

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Gerson for Congress

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	9084.03	14641.03
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	9084.03	14641.03
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	41913.85	86155.39
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	41913.85	86155.39
8. Cash on Hand at Close of Reporting Period (from Line 27).....	10624.36	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	129176.41	

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 3 (Revised 12/2003)

Write or Type Committee Name

Gerson for Congress

Report Covering the Period: From: / / To: / /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	8045.95	8995.95
(ii) Unitemized.....	312.28	764.28
(iii) TOTAL of contributions from individuals ▶	8358.23	9760.23
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	725.80	4880.80
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	9084.03	14641.03
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	38000.00	80610.45
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	38000.00	80610.45
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	47084.03	95251.48

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	41913.85	86155.39
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. 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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	41913.85	86155.39

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	5454.18
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	47084.03
25. SUBTOTAL (add Line 23 and Line 24).....	52538.21
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	41913.85
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	10624.36

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

A. Full Name (Last, First, Middle Initial)
Michael Amendolar

Mailing Address 1829 Bohmbach Dr

City State Zip Code
Red Wing MN 55066

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 29 2013

Transaction ID : SA11AI.5358

Amount of Each Receipt this Period
 100.00

B. Full Name (Last, First, Middle Initial)
Ramona Anderson

Mailing Address 4132 Stinson Blvd

City State Zip Code
Minneapolis MN 55421

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

Name of Employer Occupation
Jafra Cosmetics Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 23 2013

Transaction ID : SA11AI.5306

Amount of Each Receipt this Period
 20.14

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

Mailing Address 3442 Adair Ave N

City State Zip Code
Minneapolis MN 55422

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

Name of Employer Occupation
Allina Health RN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 31 2013

Transaction ID : SA11AI.5330

Amount of Each Receipt this Period
 25.00

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

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

145.14

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

A. Full Name (Last, First, Middle Initial)
Calvin Bahr

Mailing Address 3322 207th Lane NE

City Cedar State MN Zip Code 55011

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

Name of Employer Self Occupation Truck Driver

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
20.14

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : SA11AI.5313

Amount of Each Receipt this Period
20.14

B. Full Name (Last, First, Middle Initial)
Pat Barnum

Mailing Address 66 Langer Cir

City Saint Paul State MN Zip Code 55118

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
152.28

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 21 / 2013

Transaction ID : SA11AI.5357

Amount of Each Receipt this Period
100.00

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

Mailing Address 14131 Junkite St NW

City Anoka State MN Zip Code 55303

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

Name of Employer Apex Systems Occupation Computer Systems Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
25.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : SA11AI.5326

Amount of Each Receipt this Period
25.00

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

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

145.14

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

A. Full Name (Last, First, Middle Initial)
Andy Benedict

Mailing Address 2537 Brighton Ave. NE

City State Zip Code
Minneapolis MN 55418

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

Name of Employer Occupation
BMW of Minnetonka Business Development

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
20.14

Date of Receipt
M M / D D / Y Y Y Y
12 / 31 / 2013

Transaction ID : SA11AI.5305

Amount of Each Receipt this Period
20.14

B. Full Name (Last, First, Middle Initial)
Nathan Brening

Mailing Address 1921 165th St E

City State Zip Code
Shakopee MN 55379

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

Name of Employer Occupation
Thermo King

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
20.14

Date of Receipt
M M / D D / Y Y Y Y
12 / 29 / 2013

Transaction ID : SA11AI.5325

Amount of Each Receipt this Period
20.14

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

Mailing Address 4100 Sheriden Ave S

City State Zip Code
Minneapolis MN 55410

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

Name of Employer Occupation
Self Property Management

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
195.14

Date of Receipt
M M / D D / Y Y Y Y
12 / 25 / 2013

Transaction ID : SA11AI.5367

Amount of Each Receipt this Period
195.14

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

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

235.42

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

A. Full Name (Last, First, Middle Initial)
James Brunsgaard

Mailing Address 2133 Louis Ln

City State Zip Code
Hastings MN 55033

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 31 2013

Transaction ID : SA11AI.5316

Amount of Each Receipt this Period
 20.14

B. Full Name (Last, First, Middle Initial)
Nick Caron

Mailing Address 8043 Boulder Ridge Rd

City State Zip Code
Saint Paul MN 55125

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

Name of Employer Occupation
Thomson Reuters Web Designer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 21 2013

Transaction ID : SA11AI.5315

Amount of Each Receipt this Period
 20.14

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

Mailing Address 2264 East Lake Rd NE

City State Zip Code
Atlanta GA 30307-1838

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

Name of Employer Occupation
Meggitt Training Systems Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 27 2013

Transaction ID : SA11AI.5036

Amount of Each Receipt this Period
 500.00

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

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

540.28

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

A. Full Name (Last, First, Middle Initial)
Karen Craig

Mailing Address 220 Meadow Cir N.

City Burnsville State MN Zip Code 55337

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

Name of Employer Coldwell Banker Occupation Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
20.14

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 21 / 2013

Transaction ID : SA11AI.5308

Amount of Each Receipt this Period
20.14

B. Full Name (Last, First, Middle Initial)
Steven Demitrius

Mailing Address 13727 Fordham Ave

City Apple Valley State MN Zip Code 55124

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

Name of Employer N/A Occupation Student

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 26 / 2013

Transaction ID : SA11AI.5035

Amount of Each Receipt this Period
400.00

C. Full Name (Last, First, Middle Initial)
Charles Edwin Devaney

Mailing Address 16700 Pueblo Blvd

City Jordan State MN Zip Code 55352-9373

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 22 / 2013

Transaction ID : SA11AI.5037

Amount of Each Receipt this Period
500.00

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

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

920.14

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

Full Name (Last, First, Middle Initial) Richard Didde		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 30 / 2013
Mailing Address 2401 114th St		Transaction ID : SA11AI.5350
City Burnsville	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 97.31
Name of Employer NA	Occupation NA	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 97.31	

Full Name (Last, First, Middle Initial) Jake Duesenberg		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 20 / 2013
Mailing Address 2447 Lone Eagle Trail		Transaction ID : SA11AI.5321
City Saint Paul	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.14
Name of Employer JDuesenberg Financial	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 20.14	

Full Name (Last, First, Middle Initial) John Ellsworth		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2013
Mailing Address 13219 Zion St NW		Transaction ID : SA11AI.5314
City Minneapolis	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.14
Name of Employer IBM	Occupation Unix System Admin	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 20.14	

SUBTOTAL of Receipts This Page (optional).....	137.59
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

A. Full Name (Last, First, Middle Initial)
Melissa Enger

Mailing Address 4798 Partridge Ct NE

City State Zip Code
Prior Lake MN 55372

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

Name of Employer Occupation
Medela, Inc. Sales Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
50.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 28 / 2013

Transaction ID : SA11AI.5342

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Sally English

Mailing Address 47 Sunny Side Ln

City State Zip Code
Saint Paul MN 55118

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

Name of Employer Occupation
CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
50.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 31 / 2013

Transaction ID : SA11AI.5338

Amount of Each Receipt this Period
50.00

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

Mailing Address 7705 Jasmine Ave S

City State Zip Code
Cottage Grove MN 55016-2221

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 26 / 2013

Transaction ID : SA11AI.5361

Amount of Each Receipt this Period
100.00

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

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

200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

A. Full Name (Last, First, Middle Initial)
Matthew Erickson

Mailing Address 7705 Jasmine Ave S

City Cottage Grove State MN Zip Code 55016-2221

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 20 / 2013

Transaction ID : SA11AI.5320

Amount of Each Receipt this Period
 20.14

B. Full Name (Last, First, Middle Initial)
Emilio Fedeli

Mailing Address 1357 Lakeside Dr.

