PAGE 1 / 45

# FORM 3

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

101111110	For An Au	thorized Com	mittee	Offi	ce Use Only
NAME OF     COMMITTEE (in full)	TYPE OR PRINT	•	ample: If typing, type er the lines.	12FE4M5	
Gerson for Congress	; 				
ADDRESS (number and street)	PO Box 1465				
<b>▼</b>					
Check if different than previously reported. (ACC)	Burnsville			MN 553	37
	AUIMPED W	CITY ▲		STATE ▲	ZIP CODE ▲
C C00523738	NUMBER V	3. IS THIS REPORT	NEW (N) OR	AMENDED (A)	STATE ▼ DISTRICT  MN 02
4. TYPE OF REPORT ( (a) Quarterly Reports:		b) 12-Day <b>PRE</b>	-Election Report for t	he:	
			Primary (12P)	General (12G)	Runoff (12R)
April 15 Quarterl  July 15 Quarterly			Convention (12C)	Special (12S)	
	rterly Report (Q3)	Election on	M M / D D	/ Y Y Y Y Y	in the State of
January 31 Year	-End Report (YE) (	c) 30-Day <b>POS</b>	<b>T</b> -Election Report for	the:	
			General (30G)	Runoff (30R)	Special (30S)
Termination Repo	ort (TER)	Election on	M   M / D   D	/ Y " Y " Y " Y	in the State of
5. Covering Period	04 / DDD /	Y Y Y Y Y 2017	through	06 / 30 / Y	2017
I certify that I have examined Type or Print Name of Treasu	Gerson, David,		nowledge and belief it	is true, correct and co	mplete.
Signature of Treasurer	Gerson, David, , ,		[Electronically Filed]	Date 07	16 Y Y Y Y Y Y 2017
NOTE: Submission of false, erro	oneous, or incomplete	information may	subject the person sigr	ning this Report to the p	enalties of 52 U.S.C. §30109
Office Use Only					FEC FORM 3 (Revised 05/2016)

#### **SUMMARY PAGE**

of Receipts and Disbursements

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FEC Form 3 (Revised 05/2016)

Write or Type Committee Name Gerson for Congress

2017 2017 06 30 01 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 0.00 0.00 (other than loans) (from Line 11(e)) .... (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) ..... (c) Net Contributions (other than loans) 0.00 0.00 (subtract Line 6(b) from Line 6(a)) ...... 7. Net Operating Expenditures (a) Total Operating Expenditures 0.00 631.93 (from Line 17) ..... (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 631.93 0.00 (subtract Line 7(b) from Line 7(a)) ...... Cash on Hand at Close of 103539.64 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 275000.00 Schedule C and/or Schedule D).....

#### For further information contact:

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

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

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3 (Revised 05/2016) Write or Type Committee Name

Gerson for Congress

PAGE 3 / 45

04 2017 06 01 30 2017 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 0.00 0.00 (i) Itemized (use Schedule A)...... 0.00 0.00 (ii) Unitemized ..... (iii) TOTAL of contributions 0.00 0.00 from individuals ..... 0.00 0.00 Political Party Committees..... Other Political Committees 0.00 0.00 (such as PACs)..... 0.00 0.00 The Candidate..... (d) TOTAL CONTRIBUTIONS (other than loans) 0.00 (add Lines 11(a)(iii), (b), (c), and (d)).. 0.00 12. TRANSFERS FROM OTHER 0.00 0.00 AUTHORIZED COMMITTEES ..... 13. LOANS: (a) Made or Guaranteed by the 0.00 0.00 Candidate..... 0.00 0.00 (b) All Other Loans..... TOTAL LOANS 0.00 0.00 (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** 0.00 0.00 (Refunds, Rebates, etc.) ..... 15. OTHER RECEIPTS 0.00 0.00 (Dividends, Interest, etc.) ..... 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) 0.00 0.00 (Carry Total to Line 24, page 4).....

**DETAILED SUMMARY PAGE** 

of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 45

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	0.00	631.93
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)	0.00	631.93
	III. CASH SU	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPOR	rting period	103539.64
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	0.00
25.	SUBTOTAL (add Line 23 and Line 24)		103539.64
26.	TOTAL DISBURSEMENTS THIS PERIOD (from	m Line 22)	0.00
27.	CASH ON HAND AT CLOSE OF REPORTING (subtract Line 26 from Line 25)		103539.64

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

FOR LINE NUMBER: (check only one)

