Anthony Sutton

Signature of Treasurer Electronically Filed by Anthony Sutton Date 07 15 2009

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

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
COLEMAN MINNESOTA RECOUNT COMMITTEE

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><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>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		194234.00
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	133730.76									
(c) Total Receipts (from Line 19) .....	199615.00	1149395.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	333345.76	1343629.00								
7. Total Disbursements (from Line 31) .....	267606.31	1277889.55								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	65739.45	65739.45								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	7251.38									

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

COLEMAN MINNESOTA RECOUNT COMMITTEE

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	184100.00	970050.00
(ii) Unitemized .....	6990.00	10420.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	191090.00	980470.00
(b) Political Party Committees .....	0.00	10000.00
(c) Other Political Committees (such as PACs) .....	8525.00	158925.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	199615.00	1149395.00
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)) .....	199615.00	1149395.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	199615.00	1149395.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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.....	48956.81	158054.73
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	48956.81	158054.73
22. Transfers to Affiliated/Other Party Committees.....	218649.50	1119834.82
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
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.....	0.00	0.00
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))..	267606.31	1277889.55
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	267606.31	1277889.55

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	199615.00	1149395.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	199615.00	1149395.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	48956.81	158054.73
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	48956.81	158054.73

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

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

FOR LINE NUMBER: PAGE 6 / 48  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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)  
COLEMAN MINNESOTA RECOUNT COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Robert J. Allison, Jr.  
Mailing Address 6116 Bermuda Dunes  
City State Zip Code  
Houston TX 77069  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2009  
Transaction ID: SA11AI.5739  
Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Howard R. Alton, Jr.  
Mailing Address 330 South Ocean Boulevard Unit 5D  
City State Zip Code  
Palm Beach FL 33480  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested Occupation Information Requested  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
04 / 20 / 2009  
Transaction ID: SA11AI.5540  
Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Elsa E. Bandi  
Mailing Address 401 Rollwind Road  
City State Zip Code  
Glenview IL 60025  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2009  
Transaction ID: SA11AI.5604  
Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2250.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 7 / 48
(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"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
COLEMAN MINNESOTA RECOUNT COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) Warren L. Batts	Date of Receipt MM / DD / YYYY 04 / 30 / 2009
	Mailing Address 219 East Lake Shore Drive Apartment 11CD	<b>Transaction ID:</b> SA11AI.5606
	City Chicago State IL Zip Code 60611	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) James F. Bell, Jr.	Date of Receipt MM / DD / YYYY 04 / 30 / 2009
	Mailing Address 3000 Andrews Drive NW Unit 6	<b>Transaction ID:</b> SA11AI.5608
	City Atlanta State GA Zip Code 30305	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Adele H. Binder	Date of Receipt MM / DD / YYYY 04 / 07 / 2009
	Mailing Address 130 Delfern Drive	<b>Transaction ID:</b> SA11AI.5455
	City Los Angeles State CA Zip Code 90077	Amount of Each Receipt this Period 2300.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Homemaker Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>4300.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 48  
(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"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**COLEMAN MINNESOTA RECOUNT COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
Gordon M. Binder

Mailing Address 130 Delfern Drive

City State Zip Code  
**Los Angeles CA 90077**

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

Name of Employer Occupation  
Coastview Capital Venture Capitalist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **2300.00**

Date of Receipt  
MM / DD / YYYY  
**04 / 07 / 2009**

**Transaction ID: SA11AI.5453**

Amount of Each Receipt this Period  
**2300.00**

**B.** Full Name (Last, First, Middle Initial)  
David Blumberg

Mailing Address 953 Haight Street

City State Zip Code  
**San Francisco CA 94117**

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

Name of Employer Occupation  
Blumberg Capital Venture Capitalist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
MM / DD / YYYY  
**06 / 08 / 2009**

**Transaction ID: SA11AI.5782**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
John F. Brock

Mailing Address 781 Crandon Boulevard  
Number 604

City State Zip Code  
**Key Biscayne FL 33149**

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

Name of Employer Occupation  
Coca-Cola Enterprises Chief Executive Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt  
MM / DD / YYYY  
**05 / 12 / 2009**

**Transaction ID: SA11AI.5721**

Amount of Each Receipt this Period  
**1000.00**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3800.00**

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 48  
(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"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**COLEMAN MINNESOTA RECOUNT COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) Henry Buhl		Date of Receipt MM / DD / YYYY 05 / 12 / 2009
Mailing Address 114 Greene Street 5th Floor		<b>Transaction ID:</b> SA11AI.5714
City New York	State NY	Zip Code 10012
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000.00
Name of Employer Association of Comm. Programs	Occupation Social Worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4000.00	

**B.**

Full Name (Last, First, Middle Initial) Charles P. Carey		Date of Receipt MM / DD / YYYY 05 / 12 / 2009
Mailing Address 604 52nd Place		<b>Transaction ID:</b> SA11AI.5683
City Western Springs	State IL	Zip Code 60558
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Chicago Board of Trade	Occupation Chairman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

**C.**

Full Name (Last, First, Middle Initial) Daniel J. Casey		Date of Receipt MM / DD / YYYY 04 / 30 / 2009
Mailing Address 1439 Ellsmere Avenue		<b>Transaction ID:</b> SA11AI.5610
City Los Angeles	State CA	Zip Code 90019
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>4000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 48		
	<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