City Saint Paul State MN Zip Code 55123

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 29 / 2013

Transaction ID : SA11AI.5304

Amount of Each Receipt this Period
 20.00

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

Mailing Address 3225 Hillsboro Ave

City Minneapolis State MN Zip Code 55427

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

Name of Employer Occupation
 Carley Foundry Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : SA11AI.5349

Amount of Each Receipt this Period
 75.00

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

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

115.14

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 105	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Michael Gallagher		Date of Receipt M M / D D / Y Y Y Y Y 12 / 27 / 2013
Mailing Address 431 S 7th St		Transaction ID : SA11AI.5351
City Minneapolis	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Thompson Reuters	Occupation Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 100.00	

Full Name (Last, First, Middle Initial) B. Rod Garberson		Date of Receipt M M / D D / Y Y Y Y Y 12 / 31 / 2013
Mailing Address 12158 Jonquil St NW		Transaction ID : SA11AI.5328
City Minneapolis	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer UPS	Occupation Driver	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 25.00	

Full Name (Last, First, Middle Initial) C. Joey Gerdin		Date of Receipt M M / D D / Y Y Y Y Y 12 / 19 / 2013
Mailing Address 728 Summit Ave		Transaction ID : SA11AI.5317
City Saint Paul	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.14
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 20.14	

SUBTOTAL of Receipts This Page (optional).....	145.14
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

A. Full Name (Last, First, Middle Initial)
Russell Grant

Mailing Address 235 Lark Lane

City Seaboard State NC Zip Code 27876

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

Name of Employer Self Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 19 / 2013

Transaction ID : SA11AI.5348

Amount of Each Receipt this Period
 _____ 50.00

_____ 50.00

B. Full Name (Last, First, Middle Initial)
Jeff Gullickson

Mailing Address 13940 36th Ave. N

City Minneapolis State MN Zip Code 55447

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : SA11AI.5318

Amount of Each Receipt this Period
 _____ 20.14

_____ 20.14

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

Mailing Address 3070 Independence Rd

City Maple Plain State MN Zip Code 55359-9758

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

Name of Employer N/a Occupation Dental Hygienist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 27 / 2013

Transaction ID : SA11AI.5039

Amount of Each Receipt this Period
 _____ 250.00

_____ 250.00

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

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

_____ 320.14

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Dan Gustofson		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 26 / 2013
Mailing Address 753 Meadowlark Drive		Transaction ID : SA11AI.5362
City Delano	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Self	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 100.00	

Full Name (Last, First, Middle Initial) B. Clifford Hanson		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 07 / 2013
Mailing Address 6615 357th Street Way		Transaction ID : SA11AI.5359
City Cannon Falls	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 100.00	

Full Name (Last, First, Middle Initial) C. Clifford Hanson		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 29 / 2013
Mailing Address 6615 357th Street Way		Transaction ID : SA11AI.5344
City Cannon Falls	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 150.00	

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Gerson for Congress

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

Mailing Address 12 Acorn Drive

City Auburndale State MA Zip Code 02466

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 30 / 2013

Transaction ID : SA11AI.5366

Amount of Each Receipt this Period
 100.00

B. Full Name (Last, First, Middle Initial)
Mary Hollenkamp

Mailing Address 240 5th Ave S

City So St Paul State MN Zip Code 55075

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

Name of Employer Occupation
Homemaker NA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 27 / 2013

Transaction ID : SA11AI.5038

Amount of Each Receipt this Period
 100.00

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

Mailing Address 240 5th Ave S

City So St Paul State MN Zip Code 55075

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

Name of Employer Occupation
Homemaker NA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 21 / 2013

Transaction ID : SA11AI.5041

Amount of Each Receipt this Period
 20.14

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

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

220.14

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Gerson for Congress

A. Full Name (Last, First, Middle Initial)
Mary Hollenkamp

Mailing Address 240 5th Ave S

City State Zip Code
So St Paul MN 55075

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

Name of Employer Occupation
Homemaker NA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
440.28

Date of Receipt
 M M / D D / Y Y Y Y
 12 31 2013

Transaction ID : SA11AI.5034

Amount of Each Receipt this Period
20.14

B. Full Name (Last, First, Middle Initial)
Thomas Jestus

Mailing Address 2444 77th St E

City State Zip Code
Inver Grove Heights MN 55076

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 06 2013

Transaction ID : SA11AI.5360

Amount of Each Receipt this Period
100.00

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

Mailing Address 26190 270th St

City State Zip Code
Wabasso MN 56293

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

Name of Employer Occupation
Development Resource Group Drafter

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
25.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 23 2013

Transaction ID : SA11AI.5327

Amount of Each Receipt this Period
25.00

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

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

145.14

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Gerson for Congress

A. Full Name (Last, First, Middle Initial)
Deborah Johnson

Mailing Address 15116 Derby Cir

City Rosemount State MN Zip Code 55068

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 22 / 2013

Transaction ID : SA11AI.5332

Amount of Each Receipt this Period
 25.00

B. Full Name (Last, First, Middle Initial)
Glenn Kaiser

Mailing Address 11174 Nassau Cir NE

City Minneapolis State MN Zip Code 55449

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 31 / 2013

Transaction ID : SA11AI.5309

Amount of Each Receipt this Period
 20.14

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

Mailing Address 4524 County Rd. 8 SW

City Waverly State MN Zip Code 55390

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

Name of Employer Occupation
Self

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 31 / 2013

Transaction ID : SA11AI.5322

Amount of Each Receipt this Period
 20.14

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

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

65.28

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

A. Full Name (Last, First, Middle Initial)
Brett Kaufhold

Mailing Address 13710 Zarthan Ave S.

City State Zip Code
Savage MN 55378

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 21 / 2013

Transaction ID : SA11AI.5312

Amount of Each Receipt this Period
 20.14

B. Full Name (Last, First, Middle Initial)
Ni Hee Kim

Mailing Address 13935 Aquila Ave

City State Zip Code
Savage MN 55378-2154

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

Name of Employer Occupation
Target Administration

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 01 / 2013

Transaction ID : SA11AI.5033

Amount of Each Receipt this Period
 2600.00

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

Mailing Address 2118 Pioneer Rd

City State Zip Code
Red Wing MN 55066

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

Name of Employer Occupation
Westinghouse

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 25 / 2013

Transaction ID : SA11AI.5365

Amount of Each Receipt this Period
 100.00

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

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

2720.14

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

A. Full Name (Last, First, Middle Initial)
Aron Larson

Mailing Address 366 Stinson St.

City Saint Paul State MN Zip Code 55117

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

Name of Employer RBC Occupation IT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 29 / 2013

Transaction ID : SA11AI.5303

Amount of Each Receipt this Period
 20.00

B. Full Name (Last, First, Middle Initial)
Kevin Masrud

Mailing Address Mowbray Street

City Stewart State MN Zip Code 55385

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

Name of Employer Harris IT Services Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 30 / 2013

Transaction ID : SA11AI.5333

Amount of Each Receipt this Period
 25.00

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

Mailing Address 8660 Grospoint Ave S

City Cottage Grove State MN Zip Code 55016

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : SA11AI.5343

Amount of Each Receipt this Period
 50.00

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

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

95.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

A. Full Name (Last, First, Middle Initial)
Andy Noble

Mailing Address 2225 Urbandale Lane

City Minneapolis State MN Zip Code 55447

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

Name of Employer Self Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 28 / 2013

Transaction ID : SA11AI.5324

Amount of Each Receipt this Period
 20.14

B. Full Name (Last, First, Middle Initial)
William Paulsen

Mailing Address 709 Delaware St. SW

City Lonsdale State MN Zip Code 55046

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

Name of Employer Seagate Technology Occupation Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 22 / 2013

Transaction ID : SA11AI.5307

Amount of Each Receipt this Period
 20.14

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

Mailing Address 14163 Dresden Ct

City Saint Paul State MN Zip Code 55124

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 23 / 2013

Transaction ID : SA11AI.5345

Amount of Each Receipt this Period
 50.00

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

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

90.28

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

A. Full Name (Last, First, Middle Initial)
Judith Pladson

Mailing Address 31100 County 25 Blvd

City Cannon Falls State MN Zip Code 55009

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

Name of Employer Retired Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 26 / 2013

Transaction ID : SA11AI.5334

Amount of Each Receipt this Period
 25.00

B. Full Name (Last, First, Middle Initial)
Douglas Ployhar

Mailing Address 11539 E 200th St.