PAGE

5

13a

OF

						130			
AME OF COMMITTEE (In Full) Gerson for Congress					Transa	ction ID : SC/10.4392			
LOAN SOURCE Full Name (Last,	First, Mi	ddle Initial)			Memo Item	Election: 2012			
Gerson, David, Adam, ,		,			j wemo item	rimary			
						General			
Mailing Address PO Box 1465						Other (specify)			
City		State	ZIP Coc	е					
Burnsville		MN	55337			Personal Funds of the Candidate			
Original Amount of Loan		Cumulative Pay	yment To	Date	Bal	ance Outstanding at Close of This Period			
16554	.96		7	0.00		16554.96			
TERMS Date Incurred		D	Date Due		Interest Rat				
<sup>M</sup> 05 <sup>M</sup> / <sup>D</sup> 29 <sup>D</sup> / Y Ž01Ž	Υ	M M / D D	/ Y 1/	1/2020 Y		0.00			
List All Endorsers or Guarantors	(if any) t	o Loan Source							
1. Full Name (Last, First, Middle In	,			Name of Em	ployer				
Mailing Address				Occupation					
			ŀ	Amount					
City	State	ZIP Code Guaranteed Outstanding:				7 7			
2. Full Name (Last, First, Middle Ini	2. Full Name (Last, First, Middle Initial)					Name of Employer			
Mailing Address				Occupation					
	T			Amount					
City	State	ZIP Code		Guaranteed Outstanding:		9			
3. Full Name (Last, First, Middle In	tial)			Name of Employer					
Mailing Address				Occupation					
	T			Amount					
City	City State ZIP Code			Guaranteed Outstanding:		9 9			
4. Full Name (Last, First, Middle In	<b>'</b>		Name of Employer						
Mailing Address				Occupation					
				Amount					
City State ZIP Code Guaranteed Outstanding:					9 9				
SUBTOTALS This Period This Page (c	ntional\								
TO TALE THIS FOR THIS FAGE (C	יףנוטוומו).					16554.96			
TOTALS This Period (last page in this	line only	y)			▶				
Carry outstanding balance only to LIN	NE 3, Sc	nedule D, for this	s line. If n	o Schedule	D, carry for	ward to appropriate line of Summary.			

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

PAGE 6
FOR LINE NUMBER: (check only one)

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	13b

				Detailed C	Janinary 1	age				13b
AME OF COMMITTEE (In Full)					Trans	action I	D : SC/10.43	65		
Gerson for Congress										
LOAN SOURCE Full Name	(Last, First, M	iddle Initial)			Memo Ite		tion: 2012			
Gerson, David, Adan	n, ,					×	Primary			
NA 12 A 1 I						-	General			
Mailing Address PO Box 1465							Other (spec	ify) ▼		
City		State	ZIP Code			×	Personal F	unds of the	Cano	didate
Burnsville		MN	55337				- Croonar r		<u></u>	
Original Amount of Loan		Cumulative Pa	ayment To Da	te	Ва	alance C	Outstanding a	at Close of T	This F	Period
, , ,	10000.00	,	, ,	0.00			,	1000	0.00	$\Box$
TERMS Date Incurred	i	I	Date Due		Interest Ra			Secure	d:	
M07 <sup>M</sup> / D19 <sup>D</sup> / Y	ž01ž <sup>Y</sup>	M M / D D	D / Y Y	IA <sup>Y</sup> Y		0.00	% (apr)	Yes	s x	No
List All Endorsers or Guar	antors (if any)	to Loan Source	)							
1. Full Name (Last, First, N	fiddle Initial)		N	ame of Em	ployer					
Mailing Address			С	ccupation						
			A	mount		_			=	
City	State	ZIP Code		uaranteed utstanding:		7	7	-		
2. Full Name (Last, First, Middle Initial)			N	ame of Em	ployer					
Mailing Address			С	ccupation						
				mount					$\overline{}$	
City	State	ZIP Code		uaranteed utstanding:		7			_	
3. Full Name (Last, First, M	iddle Initial)		N	Name of Employer						
Mailing Address			С	ccupation						
				mount					$\overline{}$	
City	State	ZIP Code	-	uaranteed utstanding:		7	7	-	_	
4. Full Name (Last, First, Middle Initial)			N	Name of Employer						
Mailing Address			С	ccupation						
			A	mount		_			_	
City	State	ZIP Code		uaranteed utstanding:	L.	7	7		_	
	1	'	•							
UBTOTALS This Period This	Page (optional)				▶		,	1000	0.00	
OTALS This Period (last page	e in this line on	ly)					4	4		
							,			
arry outstanding balance onl	y to LINE 3. So	hedule D, for thi	is line. If no	Schedule !	D, carry fo	rward t	o appropria	te line of S	umm	ıarv.

