

**FEC  
FORM 3X**

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

RECEIVED  
FEC MAIL CENTER  
2007 JUL 17 AM 9:16  
Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

7TH CONGRESSIONAL DISTRICT REPUBLICAN PARTY  
OF MINNESOTA

ADDRESS (number and street)

P.O. Box 471



Check if different than previously reported. (ACC)

MARSHALL

MN

56258

0471

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00380873

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



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



Termination Report (TER)

(b) Monthly Report Due On:



Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)



Nov 20 (M11) (Non-Election Year Only)



Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)



Dec 20 (M12) (Non-Election Year Only)



Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

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



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

MM / DD / YYYY

in the State of

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



General (30G)



Runoff (30R)



Special (30S)

Election on

MM / DD / YYYY

in the State of

5. Covering Period

MM / DD / YYYY through MM / DD / YYYY  
01 / 01 / 2007

through

MM / DD / YYYY  
06 / 30 / 2007

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

Type or Print Name of Treasurer DAVID E. STURROCK

Signature of Treasurer

*[Handwritten Signature]*

Date

MM / DD / YYYY  
07 / 10 / 2007

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

Office Use Only

FEC FORM 3X  
Rev. 12/2004

27039473736

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

7TH CD. REPUBLICAN PARTY OF MINNESOTA

Report Covering the Period: From: MM ' DD ' YYYY  
01 ' 01 ' 2007 To: MM ' DD ' YYYY  
06 ' 30 ' 2007

27039473737

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">YYYYYY 2007</span>		428.03
(b) Cash on Hand at Beginning of Reporting Period.....	428.03	
(c) Total Receipts (from Line 19) .....	9,323.26	9,323.26
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	9,751.29	9,751.29
7. Total Disbursements (from Line 31) .....	3,781.37	3,781.37
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	5,969.92	5,969.92
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....		

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

**For further information contact:**  
  
 Federal Election Commission  
 999 E Street, NW  
 Washington, DC 20463  
  
 Toll Free 800-424-9530  
 Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

774 C.D. REPUBLICAN PARTY OF MINNESOTA

Report Covering the Period: From: 

MM	DD	YYYY
01	01	2007

 To: 

MM	DD	YYYY
06	30	2007

**I. Receipts**

**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

11. Contributions (other than loans) From:

- (a) Individuals/Persons Other Than Political Committees
  - (i) Itemized (use Schedule A).....
  - (ii) Unitemized .....
  - (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

6,573.26
6,573.26
27,500.00

6,573.26
6,573.26
27,500.00

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

9,323.26
----------

9,323.26
----------

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

--

--

13. All Loans Received.....

--

--

14. Loan Repayments Received.....

--

--

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

--

--

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

--

--

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

--

--

18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3).....

--

--

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

--

--

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

--

--

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

9,323.26
----------

9,323.26
----------

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

9,323.26
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9,323.26
----------

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**DETAILED SUMMARY PAGE  
of Disbursements**

FEC Form 3X (Rev. 02/2003)

Page 4

**II. Disbursements**

**COLUMN A  
Total This Period**

**COLUMN B  
Calendar Year-to-Date**

21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures .....	3,781.37	3,781.37
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	3,781.37	3,781.37
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		
24. Independent Expenditures (use Schedule E) .....		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....		
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs).....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....		
29. Other Disbursements .....		
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds .....		
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	3,781.37	3,781.37
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3,781.37	3,781.37

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**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

**III. Net Contributions/Operating Expenditures**

**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

- 33. Total Contributions (other than loans)  
(from Line 11(d), page 3) .....
- 34. Total Contribution Refunds  
(from Line 28(d)) .....
- 35. Net Contributions (other than loans)  
(subtract Line 34 from Line 33) .....
- 36. Total Federal Operating Expenditures  
(add Line 21(a)(i) and Line 21(b)) .....
- 37. Offsets to Operating Expenditures  
(from Line 15, page 3) .....
- 38. Net Operating Expenditures  
(subtract Line 37 from Line 36) .....