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NAME OF COMMITTEE (In Full)  
COLEMAN MINNESOTA RECOUNT COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) Justin Chang	Date of Receipt MM / DD / YYYY 04 / 06 / 2009
	Mailing Address 243 South Mapleton Drive	<b>Transaction ID:</b> SA11AI.5589
	City State Zip Code Los Angeles CA 90024	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	MEMO: JTC HOLDINGS LLC
	Name of Employer Occupation JTC Holdings LLC President	<b>[MEMO ITEM]</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mark Davis	Date of Receipt MM / DD / YYYY 04 / 20 / 2009
	Mailing Address PO Box 558 37045 Highway 169N	<b>Transaction ID:</b> SA11AI.5550
	City State Zip Code St. Peter MN 56082	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Davisco Foods International Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Allen Dickson	Date of Receipt MM / DD / YYYY 04 / 30 / 2009
	Mailing Address PO Box 5845	<b>Transaction ID:</b> SA11AI.5616
	City State Zip Code Shreveport LA 71135	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Retired Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	7000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 48  
(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"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
COLEMAN MINNESOTA RECOUNT COMMITTEE

**A.**

Full Name (Last, First, Middle Initial) Harold E. Dittmer		Date of Receipt MM / DD / YYYY 06 / 08 / 2009
Mailing Address 650 Beruit Drive Suite C		Transaction ID: SA11AI.5809
City Sacramento	State CA	Zip Code 95814
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Wellhead Electric Company	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

**B.**

Full Name (Last, First, Middle Initial) James L. Easton		Date of Receipt MM / DD / YYYY 04 / 20 / 2009
Mailing Address 15141 Mulholland Drive		Transaction ID: SA11AI.5557
City Los Angeles	State CA	Zip Code 90077
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10000.00
Name of Employer Jas D. Easton, Inc.	Occupation Chief Executive Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

**C.**

Full Name (Last, First, Middle Initial) Phyllis F. Easton		Date of Receipt MM / DD / YYYY 04 / 20 / 2009
Mailing Address 15141 Mulholland Drive		Transaction ID: SA11AI.5559
City Los Angeles	State CA	Zip Code 90077
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10000.00
Name of Employer Self-Employed	Occupation Designer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	20250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 48
	<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	

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NAME OF COMMITTEE (In Full)  
COLEMAN MINNESOTA RECOUNT COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) Kenneth Eldred	Date of Receipt MM / DD / YYYY 04 / 13 / 2009
	Mailing Address 4300 El Camino Real Suite 210	<b>Transaction ID:</b> SA11AI.5517
	City State Zip Code Los Altos CA 94022	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Living Stones Foundation Chairman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Judy Enfield	Date of Receipt MM / DD / YYYY 04 / 07 / 2009
	Mailing Address 4227 Nancy Place	<b>Transaction ID:</b> SA11AI.5449
	City State Zip Code Saint Paul MN 55126	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation AgriBank Systems Analyst	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) George H. Field	Date of Receipt MM / DD / YYYY 05 / 12 / 2009
	Mailing Address 14186 Devils Three Jump Road	<b>Transaction ID:</b> SA11AI.5660
	City State Zip Code Milford VA 22514	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Self-Employed Real Estate Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 13 / 48
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
COLEMAN MINNESOTA RECOUNT COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) Selma Fisch		Date of Receipt
	Mailing Address 421 South Beverly Drive 5th Floor		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 5 / 1 2 / 2 0 0 9
	City	State	Zip Code
	Beverly Hills	CA	90212
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.5719
Name of Employer Fisch Properties		Occupation Owner	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 1000.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Donald Fisher		Date of Receipt
	Mailing Address One Maritime Plaza Suite 1400		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 6 / 1 6 / 2 0 0 9
	City	State	Zip Code
	San Francisco	CA	94111
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.5856
Name of Employer Gap, Inc.		Occupation Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 10000.00

<b>C.</b>	Full Name (Last, First, Middle Initial) William H. Gaik		Date of Receipt
	Mailing Address 775 Yates Circle		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 4 / 3 0 / 2 0 0 9
	City	State	Zip Code
	Clarkesville	GA	30523
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.5618
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 11500.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 14 / 48
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
COLEMAN MINNESOTA RECOUNT COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) John W. Galbraith		Date of Receipt
	Mailing Address 500 Crestwood Drive Unit 1604		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 5 / 1 2 / 2 0 0 9
	City	State	Zip Code
	Charlottesville	VA	22903
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.5679
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 2500.00

<b>B.</b>	Full Name (Last, First, Middle Initial) W.A. Fred Gassaway, Jr.		Date of Receipt
	Mailing Address 101-B North Main Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 5 / 1 9 / 2 0 0 9
	City	State	Zip Code
	Hinesville	GA	31313
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.5733
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 1000.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Robert R. Goodman		Date of Receipt
	Mailing Address 473 Winthrop Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 4 / 1 3 / 2 0 0 9
	City	State	Zip Code
	Teaneck	NJ	07666
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.5848
Name of Employer Columbia University		Occupation Neurosurgeon	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 1000.00

Earmark: NORPAC

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 3500.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 48
	<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	

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NAME OF COMMITTEE (In Full)  
COLEMAN MINNESOTA RECOUNT COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) Martin D. Gruss	Date of Receipt MM / DD / YYYY 04 / 20 / 2009
	Mailing Address 667 Madison Avenue 2nd Floor	<b>Transaction ID:</b> SA11AI.5542
	City State Zip Code New York NY 10065	Amount of Each Receipt this Period 12300.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Gruss & Company, Inc. Occupation Senior Partner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 12300.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) William L. Heinz	Date of Receipt MM / DD / YYYY 05 / 04 / 2009
	Mailing Address 9285 Riverclub Parkway	<b>Transaction ID:</b> SA11AI.5576
	City State Zip Code John's Creek GA 30097	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Heinz & Associates, Inc. Occupation Chartered Financial Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Al G. Hill, Jr.	Date of Receipt MM / DD / YYYY 05 / 12 / 2009
	Mailing Address 1601 Elm Street Suite 5000	<b>Transaction ID:</b> SA11AI.5696
	City State Zip Code Dallas TX 75201	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Self-Employed Occupation Investor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	14300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 48
	<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	