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

PAGE 7
FOR LINE NUMBER: (check only one)

13a

OF

						•				130
AME OF COMMITTEE (In Full) Gerson for Congress					Trans	saction I	D : SC/10.43	81		
LOAN SOURCE Full Name (Last, Finderson, David, Adam, ,  Mailing Address PO Box 1465	irst, Mid	ldle Initial)			Memo Ite	Elec	otion: 2012 Primary General Other (spec			
City		State MN	ZIP Co	de		×	Personal F	unds of t	he Can	didate
Burnsville			55337							
Original Amount of Loan	-	Cumulative Pay	ment To			alance (	Outstanding	-		Period
5000.0	00			0.00	)		,		5000.00	
TERMS Date Incurred		D	ate Due		Interest R (If none, er			Seci	ured:	
M07 <sup>M</sup> / D24 <sup>D</sup> / Y Ž01Ž	Y	M M / D D	/ Y	<sup>Y</sup> NA <sup>Y</sup>		0.00	% (apr)		Yes x	No
List All Endorsers or Guarantors (if	any) to	Loan Source								
1. Full Name (Last, First, Middle Ini	tial)			Name of Em	ployer					
Mailing Address				Occupation						
				Amount	_					
City	State	ZIP Code	Guaranteed Outstanding:		7					
2. Full Name (Last, First, Middle Initi	al)			Name of Employer						
Mailing Address				Occupation						
				Amount					_	
City	State	ZIP Code		Guaranteed Outstanding:		7	7			
3. Full Name (Last, First, Middle Initi	al)			Name of Employer						
Mailing Address				Occupation						
				Amount						
City	State	ZIP Code		Guaranteed Outstanding:		7				
4. Full Name (Last, First, Middle Initial)				Name of Employer						
Mailing Address			Occupation							
				Amount		-			_	
City	State	ZIP Code		Guaranteed Outstanding:		7	- 7	x		
CURTOTALS This Deviced This Dags (or	utional\				. [					$\overline{}$
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TOTALS This Period (last page in this I	ine only	·)			▶		7	,		
Carry outstanding balance only to LINI	E 3, Sch	edule D, for this	line. If	no Schedule	D, carry fo	orward t	to appropria	ate line o	f Summ	nary.

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

PAGE 8
FOR LINE NUMBER: (check only one)

13a

OF

		130				
AME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID: SC/10.4468				
LOAN SOURCE Full Name (Last, First, Gerson, David, Adam, ,  Mailing Address	Middle Initial)	☐ Memo Item				
PO Box 1465						
City	State	ZIP Code  Personal Funds of the Candidate				
Burnsville	MN	55337				
Original Amount of Loan 5.00	Cumulative Pa	yment To Date  Balance Outstanding at Close of This Period  0.00  5.00				
TERMS Date Incurred	Γ	late Due Interest Rate Secured:				
<sup>M</sup> 07 <sup>M</sup> / □24□ / Y Ž01Ž Y	M M / D D	/ YNAY Y 0.00 % (apr) Yes X No				
List All Endorsers or Guarantors (if an	y) to Loan Source					
1. Full Name (Last, First, Middle Initial)		Name of Employer				
Mailing Address		Occupation				
		Amount				
City	e ZIP Code	Guaranteed Outstanding:				
2. Full Name (Last, First, Middle Initial)		Name of Employer				
Mailing Address		Occupation				
		Amount				
City	e ZIP Code	Guaranteed Outstanding:				
3. Full Name (Last, First, Middle Initial)		Name of Employer				
Mailing Address		Occupation				
		Amount				
City	ZIP Code	Guaranteed Outstanding:				
4. Full Name (Last, First, Middle Initial)		Name of Employer				
Mailing Address		Occupation				
		Amount				
City	e ZIP Code	Guaranteed Outstanding:				
SUBTOTALS This Period This Page (option	INDICALS This Deviced This Dags (entions)					
SUBTOTALS This Period This Page (optional) 5.  TOTALS This Period (last page in this line only)						
Carry outstanding halance only to LIME 2	Schodula D. for thi	s line If no Schedule D. carry forward to appropriate line of Surrena				
Carry outstanding balance only to LINE 3,	Scriedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.				