City Kenyon State MN Zip Code 55946

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

Name of Employer MOM Brands Occupation Analyst

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 23 / 2013

Transaction ID : SA11AI.5336

Amount of Each Receipt this Period
 50.00

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

Mailing Address 3302 74th St E

City Inver Grove Heights State MN Zip Code 55076

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

Name of Employer Self Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 26 / 2013

Transaction ID : SA11AI.5323

Amount of Each Receipt this Period
 20.14

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

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

95.14

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

A. Full Name (Last, First, Middle Initial)
Nicholas Roehl

Mailing Address 415 Quantico Ln N

City State Zip Code
Minneapolis MN 55447

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

Name of Employer Occupation
Honest Auto Auto Mechanic

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
40.28

Date of Receipt
M M / D D / Y Y Y Y
12 / 22 / 2013

Transaction ID : SA11AI.5335

Amount of Each Receipt this Period
40.28

B. Full Name (Last, First, Middle Initial)
Judith Schierts

Mailing Address 606 11th St. E

City State Zip Code
Wabasha MN 55981

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
50.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 29 / 2013

Transaction ID : SA11AI.5346

Amount of Each Receipt this Period
50.00

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

Mailing Address 3180 198th St W

City State Zip Code
Farmington MN 55024

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

Name of Employer Occupation
SMC Ltd Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
50.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 16 / 2013

Transaction ID : SA11AI.5339

Amount of Each Receipt this Period
50.00

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

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

140.28

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. James Schmitt		Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 3180 198th St W		Transaction ID : SA11AI.5329
City Farmington	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer SMC Ltd	Occupation Engineer	Amount of Each Receipt this Period 75.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) B. David Schultz		Date of Receipt M M / D D / Y Y Y Y 10 / 27 / 2013
Mailing Address 1616 Keller Lake Dr		Transaction ID : SA11AI.5352
City Burnsville	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Advantus Capital Management	Occupation Investment Analyst	Amount of Each Receipt this Period 100.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) C. Trent Sehnert		Date of Receipt M M / D D / Y Y Y Y 12 / 21 / 2013
Mailing Address 1300 Rushmore Cresnet		Transaction ID : SA11AI.5337
City Burnsville	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Wells Fargo	Occupation Computer Engineer	Amount of Each Receipt this Period 50.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

A. Full Name (Last, First, Middle Initial)
Evan Shadduck

Mailing Address 4841 Beach St NE

City State Zip Code
Prior Lake MN 55372

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 29 / 2013

Transaction ID : SA11AI.5356

Amount of Each Receipt this Period
 100.00

B. Full Name (Last, First, Middle Initial)
Joshua Shampo

Mailing Address 1650 20th Ave. NE

City State Zip Code
Hickory NC 28601

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

Name of Employer Occupation
Hickory Marketing

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 11 / 2013

Transaction ID : SA11AI.5347

Amount of Each Receipt this Period
 50.00

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

Mailing Address 6472 Dawn Ave

City State Zip Code
Inver Grove Heights MN 55076

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 29 / 2013

Transaction ID : SA11AI.5302

Amount of Each Receipt this Period
 10.00

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

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

160.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

A. Full Name (Last, First, Middle Initial)
Steven Smith

Mailing Address 16814 Embers Ave

City Farmington State MN Zip Code 55024

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 21 / 2013

Transaction ID : SA11AI.5319

Amount of Each Receipt this Period
 20.14

B. Full Name (Last, First, Middle Initial)
Douglas Spencer

Mailing Address 314 Skyline Dr

City Wabasha State MN Zip Code 55981

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

Name of Employer Occupation
Self

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 27 / 2013

Transaction ID : SA11AI.5364

Amount of Each Receipt this Period
 100.00

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

Mailing Address 9036 Idaho Ave N.

City Minneapolis State MN Zip Code 55445

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

Name of Employer Occupation
Pace Analytical Services, Inc
Project Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 22 / 2013

Transaction ID : SA11AI.5340

Amount of Each Receipt this Period
 50.00

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

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

170.14

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

A. Full Name (Last, First, Middle Initial)
Jane Teich

Mailing Address 1350 Easter Ln

City Saint Paul State MN Zip Code 55123

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 27 / 2013

Transaction ID : SA11AI.5331

Amount of Each Receipt this Period
 25.00

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

Mailing Address 15738 Island View Rd NW

City Prior Lake State MN Zip Code 55372

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

Name of Employer Occupation
 D&G Packaging Sales

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 27 / 2013

Transaction ID : SA11AI.5341

Amount of Each Receipt this Period
 50.00

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

Mailing Address 371 Water St.

City Excelsior State MN Zip Code 55331

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

Name of Employer Occupation
 Self

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 29 / 2013

Transaction ID : SA11AI.5363

Amount of Each Receipt this Period
 100.00

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

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

175.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

A. Full Name (Last, First, Middle Initial)
Nathan Waldron

Mailing Address 1160 Raymond Ave

City Saint Paul State MN Zip Code 55018

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

Name of Employer University of Minnesota Occupation Scientist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
20.14

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : SA11AI.5310

Amount of Each Receipt this Period
20.14

B. Full Name (Last, First, Middle Initial)
Mark Wegscheid

Mailing Address 2465 Lost Lake Road

City Mound State MN Zip Code 55364-1661

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

Name of Employer Broadband America Corp Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 30 / 2013

Transaction ID : SA11AI.5040

Amount of Each Receipt this Period
500.00

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

Mailing Address 28380 Highway 61 Blvd

City Red Wing State MN Zip Code 55066

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

Name of Employer Xcel Energy Occupation Operations Instructor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 26 / 2013

Transaction ID : SA11AI.5353

Amount of Each Receipt this Period
100.00

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

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

620.14

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

A. Full Name (Last, First, Middle Initial)
Joseph Witthuhn

Mailing Address 3475 Golfview Dr. Apt 132

City Saint Paul State MN Zip Code 55123

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

Name of Employer Thomson Reuters Occupation Sr. Software Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
120.14

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 27 / 2013

Transaction ID : SA11AI.5311

Amount of Each Receipt this Period
20.14

B. 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)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

20.14

8045.95

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 105
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

A. Full Name (Last, First, Middle Initial)
David Adam Gerson

Mailing Address 1035 Summit Ave

City State Zip Code
South Saint Paul MN 55075

FEC ID number of contributing federal political committee. **C** H2MN02130

Name of Employer Occupation
Meggitt Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
52091.25

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2013

Transaction ID : SA11D.5211

Amount of Each Receipt this Period
325.80

In-kind - airfair

B. Full Name (Last, First, Middle Initial)
David Adam Gerson

Mailing Address 1035 Summit Ave

City State Zip Code
South Saint Paul MN 55075

FEC ID number of contributing federal political committee. **C** H2MN02130

Name of Employer Occupation
Meggitt Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
71491.25

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 14 / 2013

Transaction ID : SA11D.5042

Amount of Each Receipt this Period
400.00

In-kind:Plane ticket for Sarah

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)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

725.80

725.80

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 105
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

A. Full Name (Last, First, Middle Initial)
David Adam Gerson

Mailing Address 1035 Summit Ave

City South Saint Paul State MN Zip Code 55075

FEC ID number of contributing federal political committee. **C H2MN02130**

Name of Employer Occupation
Meggitt Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
51765.45

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 04 / 2013

Transaction ID : SA13A.5202

Amount of Each Receipt this Period
 5000.00

Payments of Cash and other CC by Candidate

B. Full Name (Last, First, Middle Initial)
David Adam Gerson

Mailing Address 1035 Summit Ave

City South Saint Paul State MN Zip Code 55075

FEC ID number of contributing federal political committee. **C H2MN02130**

Name of Employer Occupation
Meggitt Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
57091.25

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 16 / 2013

Transaction ID : SA13A.5203

Amount of Each Receipt this Period
 5000.00

Payments of Cash and other CC by Candidate

C. Full Name (Last, First, Middle Initial)
David Adam Gerson

Mailing Address 1035 Summit Ave

City South Saint Paul State MN Zip Code 55075

FEC ID number of contributing federal political committee. **C H2MN02130**

Name of Employer Occupation
Meggitt Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
62091.25

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 23 / 2013

Transaction ID : SA13A.5204

Amount of Each Receipt this Period
 5000.00

Payments of Cash and other CC by Candidate

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

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

15000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 105
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

A. Full Name (Last, First, Middle Initial)
David Adam Gerson

Mailing Address 1035 Summit Ave

City South Saint Paul State MN Zip Code 55075

FEC ID number of contributing federal political committee. **C H2MN02130**

Name of Employer Occupation
Meggitt Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
67091.25

Date of Receipt
 M M / D D / Y Y Y Y Y
11 / 04 / 2013

Transaction ID : SA13A.5205

Amount of Each Receipt this Period
5000.00

Payments of Cash and other CC by Candidate

B. Full Name (Last, First, Middle Initial)
David Adam Gerson

Mailing Address 1035 Summit Ave

City South Saint Paul State MN Zip Code 55075

FEC ID number of contributing federal political committee. **C H2MN02130**

Name of Employer Occupation
Meggitt Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
71091.25

Date of Receipt
 M M / D D / Y Y Y Y Y
11 / 13 / 2013

Transaction ID : SA13A.5206

Amount of Each Receipt this Period
4000.00

Payments of Cash and other CC by Candidate

C. Full Name (Last, First, Middle Initial)
David Adam Gerson

Mailing Address 1035 Summit Ave

City South Saint Paul State MN Zip Code 55075

FEC ID number of contributing federal political committee. **C H2MN02130**

Name of Employer Occupation
Meggitt Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
74491.25