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NAME OF COMMITTEE (In Full)  
**COLEMAN MINNESOTA RECOUNT COMMITTEE**

<b>A.</b>	Full Name (Last, First, Middle Initial) Frederick E. Hitchcock, Jr.	Date of Receipt MM / DD / YYYY 06 / 08 / 2009
	Mailing Address PO Box 8610	<b>Transaction ID:</b> SA11AI.5807
	City State Zip Code City of Industry CA 91748	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Hitchcock Automotive Resources Occupation Automotive Dealer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Ann L. Johnson	Date of Receipt MM / DD / YYYY 04 / 30 / 2009
	Mailing Address 565 Remillard Drive	<b>Transaction ID:</b> SA11AI.5593
	City State Zip Code Hillsborough CA 94010	Amount of Each Receipt this Period 10000.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 10000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Charles B. Johnson	Date of Receipt MM / DD / YYYY 04 / 30 / 2009
	Mailing Address 565 Remillard Drive	<b>Transaction ID:</b> SA11AI.5595
	City State Zip Code Hillsborough CA 94010	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Franklin Resources, Inc. Occupation Chairman Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 10000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>16000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 48  
(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"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
COLEMAN MINNESOTA RECOUNT COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
Joe S. Johnson

Mailing Address PO Box 501

City State Zip Code  
Talbotton GA 31827

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2009

Transaction ID: SA11AI.5749

Amount of Each Receipt this Period  
500.00

**B.**

Full Name (Last, First, Middle Initial)  
JTC Holdings LLC

Mailing Address 243 Mapleton Drive

City State Zip Code  
Los Angeles CA 90024

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
04 / 06 / 2009

Transaction ID: SA11AI.5586

Amount of Each Receipt this Period  
2000.00

SEE MEMO ITEM: VERIFIED SOLE PROPRIETOR

**C.**

Full Name (Last, First, Middle Initial)  
Joseph S. Keely

Mailing Address 1011 Winding Way

City State Zip Code  
Baltimore MD 21210

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 12 / 2009

Transaction ID: SA11AI.5694

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3500.00**

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

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

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

FOR LINE NUMBER: PAGE 18 / 48  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
COLEMAN MINNESOTA RECOUNT COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Stiles A. Kellett, Jr.  
 Mailing Address 200 Galleria Parkway  
Suite 1800  
 City Atlanta State GA Zip Code 30339  
 Date of Receipt 04 / 30 / 2009  
**Transaction ID:** SA11AI.5624  
 Amount of Each Receipt this Period 1000.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Kellet Investment Corpora-tion Occupation Chairman  
 Receipt For:  Primary  General Aggregate Year-to-Date 1000.00  
 Other (specify) ▼

**B.** Full Name (Last, First, Middle Initial)  
Richard M. Kleberg, III  
 Mailing Address PO Box 17777  
 City San Antonio State TX Zip Code 78217  
 Date of Receipt 06 / 08 / 2009  
**Transaction ID:** SA11AI.5776  
 Amount of Each Receipt this Period 1000.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer SFD Enterprises, LLC Occupation President  
 Receipt For:  Primary  General Aggregate Year-to-Date 1000.00  
 Other (specify) ▼

**C.** Full Name (Last, First, Middle Initial)  
Laurence LeJeune  
 Mailing Address 2820 County Road 24  
 City Long Lake State MN Zip Code 55356  
 Date of Receipt 04 / 07 / 2009  
**Transaction ID:** SA11AI.5451  
 Amount of Each Receipt this Period 500.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer LeJeune Investments Occupation Chairman  
 Receipt For:  Primary  General Aggregate Year-to-Date 500.00  
 Other (specify) ▼

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2500.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 48  
(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"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
COLEMAN MINNESOTA RECOUNT COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Edward C. Levy, Jr.

Mailing Address 711 South Bates Street

City Birmingham State MI Zip Code 48009

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

Name of Employer Edward C. Levy Company Occupation Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2300.00

Date of Receipt 05 / 12 / 2009

Transaction ID: SA11AI.5664

Amount of Each Receipt this Period 2300.00

**B.** Full Name (Last, First, Middle Initial)  
Kimberly R. Lister

Mailing Address 2388 Forest Drive

City Lake Spring State GA Zip Code 30636

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 19 / 2009

Transaction ID: SA11AI.5741

Amount of Each Receipt this Period 500.00

**C.** Full Name (Last, First, Middle Initial)  
Steven E. Lister

Mailing Address 2388 Forest Drive

City Lake Spring State GA Zip Code 30636

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

Name of Employer Self-Employed Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 19 / 2009

Transaction ID: SA11AI.5743

Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 3300.00

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

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

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

FOR LINE NUMBER: PAGE 20 / 48  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**COLEMAN MINNESOTA RECOUNT COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
 Frank W. Lynch  
 Mailing Address 2015 Bayadere Terrace  
 City State Zip Code  
 Corona Del Mar CA 92625  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 0 8 / 2 0 0 9  
**Transaction ID:** SA11AI.5766  
 Amount of Each Receipt this Period  
 2500.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Retired Retired  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 2500.00

**B.** Full Name (Last, First, Middle Initial)  
 Michael A. Malcolm  
 Mailing Address PO Box 7667  
 City State Zip Code  
 Aspen CO 81612  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 0 8 / 2 0 0 9  
**Transaction ID:** SA11AI.5805  
 Amount of Each Receipt this Period  
 1000.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Kaleidoscope, Inc. Executive  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1000.00

**C.** Full Name (Last, First, Middle Initial)  
 Duncan L. Matteson  
 Mailing Address 1205 Trinity Drive  
 City State Zip Code  
 Menlo Park CA 94025  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 2 / 2 0 0 9  
**Transaction ID:** SA11AI.5675  
 Amount of Each Receipt this Period  
 500.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 The Matteson Companies Chairman  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4000.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 48  
(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"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)  
COLEMAN MINNESOTA RECOUNT COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
Thomas L. McGrath