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

PAGE 9
FOR LINE NUMBER: (check only one)

13a

OF

				3D		
AME OF COMMITTEE (In Full) Gerson for Congress			Transaction ID : SC/10.4128			
LOAN SOURCE Full Name (Last, First Gerson, David, Adam, ,  Mailing Address PO Box 1465	, Middle Initial)		☐ Memo Item			
	Ctata	710.0		_		
City Burnsville	State MN	ZIP C 5533	Y Personal Funds of the Candid	date		
Original Amount of Loan	Cumulati	ve Payment T	To Date Balance Outstanding at Close of This Pe	eriod		
5000.00		,	0.00 5000.00			
TERMS Date Incurred		Date Due	le Interest Rate Secured:			
M07 <sup>M</sup> / D26 <sup>D</sup> / Y Z01Z Y	M M /	D D / Y	Y YNAY Y 0.00	No		
List All Endorsers or Guarantors (if a	ny) to Loan So	ource				
1. Full Name (Last, First, Middle Initial	)		Name of Employer			
Mailing Address			Occupation			
			Amount			
City	te ZIP Co	de	Guaranteed Outstanding:			
2. Full Name (Last, First, Middle Initial)			Name of Employer			
Mailing Address			Occupation			
			Amount			
City	te ZIP Co	de	Guaranteed Outstanding:			
3. Full Name (Last, First, Middle Initial)			Name of Employer			
Mailing Address			Occupation			
			Amount			
City	te ZIP Co	Guaranteed Outstanding:				
4. Full Name (Last, First, Middle Initial)		Name of Employer				
Mailing Address			Occupation			
			Amount			
City	te ZIP Co	de	Guaranteed Outstanding:			
	UBTOTALS This Period This Page (optional)					
TOTALS This Period (last page in this line	only)					
Carry outstanding balance only to LINE 3	, Schedule D, f	or this line. I	If no Schedule D, carry forward to appropriate line of Summa	ry.		

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

FOR LINE NUMBER: (check only one)

PAGE 10

13a

OF

						130			
	ME OF COMMITTEE (In Full) Serson for Congress				Tran	saction ID : SC/10.4389			
Ц		F' 1 1 1 1	1 11 1 11 18			T			
	LOAN SOURCE Full Name (Last, Gerson, David, Adam, ,	First, Mic	ldle Initial)		☐ Memo Ite	em Election: 2012  X Primary			
						General			
	Mailing Address PO Box 1465					Other (specify)			
	City		State	ZIP Co	de	Personal Funds of the Candidate			
	Burnsville		MN	55337		reisonal runus of the Candidate			
	Original Amount of Loan		Cumulative Pay	yment To	Date E	Balance Outstanding at Close of This Period			
	5000	0.00			0.00	5000.00			
	TERMS Date Incurred		С	Date Due	Interest F (If none, e				
	M08M / D01D / Y Ž01Ž	Y	M M / D D	/ Y	<sup>Y</sup> na <sup>Y</sup> Y	0.00 % (apr) Yes X No			
	List All Endorsers or Guarantors	(if any) to	o Loan Source						
	1. Full Name (Last, First, Middle I	nitial)			Name of Employer				
	Mailing Address				Occupation				
					Amount				
	City State ZIP Code				Guaranteed Outstanding:	, , , , , , , , , , , , , , , , , , , ,			
	2. Full Name (Last, First, Middle In	itial)			Name of Employer				
	Mailing Address				Occupation				
					Amount				
	City State ZIP Code				Guaranteed Outstanding:				
	3. Full Name (Last, First, Middle In	itial)	'		Name of Employer				
	Mailing Address				Occupation				
					Amount				
	City	State	ZIP Code		Guaranteed Outstanding:	. , ,			
	4. Full Name (Last, First, Middle In	itial)	'		Name of Employer				
	Mailing Address				Occupation				
					Amount				
	City	State	ZIP Code		Guaranteed Outstanding:	7			
		<u> </u>	<u>'</u>						
SI	UBTOTALS This Period This Page (	optional)			······	5000.00			
T	OTALS This Period (last page in this	s line only	r)		······	, ,			
С	carry outstanding balance only to LI	NE 3, Sch	nedule D, for this	s line. If	no Schedule D, carry f	forward to appropriate line of Summary.			
	<del>-</del>		<u> </u>						

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

FOR LINE NUMBER: (check only one)

PAGE 11

13a

OF

		130			
AME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4129			
LOAN SOURCE Full Name (Last, First, Gerson, David, Adam, ,  Mailing Address PO Box 1465	Middle Initial)	☐ Memo Item  Election: 2012    ★ Primary   General   Other (specify)   ▼			
City	State	ZIP Code			
Burnsville	MN	55337 Personal Funds of the Candidate			
Original Amount of Loan	Cumulative Pa	rment To Date Balance Outstanding at Close of This Period			
5000.00		0.00 5000.00			
TERMS Date Incurred	]	ate Due Interest Rate Secured: (If none, enter 0)			
M08 <sup>M</sup> / D10 <sup>D</sup> / Y 2012 Y	M M / D D	/ Y YNAY Y 0.00 % (apr) Yes ▼ No			
List All Endorsers or Guarantors (if an	y) to Loan Source				
1. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
		Amount			
City	e ZIP Code	Guaranteed Outstanding:			
2. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
		Amount			
City	ZIP Code	Guaranteed Outstanding:			
3. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
		Amount			
City	ZIP Code	Guaranteed Outstanding:			
4. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
		Amount			
City	ZIP Code	Guaranteed Outstanding:			
	UBTOTALS This Period This Page (optional)				
TOTALS This Period (last page in this line	only)	······································			
Carry outstanding balance only to LINE 3,	Schedule D, for thi	line. If no Schedule D, carry forward to appropriate line of Summary.			