Date of Receipt
 M M / D D / Y Y Y Y Y
11 / 19 / 2013

Transaction ID : SA13A.5207

Amount of Each Receipt this Period
3000.00

Payments of Cash and other CC by Candidate

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

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

12000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 105
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

A. Full Name (Last, First, Middle Initial)
David Adam Gerson

Mailing Address 1035 Summit Ave

City State Zip Code
South Saint Paul MN 55075

FEC ID number of contributing federal political committee. **C H2MN02130**

Name of Employer Occupation
Meggitt Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
78491.25

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 29 / 2013

Transaction ID : SA13A.5208

Amount of Each Receipt this Period
 Payments of Cash and other CC by Candidate
4000.00

B. Full Name (Last, First, Middle Initial)
David Adam Gerson

Mailing Address 1035 Summit Ave

City State Zip Code
South Saint Paul MN 55075

FEC ID number of contributing federal political committee. **C H2MN02130**

Name of Employer Occupation
Meggitt Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
82491.25

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 09 / 2013

Transaction ID : SA13A.5209

Amount of Each Receipt this Period
 Payments of Cash and other CC by Candidate
4000.00

C. Full Name (Last, First, Middle Initial)
David Adam Gerson

Mailing Address 1035 Summit Ave

City State Zip Code
South Saint Paul MN 55075

FEC ID number of contributing federal political committee. **C H2MN02130**

Name of Employer Occupation
Meggitt Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
85491.25

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 16 / 2013

Transaction ID : SA13A.5210

Amount of Each Receipt this Period
 Payments of Cash and other CC by Candidate
3000.00

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

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

11000.00

38000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 105			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Amazon		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address 3680 Langley Drive		Amount of Each Disbursement this Period 101.92 Transaction ID : SB17.5047
City Hebron	State KY	
Purpose of Disbursement Computer Equipment	Candidate Name	Category/ Type 003
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Amazon		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2013
Mailing Address 3680 Langley Drive		Amount of Each Disbursement this Period 71.29 Transaction ID : SB17.5049
City Hebron	State KY	
Purpose of Disbursement Computer Equipment	Candidate Name	Category/ Type 003
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Amazon		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2013
Mailing Address 3680 Langley Drive		Amount of Each Disbursement this Period 16.80 Transaction ID : SB17.5060
City Hebron	State KY	
Purpose of Disbursement Office Supplies	Candidate Name	Category/ Type 003
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	190.01
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 105			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Amazon		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2013
Mailing Address 3680 Langley Drive		Amount of Each Disbursement this Period 13.04
City Hebron State KY Zip Code 41048	Purpose of Disbursement Computer Equipment Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Transaction ID : SB17.5069

Full Name (Last, First, Middle Initial) B. Amazon		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2013
Mailing Address 3680 Langley Drive		Amount of Each Disbursement this Period 60.45
City Hebron State KY Zip Code 41048	Purpose of Disbursement Computer Equipment Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Transaction ID : SB17.5070

Full Name (Last, First, Middle Initial) C. Amazon		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2013
Mailing Address 3680 Langley Drive		Amount of Each Disbursement this Period 169.00
City Hebron State KY Zip Code 41048	Purpose of Disbursement Computer Equipment Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Transaction ID : SB17.5071