Mailing Address 2150 Jefferson Lane

City State Zip Code  
Huntingdon Valley PA 19006

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

Name of Employer Self-Employed Occupation Entrepreneur

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
MM / DD / YYYY  
05 / 12 / 2009

**Transaction ID:** SA11AI.5685

Amount of Each Receipt this Period  
2500.00

**B.**

Full Name (Last, First, Middle Initial)  
Tyson McLane

Mailing Address 608 Ricks Street

City State Zip Code  
Lake Park GA 31636

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

Name of Employer Carson McLane, Inc. Occupation Chief Executive Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2009

**Transaction ID:** SA11AI.5731

Amount of Each Receipt this Period  
250.00

**C.**

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

Mailing Address Reliant Stadium  
Two Reliant Park

City State Zip Code  
Houston TX 77054

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

Name of Employer The Houston Texans Occupation Chief Executive Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 12 / 2009

**Transaction ID:** SA11AI.5698

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3750.00**

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

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

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

FOR LINE NUMBER: PAGE 22 / 48  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
COLEMAN MINNESOTA RECOUNT COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Aaron McWhorter

Mailing Address 1487 Black Dirt Road

City Whitesburg State GA Zip Code 30185

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

Name of Employer Self-Employed Occupation Farmer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 19 / 2009

Transaction ID: SA11AI.5729

Amount of Each Receipt this Period 250.00

**B.** Full Name (Last, First, Middle Initial)  
John C. Morley

Mailing Address 13485 North Park Boulevard

City Cleveland Heights State OH Zip Code 44118

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 19 / 2009

Transaction ID: SA11AI.5727

Amount of Each Receipt this Period 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Les Nielsen

Mailing Address 1135 Oakview Lane

City Plymouth State MN Zip Code 55441

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

Name of Employer Herc-U-Lift Occupation Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 07 / 2009

Transaction ID: SA11AI.5482

Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2250.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 48  
(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"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
COLEMAN MINNESOTA RECOUNT COMMITTEE

**A.**

Full Name (Last, First, Middle Initial) Jon Nix		Date of Receipt MM / DD / YYYY 04 / 30 / 2009
Mailing Address 3127 Keller Bend Road		<b>Transaction ID:</b> SA11AI.5628
City Knoxville	State TN	
Zip Code 37922		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		
Name of Employer Xinergy Corporations	Occupation Chief Executive Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

**B.**

Full Name (Last, First, Middle Initial) George R. Osborne, Jr.		Date of Receipt MM / DD / YYYY 05 / 12 / 2009
Mailing Address PO Box 97010		<b>Transaction ID:</b> SA11AI.5656
City Kirkland	State WA	
Zip Code 98083		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		
Name of Employer Osborne Construction Company	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

**C.**

Full Name (Last, First, Middle Initial) Duane L. Ottenstroer		Date of Receipt MM / DD / YYYY 04 / 30 / 2009
Mailing Address 10739 Deerwood Park Boulevard Suite 103		<b>Transaction ID:</b> SA11AI.5596
City Jacksonville	State FL	
Zip Code 32256		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		
Name of Employer Self-Employed	Occupation Investor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2500.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 48
	<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	

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NAME OF COMMITTEE (In Full)  
COLEMAN MINNESOTA RECOUNT COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) Clay K. Perkins	Date of Receipt MM / DD / YYYY 06 / 08 / 2009
	Mailing Address PO Box 675696	<b>Transaction ID:</b> SA11AI.5762
	City State Zip Code Rancho Santa Fe CA 92067	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Bob J. Perry	Date of Receipt MM / DD / YYYY 04 / 30 / 2009
	Mailing Address PO Box 34153	<b>Transaction ID:</b> SA11AI.5600
	City State Zip Code Houston TX 77234	Amount of Each Receipt this Period 12300.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Perry Homes	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 12300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Doylene Perry	Date of Receipt MM / DD / YYYY 04 / 30 / 2009
	Mailing Address 18630 Barbuda	<b>Transaction ID:</b> SA11AI.5598
	City State Zip Code Houston TX 77058	Amount of Each Receipt this Period 12300.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 12300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	26600.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 48  
(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"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
COLEMAN MINNESOTA RECOUNT COMMITTEE

**A.**

Full Name (Last, First, Middle Initial) R. Dale Phelon		Date of Receipt MM / DD / YYYY 04 / 30 / 2009
Mailing Address 2063 University Parkway		<b>Transaction ID:</b> SA11AI.5632
City Aiken	State SC	Zip Code 29801
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Self-Employed	Occupation Manufacturer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

**B.**

Full Name (Last, First, Middle Initial) David G. Price		Date of Receipt MM / DD / YYYY 04 / 13 / 2009
Mailing Address 2425 Olympic Boulevard Suite 650 East		<b>Transaction ID:</b> SA11AI.5515
City Santa Monica	State CA	Zip Code 90404
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer American Airports Corpora- tion	Occupation Chairman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

**C.**

Full Name (Last, First, Middle Initial) Andrew F. Puzder		Date of Receipt MM / DD / YYYY 06 / 08 / 2009
Mailing Address 570 Meadow Wood Lane		<b>Transaction ID:</b> SA11AI.5772
City Montecito	State CA	Zip Code 93108
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer CKE Restaurants, Inc.	Occupation Chief Executive Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	3000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 48  
(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"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)  
COLEMAN MINNESOTA RECOUNT COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
Darwin R. Reedy

Mailing Address 51 Peninsula Road

City State Zip Code  
Dellwood MN 55110

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

Name of Employer Self-Employed Occupation  
Self-Employed Art Dealer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2009