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

PAGE 12
FOR LINE NUMBER: (check only one)

13a

List All Endorsers or Guarantors (if any) to Loan Source  1. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount Guaranteed Outstanding:  2. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount Guaranteed Outstanding:  Occupation  Amount Guaranteed Outstanding:  3. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount Guaranteed Outstanding:  3. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:  Name of Employer  Occupation  Amount Guaranteed Outstanding:  Name of Employer  Occupation  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:  Name of Employer  Occupation  Amount Amount Outstanding:  Amount Occupation  Amount Amount Outstanding:  Amount Occupation  Amount Amount Amount Occupation  Amount Amount Amount Occupation  Amount Amount					Detailed Garrina	y rage			13b
LOAN SOURCE Full Name (Last, First, Middle Initial)  Gerson, David, Adam, ,  Mailing Address PO Box 1465  City  Bumsville  State  City  Date Incurred  City  List All Endorsers or Guarantors (if any) to Loan Source  1. Full Name (Last, First, Middle Initial)  Mailing Address  City  State  ZIP Code  MN  State  ZIP Code  MN  State  Date Due  Interest Rate (if none, enter 0) (if none, enter 0)  Wes  Amount  Guaranteed  Outstanding:  2. Full Name (Last, First, Middle Initial)  Mailing Address  City  State  ZIP Code  Outstanding:  Amount  Guaranteed  Outstanding:  3. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount  Guaranteed  Outstanding:  Amount  City  State  ZIP Code  Outstanding:  Amount  City  State  ZIP Code  Outstanding:  Amount  Outstanding:  Amount  City  Name of Employer  Occupation  Amount  Outstanding:  Amount					Tra	ansaction I	D : SC/10.4470		
Gerson, David, Adam, ,  Mailing Address PO Box 1465  City Burnsville  Original Amount of Loan  Cumulative Payment To Date  Balance Outstanding at Close of This in the Card (if none, enter 0)  TERMS  Date Incurred  Date Due  Interest Rate (if none, enter 0)  Name of Employer  List All Endorsers or Guarantors (if any) to Loan Source  1. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount  City  State  ZIP Code  Outstanding:  Amount  Guaranteed  Outstanding:  3. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount  City  State  ZIP Code  Outstanding:  Amount  Guaranteed  Outstanding:  Amount  City  State  ZIP Code  Outstanding:  Amount  Guaranteed  Outstanding:  Amount  City  State  ZIP Code  Outstanding:  Amount  Guaranteed  Outstanding:  Amount  City  State  ZIP Code  Outstanding:  Amount  Guaranteed  Outstanding:  Amount  City  State  ZIP Code  Outstanding:  Amount  Occupation  Amount  Amount  Outstanding:						I			
Mailing Address PO Box 1486  City Burnsville  City State Burnsville  City State Signary  City State Signary  City State Signary  Coriginal Amount of Loan  Cumulative Payment To Date Balance Outstanding at Close of This Interest Rate (If none, enter 0)  Mo8™ / 210° / Y 2012 Y M M M / D D / Y NAY Y 0.00  TERMS Date Incurred  Date Due Interest Rate (If none, enter 0)  Mo8™ / 210° / Y 2012 Y M M M / D D / Y NAY Y 0.00  Mo8™ / D D M M M M / D D M M M M M M M M M M		•	idle Initial)		☐ Memo		-		
Mailing Address   Po Box 1465	Gerson, David, Ad	lam, ,				<b>  X</b>	•		
PO Box 1465	Mailing Address							_	
Burnsville  MN 55337  R Personal Funds of the Canc  Original Amount of Loan  Cumulative Payment To Date  Balance Outstanding at Close of This  6,00  TERMS  Date Incurred  Date Due  Interest Rate (If none, enter 0)  Work  Malling Address  Occupation  Amount  City  State  ZIP Code  Occupation  Amount  Guaranteed Outstanding:  3. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount  Guaranteed Outstanding:  3. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount  Guaranteed Outstanding:  3. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount  Guaranteed Outstanding:  3. Full Name (Last, First, Middle Initial)  Name of Employer  Occupation  Amount  Guaranteed Outstanding:  3. Full Name (Last, First, Middle Initial)  Name of Employer  Occupation  Amount  Guaranteed Outstanding:  Occupation  Amount  Amount	PO Box 1465						Other (speerly)	<u> </u>	