SUBTOTAL of Disbursements This Page (optional).....	242.49
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 105			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Amazon		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2013
Mailing Address 3680 Langley Drive		Amount of Each Disbursement this Period 7.68
City Hebron State KY Zip Code 41048	Purpose of Disbursement Office Supplies 003 Category/Type	
Candidate Name		Transaction ID : SB17.5079
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Amazon		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2013
Mailing Address 3680 Langley Drive		Amount of Each Disbursement this Period 12.88
City Hebron State KY Zip Code 41048	Purpose of Disbursement Office Supplies 003 Category/Type	
Candidate Name		Transaction ID : SB17.5081
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Aristotle International, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2013
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 700.00
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement Software 003 Category/Type	
Candidate Name		Transaction ID : SB17.5058
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	720.56
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 105			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Aristotle International, Inc.		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 700.00 Transaction ID : SB17.5121
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement Software Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Aristotle International, Inc.		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2013
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 700.00 Transaction ID : SB17.5142
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement Software Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Miss Kari Lei Byboth		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2013
Mailing Address 6424 Emerson Ave. S.		Amount of Each Disbursement this Period 300.00 Transaction ID : SB17.5065
City Minneapolis State MN Zip Code 55423-1315	Purpose of Disbursement Canvassing Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1700.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 105			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Miss Kari Lei Byboth		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2013
Mailing Address 6424 Emerson Ave. S.		Amount of Each Disbursement this Period 300.00 Transaction ID : SB17.5077
City Minneapolis State MN Zip Code 55423-1315	Purpose of Disbursement Canvassing Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Miss Kari Lei Byboth		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2013
Mailing Address 6424 Emerson Ave. S.		Amount of Each Disbursement this Period 300.00 Transaction ID : SB17.5084
City Minneapolis State MN Zip Code 55423-1315	Purpose of Disbursement Canvassing Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Miss Kari Lei Byboth		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2013
Mailing Address 6424 Emerson Ave. S.		Amount of Each Disbursement this Period 300.00 Transaction ID : SB17.5096
City Minneapolis State MN Zip Code 55423-1315	Purpose of Disbursement Canvassing Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	900.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 105			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Miss Kari Lei Byboth		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2013
Mailing Address 6424 Emerson Ave. S.		Amount of Each Disbursement this Period 300.00 Transaction ID : SB17.5115
City Minneapolis	State MN	
Purpose of Disbursement Canvassing	Category/ Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Ryan Matthew Cahill		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2013
Mailing Address 2751 Selkirk Dr Apt 314		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.5064
City Burnsville	State MN	
Purpose of Disbursement Canvassing	Category/ Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Ryan Matthew Cahill		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2013
Mailing Address 2751 Selkirk Dr Apt 314		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.5078
City Burnsville	State MN	
Purpose of Disbursement Canvassing	Category/ Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 105			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Ryan Matthew Cahill		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2013
Mailing Address 2751 Selkirk Dr Apt 314		Amount of Each Disbursement this Period 800.00 Transaction ID : SB17.5087
City Burnsville	State MN	
Zip Code 55337-5670	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Ryan Matthew Cahill		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2013
Mailing Address 2751 Selkirk Dr Apt 314		Amount of Each Disbursement this Period 800.00 Transaction ID : SB17.5118
City Burnsville	State MN	
Zip Code 55337-5670	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Ryan Matthew Cahill		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address 2751 Selkirk Dr Apt 314		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.5124
City Burnsville	State MN	
Zip Code 55337-5670	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 105			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Ryan Matthew Cahill		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013
Mailing Address 2751 Selkirk Dr Apt 314		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.5135
City Burnsville	State MN	
Zip Code 55337-5670	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Ryan Matthew Cahill		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2013
Mailing Address 2751 Selkirk Dr Apt 314		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.5140
City Burnsville	State MN	
Zip Code 55337-5670	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. CallFire		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2013
Mailing Address 1335 4th St., Suite 200		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.5144
City Santa Monica	State CA	
Zip Code 90401-1363	Purpose of Disbursement List Aquisition	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 105			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. CallFire		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2013
Mailing Address 1335 4th St., Suite 200		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.5150
City Santa Monica State CA Zip Code 90401-1363	Purpose of Disbursement List Aquisition Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. CallFire		Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2013
Mailing Address 1335 4th St., Suite 200		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.5163
City Santa Monica State CA Zip Code 90401-1363	Purpose of Disbursement List Aquisition Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Benjamin Francis Dally		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2013
Mailing Address 329 3rd Ave S		Amount of Each Disbursement this Period 150.00 Transaction ID : SB17.5051
City South Saint Paul State MN Zip Code 55075-2613	Purpose of Disbursement Accounting Services Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 105			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Benjamin Francis Dally		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2013
Mailing Address 329 3rd Ave S		Amount of Each Disbursement this Period 150.00 Transaction ID : SB17.5059
City South Saint Paul	State MN	
Zip Code 55075-2613	Purpose of Disbursement Accounting Services	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Benjamin Francis Dally		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2013
Mailing Address 329 3rd Ave S		Amount of Each Disbursement this Period 150.00 Transaction ID : SB17.5066
City South Saint Paul	State MN	
Zip Code 55075-2613	Purpose of Disbursement Accounting Services	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Benjamin Francis Dally		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2013
Mailing Address 329 3rd Ave S		Amount of Each Disbursement this Period 150.00 Transaction ID : SB17.5072
City South Saint Paul	State MN	
Zip Code 55075-2613	Purpose of Disbursement Accounting Services	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 105			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Benjamin Francis Dally		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2013
Mailing Address 329 3rd Ave S		Amount of Each Disbursement this Period 150.00
City South Saint Paul	State MN	Zip Code 55075-2613
Purpose of Disbursement Accounting Services	Category/Type 001	
Candidate Name		Transaction ID : SB17.5083
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Benjamin Francis Dally		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2013
Mailing Address 329 3rd Ave S		Amount of Each Disbursement this Period 150.00
City South Saint Paul	State MN	Zip Code 55075-2613
Purpose of Disbursement Accounting Services	Category/Type 001	
Candidate Name		Transaction ID : SB17.5103
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Benjamin Francis Dally		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address 329 3rd Ave S		Amount of Each Disbursement this Period 150.00
City South Saint Paul	State MN	Zip Code 55075-2613
Purpose of Disbursement Accounting Services	Category/Type 001	
Candidate Name		Transaction ID : SB17.5128
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 105	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Benjamin Francis Dally		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2013
Mailing Address 329 3rd Ave S		Amount of Each Disbursement this Period 150.00 Transaction ID : SB17.5138
City South Saint Paul State MN Zip Code 55075-2613	Purpose of Disbursement Accounting Services 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Benjamin Francis Dally		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2013
Mailing Address 329 3rd Ave S		Amount of Each Disbursement this Period 150.00 Transaction ID : SB17.5139
City South Saint Paul State MN Zip Code 55075-2613	Purpose of Disbursement Accounting Services 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Benjamin Francis Dally		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2013
Mailing Address 329 3rd Ave S		Amount of Each Disbursement this Period 50.00 Transaction ID : SB17.5146
City South Saint Paul State MN Zip Code 55075-2613	Purpose of Disbursement Accounting Services 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 105			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Benjamin Francis Dally			Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2013	
Mailing Address 329 3rd Ave S			Amount of Each Disbursement this Period 50.00	
City South Saint Paul	State MN	Zip Code 55075-2613	Transaction ID : SB17.5152	
Purpose of Disbursement Accounting Services		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Benjamin Francis Dally			Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2013	
Mailing Address 329 3rd Ave S			Amount of Each Disbursement this Period 60.00	
City South Saint Paul	State MN	Zip Code 55075-2613	Transaction ID : SB17.5160	
Purpose of Disbursement Accounting Services		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Benjamin Francis Dally			Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2013	
Mailing Address 329 3rd Ave S			Amount of Each Disbursement this Period 50.00	
City South Saint Paul	State MN	Zip Code 55075-2613	Transaction ID : SB17.5164	
Purpose of Disbursement Accounting Services		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	160.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 105	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Dirt Cheap Signs		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2013
Mailing Address 7301 Bar K Ranch Rd		Amount of Each Disbursement this Period 311.86 Transaction ID : SB17.5111
City Lago Vista	State TX	
Zip Code 78645-4792	Purpose of Disbursement Printing	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Andrew Edmier		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2013
Mailing Address 3460 Walden Alcove		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.5054
City Saint Paul	State MN	
Zip Code 55129-7740	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Andrew Edmier		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2013
Mailing Address 3460 Walden Alcove		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.5057
City Saint Paul	State MN	
Zip Code 55129-7740	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	711.86
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 105			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Andrew Edmier		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2013
Mailing Address 3460 Walden Alcove		Amount of Each Disbursement this Period 200.00
City Saint Paul	State MN	Zip Code 55129-7740
Purpose of Disbursement Canvassing	Category/Type 001	
Candidate Name		Transaction ID : SB17.5062
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Andrew Edmier		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2013
Mailing Address 3460 Walden Alcove		Amount of Each Disbursement this Period 200.00
City Saint Paul	State MN	Zip Code 55129-7740
Purpose of Disbursement Canvassing	Category/Type 001	
Candidate Name		Transaction ID : SB17.5076
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Andrew Edmier		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2013
Mailing Address 3460 Walden Alcove		Amount of Each Disbursement this Period 200.00
City Saint Paul	State MN	Zip Code 55129-7740
Purpose of Disbursement Canvassing	Category/Type 001	
Candidate Name		Transaction ID : SB17.5085
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 105			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Andrew Edmier		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2013
Mailing Address 3460 Walden Alcove		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.5094
City Saint Paul	State MN	
Zip Code 55129-7740	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Matthew Erickson		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address 7705 Jasmine Ave S		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.5046
City Cottage Grove	State MN	
Zip Code 55016-2221	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Matthew Erickson		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2013
Mailing Address 7705 Jasmine Ave S		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.5050
City Cottage Grove	State MN	
Zip Code 55016-2221	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 105			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Matthew Erickson		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2013
Mailing Address 7705 Jasmine Ave S		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.5067
City Cottage Grove	State MN	
Zip Code 55016-2221	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Matthew Erickson		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2013
Mailing Address 7705 Jasmine Ave S		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.5073
City Cottage Grove	State MN	
Zip Code 55016-2221	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Matthew Erickson		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2013
Mailing Address 7705 Jasmine Ave S		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.5090
City Cottage Grove	State MN	
Zip Code 55016-2221	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 105			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Matthew Erickson			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2013	
Mailing Address 7705 Jasmine Ave S			Amount of Each Disbursement this Period 400.00	
City Cottage Grove	State MN	Zip Code 55016-2221	Transaction ID : SB17.5098	
Purpose of Disbursement Canvassing		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Matthew Erickson			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2013	
Mailing Address 7705 Jasmine Ave S			Amount of Each Disbursement this Period 400.00	
City Cottage Grove	State MN	Zip Code 55016-2221	Transaction ID : SB17.5116	
Purpose of Disbursement Canvassing		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Matthew Erickson			Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013	
Mailing Address 7705 Jasmine Ave S			Amount of Each Disbursement this Period 400.00	
City Cottage Grove	State MN	Zip Code 55016-2221	Transaction ID : SB17.5127	
Purpose of Disbursement Canvassing		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 105			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Matthew Erickson			Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013	
Mailing Address 7705 Jasmine Ave S			Amount of Each Disbursement this Period 400.00	
City Cottage Grove	State MN	Zip Code 55016-2221	Transaction ID : SB17.5132	
Purpose of Disbursement Canvassing		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Matthew Erickson			Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2013	
Mailing Address 7705 Jasmine Ave S			Amount of Each Disbursement this Period 100.00	
City Cottage Grove	State MN	Zip Code 55016-2221	Transaction ID : SB17.5136	
Purpose of Disbursement Canvassing		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Matthew Erickson			Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2013	
Mailing Address 7705 Jasmine Ave S			Amount of Each Disbursement this Period 200.00	
City Cottage Grove	State MN	Zip Code 55016-2221	Transaction ID : SB17.5137	
Purpose of Disbursement Canvassing		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 105			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Matthew Erickson			Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2013		
Mailing Address 7705 Jasmine Ave S			Amount of Each Disbursement this Period 200.00		
City Cottage Grove	State MN	Zip Code 55016-2221	Transaction ID : SB17.5147		
Purpose of Disbursement Canvassing		001 Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) B. Matthew Erickson			Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2013		
Mailing Address 7705 Jasmine Ave S			Amount of Each Disbursement this Period 200.00		
City Cottage Grove	State MN	Zip Code 55016-2221	Transaction ID : SB17.5153		
Purpose of Disbursement Canvassing		001 Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) c. Matthew Erickson			Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013		
Mailing Address 7705 Jasmine Ave S			Amount of Each Disbursement this Period 200.00		
City Cottage Grove	State MN	Zip Code 55016-2221	Transaction ID : SB17.5156		
Purpose of Disbursement Canvassing		001 Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 54 OF 105	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Matthew Erickson		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address 7705 Jasmine Ave S		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.5157
City Cottage Grove	State MN	
Zip Code 55016-2221	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Matthew Erickson		Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2013
Mailing Address 7705 Jasmine Ave S		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.5161
City Cottage Grove	State MN	
Zip Code 55016-2221	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. David Adam Gerson		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2013
Mailing Address 1035 Summit Ave		Amount of Each Disbursement this Period 325.80 Transaction ID : SB17.5212
City South Saint Paul	State MN	
Zip Code 55075	Purpose of Disbursement In-kind - airfair	Category/ Type
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MN District: 02	

SUBTOTAL of Disbursements This Page (optional).....	925.80
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 105			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. David Adam Gerson		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2013
Mailing Address 1035 Summit Ave		Amount of Each Disbursement this Period 332.64 Transaction ID : SB17.5166
City South Saint Paul	State MN	
Zip Code 55075	Purpose of Disbursement Reimbursement for Hotel	Category/ Type 002
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MN District: 02	

Full Name (Last, First, Middle Initial) B. David Adam Gerson		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2013
Mailing Address 1035 Summit Ave		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.5044
City South Saint Paul	State MN	
Zip Code 55075	Purpose of Disbursement In-kind:Plane ticket for Sarah	Category/ Type 002
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MN District: 02	

Full Name (Last, First, Middle Initial) C. Got Print		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2013
Mailing Address 7651 N. San Fernando Rd.		Amount of Each Disbursement this Period 149.89 Transaction ID : SB17.5061
City Burbank	State CA	
Zip Code 91505	Purpose of Disbursement Printing	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	882.53
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 105			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

A. Got Print

Full Name (Last, First, Middle Initial)

Mailing Address 7651 N. San Fernando Rd.