Transaction ID: SA11AI.5650

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
Duane R. Roberts

Mailing Address 4100 Newport Place  
Suite 400

City State Zip Code  
Newport Beach CA 92660

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

Name of Employer Entrepreneurial Corp. Group Occupation  
Entrepreneurial Corp. Group Chief Executive Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt  
MM / DD / YYYY  
04 / 20 / 2009

Transaction ID: SA11AI.5561

Amount of Each Receipt this Period  
10000.00

**C.**

Full Name (Last, First, Middle Initial)  
Mrs. W. A. Roquemore

Mailing Address PO Box 217

City State Zip Code  
Lakeland GA 31635

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

Name of Employer Retired Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2009

Transaction ID: SA11AI.5634

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 10550.00

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

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

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

FOR LINE NUMBER: PAGE 27 / 48  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
COLEMAN MINNESOTA RECOUNT COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
David Rosenberg

Mailing Address 10625 Techwoods Circle

City State Zip Code  
Cincinnati OH 45242

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

Name of Employer Occupation  
Unifund Business Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
04 / 20 / 2009

**Transaction ID:** SA11AI.5563

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Stanford Z. Rothschild, Jr.

Mailing Address 1122 Kenilworth Drive  
Unit 317

City State Zip Code  
Towson MD 21204

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

Name of Employer Occupation  
Rothschild Capital Management Chairman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 12 / 2009

**Transaction ID:** SA11AI.5662

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Deen Day Sanders

Mailing Address 4725 Peachtree Corners Circle

City State Zip Code  
Norcross GA 30092

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

Name of Employer Occupation  
Self-Employed Investor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2009

**Transaction ID:** SA11AI.5735

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **6500.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 48  
(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"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)  
COLEMAN MINNESOTA RECOUNT COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) Stanley Scher		Date of Receipt MM / DD / YYYY 04 / 13 / 2009		
	Mailing Address 3333 Henry Hudson Parkway Apartment 20J		<b>Transaction ID:</b> SA11AI.5847		
	City Riverdale	State NY	Zip Code 10463	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C		Earmark: NORPAC		
	Name of Employer Retired		Occupation Retired		<b>[MEMO ITEM]</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 25.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Louis Shirley		Date of Receipt MM / DD / YYYY 04 / 30 / 2009		
	Mailing Address 1359 Central Avenue		<b>Transaction ID:</b> SA11AI.5638		
	City East Point	State GA	Zip Code 30344	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Newell Recycling, LLC		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) L. H. Simkins		Date of Receipt MM / DD / YYYY 05 / 19 / 2009		
	Mailing Address 103 Macartan Street		<b>Transaction ID:</b> SA11AI.5725		
	City Augusta	State GA	Zip Code 30901	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Simkins Card Company		Occupation Broker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	750.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 48  
(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"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
COLEMAN MINNESOTA RECOUNT COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
Marine I. Slayton

Mailing Address 5300 Hamilton Place

City State Zip Code  
Dulles VA 20189

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 12 / 2009

Transaction ID: SA11AI.5711

Amount of Each Receipt this Period  
1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Marc I. Stern

Mailing Address 23700 Malibu Colony Road

City State Zip Code  
Malibu CA 90265

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

Name of Employer Occupation  
The TCW Group, Inc. Vice Chairman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
06 / 08 / 2009

Transaction ID: SA11AI.5801

Amount of Each Receipt this Period  
5000.00

**C.**

Full Name (Last, First, Middle Initial)  
William J. Stoddard

Mailing Address 713 SE MacArthur Boulevard

City State Zip Code  
Stuart FL 34996

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

Name of Employer Occupation  
Self-Employed Developer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
04 / 07 / 2009

Transaction ID: SA11AI.5463

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **7000.00**

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

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

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

FOR LINE NUMBER: PAGE 30 / 48  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
COLEMAN MINNESOTA RECOUNT COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Charles Strauch  
Mailing Address 1681 Kettering  
City Irvine State CA Zip Code 92614  
FEC ID number of contributing federal political committee. **C**  
Name of Employer GA Services, LLC Occupation Owner  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2000.00  
Date of Receipt 06 / 12 / 2009  
Transaction ID: SA11AI.5859  
Amount of Each Receipt this Period 2000.00

**B.** Full Name (Last, First, Middle Initial)  
Rosemary Strickland  
Mailing Address 105 River Way  
City Brunswick State GA Zip Code 31520  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt 05 / 12 / 2009  
Transaction ID: SA11AI.5687  
Amount of Each Receipt this Period 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Robert Taylor  
Mailing Address 531 Golfway Drive  
City Fort Wayne State IN Zip Code 46814  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Do It Best Corporation Occupation Chief Executive Officer  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00  
Date of Receipt 05 / 12 / 2009  
Transaction ID: SA11AI.5700  
Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3250.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 31 / 48

(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"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
COLEMAN MINNESOTA RECOUNT COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
David R. Tyndall

Mailing Address 15 Cherokee Road

City State Zip Code  
Moultrie GA 31768

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

Name of Employer Gateway Development Services  
Occupation Real Estate Developer

Receipt For:  Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 2 / 2 0 0 9

Transaction ID: SA11AI.5692

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Robert J. Walker

Mailing Address 206 Wellington Drive

City State Zip Code  
Dublin GA 31021

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

Name of Employer Self-Employed  
Occupation Warehouse Owner

Receipt For:  Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 4 / 2 0 0 9

Transaction ID: SA11AI.5578

Amount of Each Receipt this Period

1000.00

**C.**

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

Mailing Address 700 Mill Creek Road

City State Zip Code  
Galdwyne PA 19035

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

Name of Employer Express Marine, Inc.  
Occupation President

Receipt For:  Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 2 / 2 0 0 9

Transaction ID: SA11AI.5715

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

2250.00

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

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

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

FOR LINE NUMBER: PAGE 32 / 48  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
COLEMAN MINNESOTA RECOUNT COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Robert S. Weiner  
 Mailing Address PO Box 2399  
 City State Zip Code  
 Dalton GA 30722  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 2 / 2 0 0 9  
**Transaction ID:** SA11AI.5717  
 Amount of Each Receipt this Period  
 1000.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Constantine Carpet Chief Executive Officer  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Stephen G. Wenzel  
 Mailing Address PO Box 285  
 City State Zip Code  
 Little Falls MN 56345  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 1 3 / 2 0 0 9  
**Transaction ID:** SA11AI.5512  
 Amount of Each Receipt this Period  
 500.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Central Lakes College Educator  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