Original Amount of Loan  Cumulative Payment To Date  Balance Outstanding at Close of This    6.00  TERMS  Date Incurred  Date Due  Interest Rate (If none, enter 0)  We (apr)  Wes  List All Endorsers or Guarantors (if any) to Loan Source  1. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount Guaranteed Outstanding:  2. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount Guaranteed Outstanding:  3. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount Guaranteed Outstanding:  3. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount Guaranteed Outstanding:  3. Full Name (Last, First, Middle Initial)  Name of Employer  Amount Guaranteed Outstanding:  3. Full Name (Last, First, Middle Initial)  Name of Employer  Amount Guaranteed Outstanding:  3. Full Name (Last, First, Middle Initial)  Name of Employer  Amount Guaranteed Outstanding:  3. Full Name (Last, First, Middle Initial)  Name of Employer  Amount Guaranteed Outstanding:  3. Full Name (Last, First, Middle Initial)  Name of Employer  Amount Guaranteed Outstanding:  Occupation  Amount Amount Guaranteed Outstanding:  Occupation  Amount Amount Amount Guaranteed Outstanding:  Occupation  Amount Amount Amount Occupation  Amount Occupation  Amount Occupation  Amount Occupation  Amount Occupation  Amount Occupation					)	×	Personal Funds	s of the Ca	ındidate
TERMS Date Incurred Date Due Interest Rate (If none, enter 0) Secured:    MOSM	Burnsville		MN	55337			]		
TERMS Date Incurred Date Due Interest Rate (If none, enter 0) Secured:    M	Original Amount of Loa	า	Cumulative Pa	yment To D	ate	Balance (	Outstanding at Cl	ose of This	s Period
TERMS Date Incurred Date Due Interest Rate (If none, enter 0) Secured:    M 08		6.00			0.00			6.0	10
List All Endorsers or Guarantors (if any) to Loan Source  1. Full Name (Last, First, Middle Initial)  Mailing Address  City  State  ZIP Code  Occupation  Amount Guaranteed Outstanding:  City  State  ZIP Code  Occupation  Amount Guaranteed Outstanding:  2. Full Name (Last, First, Middle Initial)  Name of Employer  Occupation  Amount Guaranteed Outstanding:  7. Ves  Amount Guaranteed Outstanding:  Occupation  Amount Guaranteed Outstanding:  Occupation  Amount Guaranteed Outstanding:  7. Ves  Amount Guaranteed Outstanding:  Occupation  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:  Occupation  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:  Amount Outstanding:  Name of Employer  Occupation  Amount Amount Outstanding:  Occupation  Amount Outstanding:  Occupation  Amount Outstanding:  Occupation  Amount Outstanding:  Occupation  Amount Amount Outstanding:  Occupation  Amount Occupation  Amount Occupation  Amount Occupation  Amount		0.00	7	7	0.00		7 7	0.0	0
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Mailing Address  City  State  ZIP Code  Guaranteed Outstanding:  Name of Employer  Mailing Address  City  State  ZIP Code  Outstanding:  Name of Employer  Amount Guaranteed Outstanding:  4. Full Name (Last, First, Middle Initial)  Name of Employer  Name of Employer  Mailing Address  Occupation  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:  Amount Amount Amount Amount Amount	City	State	ZIP Code	I .		7	,	-	
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3. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount Guaranteed Outstanding:  4. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Name of Employer  Name of Employer  Occupation  Amount  Amount  Amount  Amount	C:to c	Ctata	ZID Code						
Mailing Address  City  State  ZIP Code  Guaranteed Outstanding:  Name of Employer  Mailing Address  Occupation  Amount  Guaranteed Outstanding:  Name of Employer  Amount	City	State	ZIP Code		Outstanding:	7	7	- W	
City State ZIP Code Guaranteed Outstanding:  4. Full Name (Last, First, Middle Initial) Name of Employer  Mailing Address Occupation  Amount  Amount	3. Full Name (Last, First	, Middle Initial)			Name of Employer				
City State ZIP Code Guaranteed Outstanding:  4. Full Name (Last, First, Middle Initial) Name of Employer  Mailing Address Occupation  Amount	Mailing Address				Occupation				
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Mailing Address  Occupation  Amount				'	Outstanding:	,	, , , , , ,		
Amount	4. Full Name (Last, First, Middle Initial) Name of Employer								
	Mailing Address				Occupation				
				H	A mount				
L City State 17IP Code 1 Guaranteed	City	State	ZIP Code		Guaranteed				
Outstanding:	Oity	Otato	Zii Oodc			7	7		
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6.00							7	0.0	<u> </u>
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Use separate schedule(s) for each category of the Detailed Summary Page

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Transaction ID: SC/10.4130 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 1000.00 0.00 1000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D17D <sup>M</sup>80<sup>M</sup> Ž01Ž YNA Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 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.