City Burbank State CA Zip Code 91505

Purpose of Disbursement Printing

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 11 / 2013

Amount of Each Disbursement this Period: 126.08

Transaction ID : SB17.5068

Category/Type: 003

B. Got Print

Full Name (Last, First, Middle Initial)

Mailing Address 7651 N. San Fernando Rd.

City Burbank State CA Zip Code 91505

Purpose of Disbursement Printing

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 30 / 2013

Amount of Each Disbursement this Period: 302.51

Transaction ID : SB17.5095

Category/Type: 003

C. Got Print

Full Name (Last, First, Middle Initial)

Mailing Address 7651 N. San Fernando Rd.

City Burbank State CA Zip Code 91505

Purpose of Disbursement Printing

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 06 / 2013

Amount of Each Disbursement this Period: 173.26

Transaction ID : SB17.5110

Category/Type: 003

SUBTOTAL of Disbursements This Page (optional)..... 601.85

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 105			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Gerson for Congress

A. Got Print

Full Name (Last, First, Middle Initial)
Mailing Address 7651 N. San Fernando Rd.

City Burbank State CA Zip Code 91505

Purpose of Disbursement Printing
Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 12 / 03 / 2013

Amount of Each Disbursement this Period: 57.18
Transaction ID : SB17.5143

Category/Type: 003

B. Holiday Station Store

Full Name (Last, First, Middle Initial)
Mailing Address 2322 Washington Ave North

City Minneapolis State MN Zip Code 55411

Purpose of Disbursement gas
Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 10 / 26 / 2013

Amount of Each Disbursement this Period: 60.24
Transaction ID : SB17.5089

Category/Type: 002

c. Holiday Station Store

Full Name (Last, First, Middle Initial)
Mailing Address 2322 Washington Ave North

City Minneapolis State MN Zip Code 55411

Purpose of Disbursement gas
Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 10 / 30 / 2013

Amount of Each Disbursement this Period: 200.00
Transaction ID : SB17.5093

Category/Type: 002

SUBTOTAL of Disbursements This Page (optional) 317.42

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 105			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Holiday Station Store		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address 2322 Washington Ave North		Amount of Each Disbursement this Period 59.56
City Minneapolis	State MN	
Zip Code 55411	Purpose of Disbursement gas	Transaction ID : SB17.5109
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. iStockphoto		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2013
Mailing Address 1240 20th Ave SE Suite 200		Amount of Each Disbursement this Period 94.99
City Calgary	State ZZ	
Zip Code	Purpose of Disbursement graphic	Transaction ID : SB17.5105
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. iStockphoto		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address 1240 20th Ave SE Suite 200		Amount of Each Disbursement this Period 62.77
City Calgary	State ZZ	
Zip Code	Purpose of Disbursement graphic	Transaction ID : SB17.5106
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	217.32
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 59 OF 105	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Joseph Leach		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address 806 12th ave se		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.5122
City Minneapolis	State MN	
Zip Code 55414-1436	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Joseph Leach		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013
Mailing Address 806 12th ave se		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.5134
City Minneapolis	State MN	
Zip Code 55414-1436	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Joseph Leach		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2013
Mailing Address 806 12th ave se		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.5141
City Minneapolis	State MN	
Zip Code 55414-1436	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 105			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Joseph Leach		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2013
Mailing Address 806 12th ave se		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.5145
City Minneapolis	State MN	
Zip Code 55414-1436	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Joseph Leach		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2013
Mailing Address 806 12th ave se		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.5151
City Minneapolis	State MN	
Zip Code 55414-1436	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Joseph Leach		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address 806 12th ave se		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.5155
City Minneapolis	State MN	
Zip Code 55414-1436	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 105			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Joseph Leach			Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2013	
Mailing Address 806 12th ave se			Amount of Each Disbursement this Period 200.00	
City Minneapolis	State MN	Zip Code 55414-1436	Transaction ID : SB17.5159	
Purpose of Disbursement Canvassing		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:			

Full Name (Last, First, Middle Initial) B. Lions Roar Studios			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013	
Mailing Address 23710 State Highway 55			Amount of Each Disbursement this Period 1316.25	
City Loretto	State MN	Zip Code 55357-9587	Transaction ID : SB17.5048	
Purpose of Disbursement Website Services		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:			