9,323.26
9,323.26
3,781.37
5,541.89

9,323.26
9,323.26
3,781.37
5,541.89

27039473740

**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 / OF /	
	<input type="checkbox"/> 11a 13	<input checked="" type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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)  
**7TH C.D. REPUBLICAN PARTY OF MINNESOTA**

**A. REPUBLICAN PARTY OF MINNESOTA**

Full Name (Last, First, Middle Initial)  
**REPUBLICAN PARTY OF MINNESOTA**

Mailing Address  
**525 PARK ST, SUITE 250**

City **ST. PAUL** State **MN** Zip Code **55103**

FEC ID number of contributing federal political committee. **C00001313**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) **CONTRIBUTION**

Aggregate Year-to-Date **2500.00**

Date of Receipt  
**04 / 10 / 2007**

Amount of Each Receipt this Period  
**2500.00**

**B. REPUBLICAN PARTY OF MECKER COUNTY**

Full Name (Last, First, Middle Initial)  
**REPUBLICAN PARTY OF MECKER COUNTY**

Mailing Address  
**P.O. BOX 776**

City **LITCHFIELD** State **MN** Zip Code **55355**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) **CONTRIBUTION**

Aggregate Year-to-Date **250.00**

Date of Receipt  
**04 / 05 / 2007**

Amount of Each Receipt this Period  
**250.00**

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) **▼**

Aggregate Year-to-Date **▼**

Date of Receipt

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional) ..... **2750.00**

**TOTAL** This Period (last page this line number only) ..... **2750.00**

27039473741

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)						PAGE 1 OF 2
	<input checked="" type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b	

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NAME OF COMMITTEE (In Full)  
**7TH C.D. - REPUBLICAN PARTY OF MINNESOTA**

Full Name (Last, First, Middle Initial) <b>A. SYCKS, ELAINE</b>		Date of Disbursement MM / DD / YYYY <b>02 / 01 / 2007</b>
Mailing Address <b>P.O. BOX 95</b>		Amount of Each Disbursement this Period <b>427.00</b>
City <b>PARK RAPIDS</b>	State <b>MN</b>	
Zip Code <b>56470</b>		Category/ Type <b>003</b>
Purpose of Disbursement <b>FUNDRAISING EXPENSES</b>		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. SYCKS, ELAINE</b>		Date of Disbursement MM / DD / YYYY <b>03 / 04 / 2007</b>
Mailing Address <b>P.O. BOX 95</b>		Amount of Each Disbursement this Period <b>384.00</b>
City <b>PARK RAPIDS</b>	State <b>MN</b>	
Zip Code <b>56470</b>		Category/ Type <b>001</b>
Purpose of Disbursement <del>FUNDRAISING</del> <b>CONVENTION EXPENSES</b>		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>C. SYCKS, ELAINE</b>		Date of Disbursement MM / DD / YYYY <b>04 / 13 / 2007</b>
Mailing Address <b>P.O. BOX 95</b>		Amount of Each Disbursement this Period <b>147.68</b>
City <b>PARK RAPIDS</b>	State <b>MN</b>	
Zip Code <b>56470</b>		Category/ Type <b>001</b>
Purpose of Disbursement <b>CONVENTION EXPENSES</b>		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

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

27039473742

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 2 OF 2

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

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NAME OF COMMITTEE (In Full)

7TH C.D. REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial)

A. SYCKS, ELAINE

Date of Disbursement

04 / 13 / 2007

Mailing Address

P.O. Box 95

City

PARK RAPIDS

State

MN

Zip Code

56470

Purpose of Disbursement

MAILING

Candidate Name

001  
Category/  
Type

Amount of Each Disbursement this Period

20.00

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. G.C. LANES & BROADWAY BALLROOM

Date of Disbursement

04 / 14 / 2007

Mailing Address

115 30TH AVE. E.

City

ALEXANDRIA

State

MN

Zip Code

56308

Purpose of Disbursement

CONVENTION EXPENSES

Candidate Name

001  
Category/  
Type

Amount of Each Disbursement this Period

2,184.74

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

MM / DD / YYYY

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

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

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

3,163.42

27039473743



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

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked  
Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date  
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked



PREPARER

(3/2005)

7/17/01

DATE PREPARED

27039473744