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AME OF COMMITTEE (In Full)  Gerson for Congress					Transa	oction ID : SC/10.4131
LOAN SOURCE Full Name (Last,	First, Mid	ddle Initial)			Memo Item	
Gerson, David, Adam, ,	Gerson, David, Adam, ,					Primary General
Mailing Address PO Box 1465						Other (specify)
City		State	ZIP Cod	de		Personal Funds of the Candidat
Burnsville		MN	55337			1 ersonal runus or the Canadat
Original Amount of Loan		Cumulative Pay	yment To	Date	Bal	lance Outstanding at Close of This Period
1000	.00	7		0.00		1000.00
TERMS Date Incurred		D	Date Due		Interest Rat (If none, enter	
M08 <sup>M</sup> / D20 <sup>D</sup> / Y Ž01Ž	Υ	M M / D D	/ Y	YNA Y	(	0.00 % (apr) Yes X No
List All Endorsers or Guarantors	(if any) t	o Loan Source				
1. Full Name (Last, First, Middle II	nitial)			Name of Em	ployer	
Mailing Address				Occupation		
011				Amount Guaranteed		
City	State	ZIP Code		Outstanding:		7
2. Full Name (Last, First, Middle In	itial)	·		Name of Em	ployer	
Mailing Address				Occupation		
City	State	ZIP Code Guarar		Amount Guaranteed Outstanding:		7
3. Full Name (Last, First, Middle Initial)				Name of Em		
Mailing Address				Occupation		
				Amount		
City	State	ZIP Code		Guaranteed Outstanding:		7
4. Full Name (Last, First, Middle In	itial)			Name of Em	ployer	
Mailing Address				Occupation		
C:h	Ctata	ZID Code		Amount Guaranteed		
City	State	ZIP Code		Outstanding:		9 9
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		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4442
LOAN SOURCE Full Name (Last, First, N	liddle Initial)	Floation: 2044
Gerson, David, Adam, ,	Memo Item  Election: 2014    x   Primary   General	
Mailing Address PO Box 1465	Other (specify) ▼	
City	State	ZIP Code  Second Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
479.33	,	0.00 479.33
TERMS Date Incurred		Date Due Interest Rate Secured: (If none, enter 0)
M02M / D22D / Y Ž013 Y	M M / D D	/ Y 1/Ĭ/20Ž0 Y 0.00
List All Endorsers or Guarantors (if any)	to Loan Source	
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	·	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
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NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4444
LOAN SOURCE Full Name (Last, First, I	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item    Clection: 2014	
Mailing Address PO Box 1465	Other (specify)	
City	State	ZIP Code  F5007  Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
3000.00	,	0.00 3000.00
TERMS Date Incurred	[	Date Due Interest Rate Secured: (If none, enter 0)
M02M / D25D / Y Ž01Š Y	M M / D D	7
List All Endorsers or Guarantors (if any	) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	<u> </u>	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	!	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
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	ME OF COMMITTEE (In Full) Serson for Congress				Trans	saction ID : SC/10.4464
Ц		=				
	LOAN SOURCE Full Name (Last, Gerson, David, Adam, ,	First, Mic	ldle Initial)		☐ Memo Ite	Election: 2014  X Primary
	Mailing Address PO Box 1465					General Other (specify) ▼
	City		State	ZIP Co	de	
	Burnsville		MN	55337		Personal Funds of the Candidate
	Original Amount of Loan		Cumulative Pay	yment To	Date B	alance Outstanding at Close of This Period
	3000	0.00	,		0.00	3000.00
	TERMS Date Incurred		C	ate Due	Interest R (If none, er	
	<sup>M</sup> 03 <sup>M</sup> / D26 <sup>D</sup> / Y Ž013	Υ	M M / D D	/ Y	/Ť/20Ž0 <sup>Y</sup>	0.00 % (apr) Yes X No
	List All Endorsers or Guarantors	(if anv) to	o Loan Source			
	1. Full Name (Last, First, Middle I				Name of Employer	
	Mailing Address				Occupation	
					Amount	
	City	State	ZIP Code		Guaranteed Outstanding:	
	2. Full Name (Last, First, Middle In	itial)			Name of Employer	
	Mailing Address				Occupation	
					Amount	
	City	State	ZIP Code		Guaranteed Outstanding:	7
	3. Full Name (Last, First, Middle In	itial)			Name of Employer	
	Mailing Address				Occupation	
		·			Amount	
	City	State	ZIP Code		Guaranteed Outstanding:	7
	4. Full Name (Last, First, Middle In	itial)			Name of Employer	
	Mailing Address				Occupation	
		_			Amount	
	City	State	ZIP Code		Guaranteed Outstanding:	7
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Transaction ID: SC/10.4502 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 4000.00 0.00 4000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D 18D M 04M ž013 1/1/20 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 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.