Full Name (Last, First, Middle Initial) c. Lions Roar Studios			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2013	
Mailing Address 23710 State Highway 55			Amount of Each Disbursement this Period 2000.00	
City Loretto	State MN	Zip Code 55357-9587	Transaction ID : SB17.5102	
Purpose of Disbursement Website Services		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	3516.25
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 62 OF 105	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Lions Roar Studios		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2013
Mailing Address 23710 State Highway 55		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.5129
City Loretto State MN Zip Code 55357-9587	Purpose of Disbursement Website Services Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Lions Roar Studios		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2013
Mailing Address 23710 State Highway 55		Amount of Each Disbursement this Period 2938.75 Transaction ID : SB17.5149
City Loretto State MN Zip Code 55357-9587	Purpose of Disbursement Website Services Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Joe McKinney		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2013
Mailing Address 928 5th St SE		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.5074
City Minneapolis State MN Zip Code 55414-1916	Purpose of Disbursement canvassing Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	5138.75
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 105			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Joe McKinney		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2013
Mailing Address 928 5th St SE		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.5082
City Minneapolis	State MN	
Purpose of Disbursement canvassing	Category/ Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Joe McKinney		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2013
Mailing Address 928 5th St SE		Amount of Each Disbursement this Period 110.00 Transaction ID : SB17.5100
City Minneapolis	State MN	
Purpose of Disbursement Canvassing	Category/ Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Joe McKinney		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2013
Mailing Address 928 5th St SE		Amount of Each Disbursement this Period 150.00 Transaction ID : SB17.5119
City Minneapolis	State MN	
Purpose of Disbursement Canvassing	Category/ Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	460.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 105			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Joe McKinney		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address 928 5th St SE		Amount of Each Disbursement this Period 150.00 Transaction ID : SB17.5126
City Minneapolis	State MN	
Purpose of Disbursement Canvassing	001 Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Joe McKinney		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2013
Mailing Address 928 5th St SE		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.5131
City Minneapolis	State MN	
Purpose of Disbursement Canvassing	001 Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. OfficeMax		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2013
Mailing Address 1271 Promenade Place		Amount of Each Disbursement this Period 79.26 Transaction ID : SB17.5130
City Eagan	State MN	
Purpose of Disbursement Office supplies	003 Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	479.26
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 105			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. OfficeMax		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2013
Mailing Address 1271 Promenade Place		Amount of Each Disbursement this Period 85.79
City Eagan State MN Zip Code 55121-2293	Purpose of Disbursement Office Supplies	
Candidate Name	Category/Type 003	Transaction ID : SB17.5154
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B. Orbitz Worldwide, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2013
Mailing Address 500 W. Madison Suite 1000		Amount of Each Disbursement this Period 131.46
City Chicago State IL Zip Code 60661-2559	Purpose of Disbursement Hotel	
Candidate Name	Category/Type 002	Transaction ID : SB17.5092
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) C. Piryx, Inc.		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 164.09
City San Francisco State CA Zip Code 94105-3718	Purpose of Disbursement Contribution Processing Fees	
Candidate Name	Category/Type 003	Transaction ID : SB17.5165
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	381.34
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 105			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Carly Schowalter		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2013
Mailing Address 205 County Rd B2 E, Apt 122		Amount of Each Disbursement this Period 125.00 Transaction ID : SB17.5091
City Saint Paul	State MN	
Zip Code 55117-1704	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Carly Schowalter		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2013
Mailing Address 205 County Rd B2 E, Apt 122		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.5099
City Saint Paul	State MN	
Zip Code 55117-1704	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Carly Schowalter		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2013
Mailing Address 205 County Rd B2 E, Apt 122		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.5117
City Saint Paul	State MN	
Zip Code 55117-1704	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	625.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 67 OF 105	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Carly Schowalter		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address 205 County Rd B2 E, Apt 122		Amount of Each Disbursement this Period 275.00 Transaction ID : SB17.5125
City Saint Paul	State MN	
Zip Code 55117-1704	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Carly Schowalter		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013
Mailing Address 205 County Rd B2 E, Apt 122		Amount of Each Disbursement this Period 245.00 Transaction ID : SB17.5133
City Saint Paul	State MN	
Zip Code 55117-1704	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Sign Minds		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2013
Mailing Address 1400 Quincy Street NE		Amount of Each Disbursement this Period 295.00 Transaction ID : SB17.5114
City Minneapolis	State MN	
Zip Code 55413	Purpose of Disbursement Printing	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	815.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 105			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. SuperAmerica		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2013
Mailing Address 2250 Cliff Rd		Amount of Each Disbursement this Period 150.00 Transaction ID : SB17.5112
City Eagan State MN Zip Code 55122	Purpose of Disbursement gas 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. SuperAmerica		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2013
Mailing Address 2250 Cliff Rd		Amount of Each Disbursement this Period 150.00 Transaction ID : SB17.5113
City Eagan State MN Zip Code 55122	Purpose of Disbursement gas 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. SuperAmerica		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2013
Mailing Address 2250 Cliff Rd		Amount of Each Disbursement this Period 58.06 Transaction ID : SB17.5120
City Eagan State MN Zip Code 55122	Purpose of Disbursement gas 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	358.06
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 105			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. SuperAmerica		Date of Disbursement M M / D D / Y Y Y Y 12 / 25 / 2013
Mailing Address 2250 Cliff Rd		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.5158
City Eagan	State MN	
Zip Code 55122	Purpose of Disbursement gas	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. SuperAmerica		Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2013
Mailing Address 2250 Cliff Rd		Amount of Each Disbursement this Period 59.81 Transaction ID : SB17.5162
City Eagan	State MN	
Zip Code 55122	Purpose of Disbursement gas	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. The UPS Store		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2013
Mailing Address 8160 County Road 42 #300		Amount of Each Disbursement this Period 485.00 Transaction ID : SB17.5088
City Savage	State MN	
Zip Code 55378	Purpose of Disbursement Printing	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	744.81
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 105			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. The UPS Store		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2013
Mailing Address 8160 County Road 42 #300		Amount of Each Disbursement this Period 580.00
City Savage State MN Zip Code 55378	Purpose of Disbursement Printing 003 Category/Type	
Candidate Name		Transaction ID : SB17.5101
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Tinucci's		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2013
Mailing Address 396 21st St		Amount of Each Disbursement this Period 224.96
City Newport State MN Zip Code 55055-1008	Purpose of Disbursement Meals 003 Category/Type	
Candidate Name		Transaction ID : SB17.5104
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Paul Tuschy		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2013
Mailing Address 2865 Upper 79th Ct. E		Amount of Each Disbursement this Period 550.00
City Inver Grove Heights State MN Zip Code 55076	Purpose of Disbursement Canvassing 001 Category/Type	
Candidate Name		Transaction ID : SB17.5052
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1354.96
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 105			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Paul Tuschy		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2013
Mailing Address 2865 Upper 79th Ct. E		Amount of Each Disbursement this Period 550.00 Transaction ID : SB17.5053
City Inver Grove Heights	State MN	
Zip Code 55076	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Paul Tuschy		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2013
Mailing Address 2865 Upper 79th Ct. E		Amount of Each Disbursement this Period 1100.00 Transaction ID : SB17.5055
City Inver Grove Heights	State MN	
Zip Code 55076	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Paul Tuschy		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2013
Mailing Address 2865 Upper 79th Ct. E		Amount of Each Disbursement this Period 550.00 Transaction ID : SB17.5056
City Inver Grove Heights	State MN	
Zip Code 55076	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2200.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 105			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Paul Tuschy		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2013
Mailing Address 2865 Upper 79th Ct. E		Amount of Each Disbursement this Period 750.00
City Inver Grove Heights	State MN	Zip Code 55076
Purpose of Disbursement Canvassing	Category/Type 001	
Candidate Name		Transaction ID : SB17.5063
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Paul Tuschy		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2013
Mailing Address 2865 Upper 79th Ct. E		Amount of Each Disbursement this Period 750.00
City Inver Grove Heights	State MN	Zip Code 55076
Purpose of Disbursement Canvassing	Category/Type 001	
Candidate Name		Transaction ID : SB17.5075
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Paul Tuschy		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2013
Mailing Address 2865 Upper 79th Ct. E		Amount of Each Disbursement this Period 550.00
City Inver Grove Heights	State MN	Zip Code 55076
Purpose of Disbursement Canvassing	Category/Type 001	
Candidate Name		Transaction ID : SB17.5080
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2050.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 73 OF 105	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Paul Tuschy		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2013
Mailing Address 2865 Upper 79th Ct. E		Amount of Each Disbursement this Period 750.00 Transaction ID : SB17.5086
City Inver Grove Heights	State MN	
Zip Code 55076	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) B. Paul Tuschy		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2013
Mailing Address 2865 Upper 79th Ct. E		Amount of Each Disbursement this Period 750.00 Transaction ID : SB17.5097
City Inver Grove Heights	State MN	
Zip Code 55076	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) c. Paul Tuschy		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address 2865 Upper 79th Ct. E		Amount of Each Disbursement this Period 550.00 Transaction ID : SB17.5107
City Inver Grove Heights	State MN	
Zip Code 55076	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

SUBTOTAL of Disbursements This Page (optional).....	2050.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 105			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Gerson for Congress

Full Name (Last, First, Middle Initial) A. Paul Tuschy		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address 2865 Upper 79th Ct. E		Amount of Each Disbursement this Period 550.00 Transaction ID : SB17.5108
City Inver Grove Heights	State MN	
Zip Code 55076	Purpose of Disbursement Canvassing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Vision Van Gogh		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2013
Mailing Address 11521 Eagle Street		Amount of Each Disbursement this Period 484.15 Transaction ID : SB17.5123
City Minneapolis	State MN	
Zip Code 55448-3003	Purpose of Disbursement Printing	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Vision Van Gogh		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2013
Mailing Address 11521 Eagle Street		Amount of Each Disbursement this Period 484.15 Transaction ID : SB17.5148
City Minneapolis	State MN	
Zip Code 55448-3003	Purpose of Disbursement Printing	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1518.30
TOTAL This Period (last page this line number only).....	41661.57

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Gerson for Congress

Transaction ID : SC/10.4392

LOAN SOURCE Full Name (Last, First, Middle Initial)
David Adam Gerson

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
1035 Summit Ave

City State ZIP Code
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
16554.96 0.00 16554.96

TERMS

Date Incurred Date Due Interest Rate Secured:
M 05 / D 29 / Y 2012 M M / D D / Y 1/1/2020 Y 0.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 16554.96

TOTALS This Period (last page in this line only)..... ▶ []

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Gerson for Congress

Transaction ID : SC/10.4365

LOAN SOURCE Full Name (Last, First, Middle Initial)
David Adam Gerson

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
1035 Summit Ave

City State ZIP Code
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
10000.00 0.00 10000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 07 / D 19 / Y 2012 M M / D D / Y NA % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶ 10000.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Gerson for Congress

Transaction ID : SC/10.4381

LOAN SOURCE Full Name (Last, First, Middle Initial)

David Adam Gerson

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
1035 Summit Ave

City State ZIP Code
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
5000.00 0.00 5000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 07 / D 24 / Y 2012 M M / D D / Y NA % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶ 5000.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Gerson for Congress

Transaction ID : SC/10.4468

LOAN SOURCE Full Name (Last, First, Middle Initial)

David Adam Gerson

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
1035 Summit Ave

City State ZIP Code
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
5.00 0.00 5.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 07 / D 24 / Y 2012 M M / D D / Y NA % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 5.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Gerson for Congress

Transaction ID : SC/10.4128

LOAN SOURCE Full Name (Last, First, Middle Initial)
David Adam Gerson

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
1035 Summit Ave

City State ZIP Code
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
5000.00 0.00 5000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 07 / D 26 / Y 2012 M M / D D / Y NA % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶ 5000.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Gerson for Congress

Transaction ID : SC/10.4389

LOAN SOURCE Full Name (Last, First, Middle Initial)

David Adam Gerson

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
1035 Summit Ave

City State ZIP Code
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
5000.00 0.00 5000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
08 / 01 / 2012 M M / D D / Y Y Y Y na 0.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... 5000.00

TOTALS This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Gerson for Congress