**C.** Full Name (Last, First, Middle Initial)  
Kurt C. Wheeler  
 Mailing Address 25487 Adobe Lane  
 City State Zip Code  
 Los Altos Hills CA 94022  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 0 8 / 2 0 0 9  
**Transaction ID:** SA11AI.5765  
 Amount of Each Receipt this Period  
 1000.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Clarus Ventures Venture Capitalist  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2500.00  
**TOTAL** This Period (last page this line number only) ..... ►



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

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

FOR LINE NUMBER: PAGE 33 / 48  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
COLEMAN MINNESOTA RECOUNT COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Thomas W. Wheeler

Mailing Address PO Box 957209

City State Zip Code  
Duluth GA 30095

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

Name of Employer Wheeler/KOLB Management Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 05 / 19 / 2009  
Transaction ID: SA11AI.5745  
Amount of Each Receipt this Period: 250.00

**B.** Full Name (Last, First, Middle Initial)  
John C. Whitehead

Mailing Address 55 East 55th Street

City State Zip Code  
New York NY 10022

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 04 / 30 / 2009  
Transaction ID: SA11AI.5602  
Amount of Each Receipt this Period: 5000.00

**C.** Full Name (Last, First, Middle Initial)  
James B. Williams

Mailing Address 3836 Northside Drive

City State Zip Code  
Atlanta GA 30305

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 04 / 30 / 2009  
Transaction ID: SA11AI.5644  
Amount of Each Receipt this Period: 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 6250.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 48  
(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"/> 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)  
COLEMAN MINNESOTA RECOUNT COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
James M. Williams, Jr.  
Mailing Address 1300 Highway 84

City State Zip Code  
Grayson GA 30017

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: MM / DD / YYYY  
05 / 12 / 2009

Transaction ID: SA11AI.5673

Amount of Each Receipt this Period: 500.00

**B.** Full Name (Last, First, Middle Initial)  
Virgil R. Williams  
Mailing Address 1000 Crescent River Pass

City State Zip Code  
Suwanee GA 30024

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: MM / DD / YYYY  
05 / 12 / 2009

Transaction ID: SA11AI.5670

Amount of Each Receipt this Period: 500.00

**C.** Full Name (Last, First, Middle Initial)  
Monroe J. Wingate  
Mailing Address 23602 North 84th Place

City State Zip Code  
Scottsdale AZ 85255

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: MM / DD / YYYY  
06 / 08 / 2009

Transaction ID: SA11AI.5803

Amount of Each Receipt this Period: 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2000.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 48

(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"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
COLEMAN MINNESOTA RECOUNT COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
Robert E. Yellin

Mailing Address 4 Shoreline

City State Zip Code  
Newport Coast CA 92657

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 8 / 2 0 0 9

Transaction ID: SA11AI.5811

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Robert A. Yellowlees

Mailing Address 2696 Habersham Road

City State Zip Code  
Atlanta GA 30305

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: SA11AI.5646

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)  
Julian R. Youmans

Mailing Address 44124 Greenview Drive

City State Zip Code  
El Macero CA 95618

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

Name of Employer Self-Employed Occupation Physician

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 2 / 2 0 0 9

Transaction ID: SA11AI.5704

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶

2000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 36 / 48	
	(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)  
**COLEMAN MINNESOTA RECOUNT COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) Lowell R. Zitzloft		Date of Receipt																					
Mailing Address 319 Barry Avenue South Suite 301		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	7		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		0	7		2	0	0	9														
City Wayzata	State MN	Zip Code 55391	<b>Transaction ID:</b> SA11AI.5486																				
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00																					
Name of Employer LNR Properties	Occupation Chief Executive Officer																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	500.00
<b>TOTAL</b> This Period (last page this line number only) .....	184100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 48
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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	

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NAME OF COMMITTEE (In Full)  
COLEMAN MINNESOTA RECOUNT COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) NORPAC		Date of Receipt
	Mailing Address PO Box 5595		<input type="text" value="04"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Englewood	NJ	07631
	FEC ID number of contributing federal political committee.		Transaction ID: SA11C.5849
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For:		Aggregate Year-to-Date ▼	<input type="text" value="1025.00"/>
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="1025.00"/>	SEE EARMARKED ITEMS
<input type="checkbox"/> Other (specify) ▼			

<b>B.</b>	Full Name (Last, First, Middle Initial) Senate Majority Fund		Date of Receipt
	Mailing Address PO Box 32025		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Phoenix	AZ	85064
	FEC ID number of contributing federal political committee.		Transaction ID: SA11C.5570
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For:		Aggregate Year-to-Date ▼	<input type="text" value="5000.00"/>
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="5000.00"/>	
<input type="checkbox"/> Other (specify) ▼			

<b>C.</b>	Full Name (Last, First, Middle Initial) The Lincoln Club of Orange County Federal PAC		Date of Receipt
	Mailing Address 30151 Tomas		<input type="text" value="06"/> / <input type="text" value="08"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Rancho Margarita	CA	92688
	FEC ID number of contributing federal political committee.		Transaction ID: SA11C.5771
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For:		Aggregate Year-to-Date ▼	<input type="text" value="2500.00"/>
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="2500.00"/>	
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="8525.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="8525.00"/>