Transaction ID : SC/10.4129

LOAN SOURCE Full Name (Last, First, Middle Initial)
David Adam Gerson

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
1035 Summit Ave

City State ZIP Code
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
5000.00 0.00 5000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 08 / D 10 / Y 2012 M M / D D / Y NA % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶ 5000.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Gerson for Congress

Transaction ID : SC/10.4470

LOAN SOURCE Full Name (Last, First, Middle Initial)
David Adam Gerson

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
1035 Summit Ave

City State ZIP Code
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
6.00 0.00 6.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 08 / D 10 / Y 2012 M M / D D / Y NA % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 6.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Gerson for Congress

Transaction ID : SC/10.4130

LOAN SOURCE Full Name (Last, First, Middle Initial)
David Adam Gerson

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
1035 Summit Ave

City State ZIP Code
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
1000.00 0.00 1000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
08 / 17 / 2012 M M / D D / Y Y NA 0.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... 1000.00

TOTALS This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Gerson for Congress

Transaction ID : SC/10.4131

LOAN SOURCE Full Name (Last, First, Middle Initial)

David Adam Gerson

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
1035 Summit Ave

City State ZIP Code
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
1000.00 0.00 1000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M M / D D / Y Y Y Y M M / D D / Y Y Y Y 0.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶ 1000.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Gerson for Congress

Transaction ID : SC/10.4442

LOAN SOURCE Full Name (Last, First, Middle Initial)
David Adam Gerson

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
1035 Summit Ave

City State ZIP Code
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
479.33 0.00 479.33

TERMS

Date Incurred Date Due Interest Rate Secured:
02 / 22 / 2013 M M / D D / Y Y 2020 Y 1/1/2020 Y 0.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 479.33

TOTALS This Period (last page in this line only)..... ▶ []

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Gerson for Congress

Transaction ID : SC/10.4444

LOAN SOURCE Full Name (Last, First, Middle Initial)

David Adam Gerson

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
1035 Summit Ave

City State ZIP Code
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
3000.00 0.00 3000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 02 / D 25 / Y 2013 M M / D D / Y 1/1/2020 Y 0.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 3000.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Gerson for Congress

Transaction ID : SC/10.4464

LOAN SOURCE Full Name (Last, First, Middle Initial)
David Adam Gerson

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
1035 Summit Ave

City State ZIP Code
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
3000.00 0.00 3000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 03 / D 26 / Y 2013 M M / D D / Y 1/1/2020 Y 0.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶ 3000.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Gerson for Congress

Transaction ID : SC/10.4502

LOAN SOURCE Full Name (Last, First, Middle Initial)

David Adam Gerson

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
1035 Summit Ave

City State ZIP Code
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
4000.00 0.00 4000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 04 / D 18 / Y 2013 M M / D D / Y 1/1/20 0.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶ 4000.00
TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Gerson for Congress

Transaction ID : SC/10.4545

LOAN SOURCE Full Name (Last, First, Middle Initial)
David Adam Gerson

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
1035 Summit Ave

City State ZIP Code
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
4000.00 0.00 4000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 05 / D 13 / Y 2013 M M / D D / Y 1/1/20 0.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶ 4000.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Gerson for Congress

Transaction ID : SC/10.4591

LOAN SOURCE Full Name (Last, First, Middle Initial)

David Adam Gerson

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
1035 Summit Ave

City State ZIP Code
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
5000.00 0.00 5000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
06 / 10 / 2013 M M / D D / Y 1/1/20 0.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... 5000.00

TOTALS This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Gerson for Congress

Transaction ID : **SC/10.4622**

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

David Adam Gerson

Primary
 General
 Other (specify) ▼

Mailing Address
1035 Summit Ave

City State ZIP Code
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
131.12 0.00 131.12

TERMS

Date Incurred Date Due Interest Rate Secured:
M 06 / D 30 / Y 2013 M M / D D / Y 1/1/20 0.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 131.12

TOTALS This Period (last page in this line only)..... ▶ []

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Gerson for Congress

Transaction ID : SC/10.5169

LOAN SOURCE Full Name (Last, First, Middle Initial)
David Adam Gerson

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
1035 Summit Ave

City State ZIP Code
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
5000.00 0.00 5000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 07 / D 05 / Y 2013 M M / D D / Y 1/1/20 0.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 5000.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Gerson for Congress

Transaction ID : SC/10.5170

LOAN SOURCE Full Name (Last, First, Middle Initial)
David Adam Gerson

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
1035 Summit Ave

City State ZIP Code
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
5000.00 0.00 5000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 07 / D 29 / Y 2013 M M / D D / Y 1/1/20 0.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 5000.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Gerson for Congress

Transaction ID : SC/10.5172

LOAN SOURCE Full Name (Last, First, Middle Initial)

David Adam Gerson

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
1035 Summit Ave

City State ZIP Code
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
5000.00 0.00 5000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
08 / 19 / 2013 M M / D D / Y 1/1/20 0.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... 5000.00

TOTALS This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Gerson for Congress

Transaction ID : SC/10.5173

LOAN SOURCE Full Name (Last, First, Middle Initial)
David Adam Gerson

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
1035 Summit Ave

City State ZIP Code
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
5000.00 0.00 5000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
09 / 12 / 2013 M M / D D / Y 1/1/20 0.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... 5000.00

TOTALS This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Gerson for Congress

Transaction ID : SC/10.5174

LOAN SOURCE Full Name (Last, First, Middle Initial)

David Adam Gerson

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
1035 Summit Ave

City State ZIP Code
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
3000.00 0.00 3000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M M / D D / Y Y Y Y M M / D D / Y Y Y Y 0.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... 3000.00
TOTALS This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Gerson for Congress

Transaction ID : SC/10.5202

LOAN SOURCE Full Name (Last, First, Middle Initial)

David Adam Gerson

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
1035 Summit Ave

City State ZIP Code
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
5000.00 0.00 5000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M M / D D / Y Y Y Y M M / D D / Y Y Y Y 0.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... 5000.00

TOTALS This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Gerson for Congress

Transaction ID : SC/10.5203

LOAN SOURCE Full Name (Last, First, Middle Initial)
David Adam Gerson

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
1035 Summit Ave

City State ZIP Code
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
5000.00 0.00 5000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M M / D D / Y Y Y Y M M / D D / Y Y Y Y 0.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 5000.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Gerson for Congress

Transaction ID : SC/10.5204

LOAN SOURCE Full Name (Last, First, Middle Initial)
David Adam Gerson

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
1035 Summit Ave

City State ZIP Code
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
5000.00 0.00 5000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M M / D D / Y Y Y Y M M / D D / Y Y Y Y 0.00 % (apr) Yes No
10 / 23 / 2013 / 1/1/20

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶ 5000.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Gerson for Congress

Transaction ID : SC/10.5205

LOAN SOURCE Full Name (Last, First, Middle Initial)
David Adam Gerson

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
1035 Summit Ave

City State ZIP Code
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
5000.00 0.00 5000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 11 / D 04 / Y 2013 M M / D D / Y 1/1/20 0.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 5000.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER: (check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Gerson for Congress

Transaction ID : SC/10.5206

LOAN SOURCE Full Name (Last, First, Middle Initial)
David Adam Gerson

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
1035 Summit Ave

City State ZIP Code
South Saint Paul MN 55075

Original Amount of Loan 4000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 4000.00
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TERMS

Date Incurred: M 11 / D 13 / Y 2013
Date Due: M / D / Y 1/1/20
Interest Rate: 0.00 % (apr)
Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 4000.00
TOTALS This Period (last page in this line only)..... ▶ []

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Gerson for Congress

Transaction ID : SC/10.5207

LOAN SOURCE Full Name (Last, First, Middle Initial)

David Adam Gerson

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
1035 Summit Ave

City State ZIP Code
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
3000.00 0.00 3000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 11 / D 19 / Y 2013 M M / D D / Y 1/1/20 0.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 3000.00
TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Gerson for Congress

Transaction ID : SC/10.5208

LOAN SOURCE Full Name (Last, First, Middle Initial)
David Adam Gerson

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
1035 Summit Ave

City State ZIP Code
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
4000.00 0.00 4000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 11 / D 29 / Y 2013 M M / D D / Y 1/1/20 0.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 4000.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Gerson for Congress

Transaction ID : SC/10.5209

LOAN SOURCE Full Name (Last, First, Middle Initial)

David Adam Gerson

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
1035 Summit Ave

City State ZIP Code
South Saint Paul MN 55075

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
4000.00 0.00 4000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 12 / D 09 / Y 2013 M M / D D / Y 1/1/20 0.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶ 4000.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.