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

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NAME OF COMMITTEE (In Full)  
COLEMAN MINNESOTA RECOUNT COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) Bellwether Consulting Group, LLC <hr/> Mailing Address PO Box 1253 <hr/> City Oakland State FL Zip Code 34760 <hr/> Purpose of Disbursement Fundraising Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.5441 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 7 / 2 0 0 9 <hr/> <b>Amount of Each Disbursement this Period</b> 2980.37
<b>B.</b>	Full Name (Last, First, Middle Initial) Bellwether Consulting Group, LLC <hr/> Mailing Address PO Box 1253 <hr/> City Oakland State FL Zip Code 34760 <hr/> Purpose of Disbursement Fundraising Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.5582 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 9 <hr/> <b>Amount of Each Disbursement this Period</b> 556.28
<b>C.</b>	Full Name (Last, First, Middle Initial) Bellwether Consulting Group, LLC <hr/> Mailing Address PO Box 1253 <hr/> City Oakland State FL Zip Code 34760 <hr/> Purpose of Disbursement Voided: Fundraising Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.5760 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 9 <hr/> <b>Amount of Each Disbursement this Period</b> -4000.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>-463.35</b>
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
COLEMAN MINNESOTA RECOUNT COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) Bellwether Consulting Group, LLC  Mailing Address PO Box 1253  City Oakland State FL Zip Code 34760  Purpose of Disbursement Fundraising Consulting Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.5761 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 9	<b>Amount of Each Disbursement this Period</b> 4000.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Bryan Cave LLP  Mailing Address PO Box 503089  City St. Louis State MO Zip Code 63150  Purpose of Disbursement Legal Consulting Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.5538 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 9	<b>Amount of Each Disbursement this Period</b> 5546.40
<b>C.</b>	Full Name (Last, First, Middle Initial) Campaign Financial Services  Mailing Address 7315 Wisconsin Avenue Suite 310 East  City Bethesda State MD Zip Code 20814  Purpose of Disbursement E-Merchant Fee Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.5444 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 7 / 2 0 0 9	<b>Amount of Each Disbursement this Period</b> 180.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>9726.40</b>
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
COLEMAN MINNESOTA RECOUNT COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) Campaign Financial Services <hr/> Mailing Address 7315 Wisconsin Avenue Suite 310 East <hr/> City Bethesda State MD Zip Code 20814 <hr/> Purpose of Disbursement E-Merchant Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.5567 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 9	Amount of Each Disbursement this Period 81.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Campaign Financial Services <hr/> Mailing Address 7315 Wisconsin Avenue Suite 310 East <hr/> City Bethesda State MD Zip Code 20814 <hr/> Purpose of Disbursement Compliance Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.5565 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 9	Amount of Each Disbursement this Period 2117.68
<b>C.</b>	Full Name (Last, First, Middle Initial) Campaign Financial Services <hr/> Mailing Address 7315 Wisconsin Avenue Suite 310 East <hr/> City Bethesda State MD Zip Code 20814 <hr/> Purpose of Disbursement E-Merchant Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.5585 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 9	Amount of Each Disbursement this Period 227.25

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2425.93</b>
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
COLEMAN MINNESOTA RECOUNT COMMITTEE

A.	Full Name (Last, First, Middle Initial) Campaign Financial Services <hr/> Mailing Address 7315 Wisconsin Avenue Suite 310 East <hr/> City Bethesda State MD Zip Code 20814 <hr/> Purpose of Disbursement E-Merchant Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.5655 Date of Disbursement 05 / 13 / 2009 <hr/> Amount of Each Disbursement this Period 90.00
B.	Full Name (Last, First, Middle Initial) Campaign Financial Services <hr/> Mailing Address 7315 Wisconsin Avenue Suite 310 East <hr/> City Bethesda State MD Zip Code 20814 <hr/> Purpose of Disbursement E-Merchant Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.5756 Date of Disbursement 06 / 04 / 2009 <hr/> Amount of Each Disbursement this Period 282.83
C.	Full Name (Last, First, Middle Initial) Huckaby Davis Lisker <hr/> Mailing Address 228 South Washington Street Suite 115 <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement Compliance Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.5580 Date of Disbursement 05 / 08 / 2009 <hr/> Amount of Each Disbursement this Period 750.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1122.83
<b>TOTAL</b> 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)

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

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)  
COLEMAN MINNESOTA RECOUNT COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) McGill Consulting LLC</p> <p>Mailing Address 7643 South Bay Drive</p> <p>City Bloomington State MN Zip Code 55435</p> <p>Purpose of Disbursement Fundraising Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.5496</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5000.00"/></p> <p>Category/Type: <input type="text" value="003"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Rick Nelson</p> <p>Mailing Address 1975 Portland Avenue</p> <p>City Saint Paul State MN Zip Code 55104</p> <p>Purpose of Disbursement Fundraising Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.5439</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2500.00"/></p> <p>Category/Type: <input type="text" value="003"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Rick Nelson</p> <p>Mailing Address 1975 Portland Avenue</p> <p>City Saint Paul State MN Zip Code 55104</p> <p>Purpose of Disbursement Fundraising Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.5492</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2500.00"/></p> <p>Category/Type: <input type="text" value="003"/></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="10000.00"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text" value=""/></p>

# 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)

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

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NAME OF COMMITTEE (In Full)  
COLEMAN MINNESOTA RECOUNT COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) Pinnacle Direct, Inc.</p> <p>Mailing Address 15260 113th Street North</p> <p>City Stillwater State MN Zip Code 55082</p> <p>Purpose of Disbursement Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.5443</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2145.99"/></p> <p>Category/Type: <input type="text" value="003"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Laura Van Hove</p> <p>Mailing Address 2119 Paul Spring Road</p> <p>City Alexandria State VA Zip Code 22307</p> <p>Purpose of Disbursement Fundraising Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.5442</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="9932.66"/></p> <p>Category/Type: <input type="text" value="003"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Laura Van Hove</p> <p>Mailing Address 2119 Paul Spring Road</p> <p>City Alexandria State VA Zip Code 22307</p> <p>Purpose of Disbursement Fundraising Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.5583</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="4342.12"/></p> <p>Category/Type: <input type="text" value="003"/></p>

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

**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 44 / 48

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

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NAME OF COMMITTEE (In Full)  
COLEMAN MINNESOTA RECOUNT COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Laura Van Hove <hr/> Mailing Address 2119 Paul Spring Road <hr/> City Alexandria State VA Zip Code 22307 <hr/> Purpose of Disbursement Fundraising Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.5584 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 9
	Amount of Each Disbursement this Period 6206.14 <hr/> Category/Type 003
<b>B.</b> Full Name (Last, First, Middle Initial) Laura Van Hove <hr/> Mailing Address 2119 Paul Spring Road <hr/> City Alexandria State VA Zip Code 22307 <hr/> Purpose of Disbursement Fundraising Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.5755 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 9
	Amount of Each Disbursement this Period 3470.36 <hr/> Category/Type 003

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

9676.50

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

48909.08

# 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)

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

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NAME OF COMMITTEE (In Full)  
COLEMAN MINNESOTA RECOUNT COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) Coleman for Senate 08</p> <p>Mailing Address 680 Transfer Road Suite A</p> <p>City St Paul State MN Zip Code 55114</p> <p>Purpose of Disbursement Transfer of Net Proceeds</p> <p>Candidate Name Norm Coleman</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: MN District: 00</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB22.5497</p> <p>Date of Disbursement MM / DD / YYYY 04 / 14 / 2009</p> <p>Amount of Each Disbursement this Period 12844.55</p> <p>Category/Type 008</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Coleman for Senate 08</p> <p>Mailing Address 680 Transfer Road Suite A</p> <p>City St Paul State MN Zip Code 55114</p> <p>Purpose of Disbursement Transfer of Net Proceeds</p> <p>Candidate Name Norm Coleman</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: MN District: 00</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB22.5591</p> <p>Date of Disbursement MM / DD / YYYY 05 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 10953.41</p> <p>Category/Type 008</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Coleman for Senate 08</p> <p>Mailing Address 680 Transfer Road Suite A</p> <p>City St Paul State MN Zip Code 55114</p> <p>Purpose of Disbursement Transfer of Net Proceeds</p> <p>Candidate Name Norm Coleman</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: MN District: 00</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB22.5758</p> <p>Date of Disbursement MM / DD / YYYY 06 / 04 / 2009</p> <p>Amount of Each Disbursement this Period 43950.42</p> <p>Category/Type 008</p>

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

67748.38

**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)

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

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NAME OF COMMITTEE (In Full)  
COLEMAN MINNESOTA RECOUNT COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Republican Party of Minnesota <hr/> Mailing Address 525 Park Street Suite 250 <hr/> City St Paul State MN Zip Code 55103 <hr/> Purpose of Disbursement Transfer of Net Proceeds Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB22.5498 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 0 9
	Amount of Each Disbursement this Period 69080.01
	<input type="text" value="008"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Republican Party of Minnesota <hr/> Mailing Address 525 Park Street Suite 250 <hr/> City St Paul State MN Zip Code 55103 <hr/> Purpose of Disbursement Transfer of Net Proceeds Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB22.5592 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 9
	Amount of Each Disbursement this Period 42999.72
	<input type="text" value="008"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Republican Party of Minnesota <hr/> Mailing Address 525 Park Street Suite 250 <hr/> City St Paul State MN Zip Code 55103 <hr/> Purpose of Disbursement Transfer of Net Proceeds Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB22.5759 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 9
	Amount of Each Disbursement this Period 38821.39
	<input type="text" value="008"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<input type="text" value="150901.12"/>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<input type="text" value="218649.50"/>

**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)  
COLEMAN MINNESOTA RECOUNT COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Campaign Financial Services	Nature of Debt (Purpose): Compliance Consulting
Mailing Address 7315 Wisconsin Avenue Suite 310 East	
City State ZIP Code Bethesda MD 20814	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID: SD10.5816</b>	
Amount Incurred This Period 2000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2000.00

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Campaign Financial Services	Nature of Debt (Purpose): Compliance Consulting
Mailing Address 7315 Wisconsin Avenue Suite 310 East	
City State ZIP Code Bethesda MD 20814	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID: SD10.5817</b>	
Amount Incurred This Period 2037.04	Payment This Period 0.00	Outstanding Balance at Close of This Period 2037.04

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Laura Van Hove	Nature of Debt (Purpose): Fundraising Consulting
Mailing Address 2119 Paul Spring Road	
City State ZIP Code Alexandria VA 22307	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID: SD10.5825</b>	
Amount Incurred This Period 1996.48	Payment This Period 0.00	Outstanding Balance at Close of This Period 1996.48

1) <b>SUBTOTALS</b> This Period This Page (optional).....	<b>6033.52</b>
2) <b>TOTALS</b> This Period (last page this line number only).....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> 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)	PAGE 48 / 48
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
COLEMAN MINNESOTA RECOUNT COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Laura Van Hove			Nature of Debt (Purpose): Fundraising Consulting
Mailing Address 2119 Paul Spring Road			
City Alexandria	State VA	ZIP Code 22307	

Outstanding Balance Beginning This Period		<b>Transaction ID: SD10.5826</b>	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
1217.86	0.00	1217.86	

1) <b>SUBTOTALS</b> This Period This Page (optional).....	1217.86
2) <b>TOTALS</b> This Period (last page this line number only).....	7251.38
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	7251.38