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NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4545
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item    Clection: 2014	
Mailing Address PO Box 1465	Other (specify)	
City	State	ZIP Code  F5007  Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
4000.00		0.00 4000.00
TERMS Date Incurred	[	Date Due Interest Rate Secured: (If none, enter 0)
M 05M / D13D / Y Z013 Y	M M / D D	/ Y 1Ў1/2Ŏ Y 0.00
List All Endorsers or Guarantors (if any	) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	·	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
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NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4591
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item    Clection: 2014	
Mailing Address PO Box 1465	Other (specify)	
City	State	ZIP Code  F5007  Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
5000.00	,	0.00 5000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M06 <sup>M</sup> / D10 <sup>D</sup> / Y Ž013 Y	M M / D D	/ Y 1/1/20 Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any	) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	·	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
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NAME OF COMMITTEE (In Full) Gerson for Congress			Trans	saction ID : SC/10.4622	
9					
LOAN SOURCE Full Name (Last, First, Mic	ddle Initial)		☐ Memo Ite	m Election: 2014	
Gerson, David, Adam, ,				x Primary	
				General	
Mailing Address PO Box 1465			Other (specify)		
City	State	ZIP Code	)	Personal Funds of the	Candidate
Burnsville	MN	55337		Fersonal Funds of the	Carididate
Original Amount of Loan	Cumulative Page	yment To D	ate B	alance Outstanding at Close of	This Period
131.12			0.00	13	31.12
9 9	9	9	100	, ,	
TERMS Date Incurred		Date Due	Interest R (If none, er		d:
M06 <sup>M</sup> / D30 <sup>D</sup> / Y Z013 Y	M M / D D	/ Y 1	/1/2Ŏ <sup>Y</sup>	0.00 % (apr) Ye	s X No
List All Endorsers or Guarantors (if any) t	o Loan Source				
1. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
			Amount		
City State	ZIP Code		Guaranteed		
Otty	Zii Gode		Outstanding:	7	
2. Full Name (Last, First, Middle Initial)		1	Name of Employer		
Mailing Address		(	Occupation		
			Amount		
City	ZIP Code		Guaranteed  Outstanding:		
3. Full Name (Last, First, Middle Initial)		!	Name of Employer		
Mailing Address		(	Occupation		
			Amount		_
City State	ZIP Code		Guaranteed Outstanding:	.,,	
4. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
			Amount		
City State	ZIP Code		Guaranteed		
Oity	Zii Oodc		Outstanding:	7	
SUBTOTALS This Period This Page (optional)			••••••••••••••••••••••••••••••••••••••	13	1.12
TOTALS This Period (last page in this line only	y)			7	
Carry outstanding balance only to LINE 3, Sci	nedule D. for this	s line. If no	Schedule D. carry fo	orward to appropriate line of S	ummarv.

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

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OF

		130
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5169
	1-11- 1	T =
LOAN SOURCE Full Name (Last, First, Mic Gerson, David, Adam, ,	aaie Initial)	Memo Item Election: 2014  Primary  Output
Mailing Address PO Box 1465		General Other (specify) ▼
City	State	ZIP Code  ** Personal Funds of the Candidate
Burnsville	MN	55337 Personal Funds of the Candidate
Original Amount of Loan	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period
5000.00		0.00 5000.00
TERMS Date Incurred	D	ate Due Interest Rate Secured: (If none, enter 0)
M 07M / D 05D / Y Z 013 Y	M M / D D	/ Y 1/1/20 Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any) to	o Loan Source	
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	1	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)		5000.00
TOTALS This Period (last page in this line only	/)	······································
Carry outstanding balance only to LINE 3, Sch	nedule D, for this	line. If no Schedule D, carry forward to appropriate line of Summary.

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

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5170
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	☐ Memo Item    Clection: 2014   ★ Primary   General	
Mailing Address PO Box 1465	Other (specify)	
City	State	ZIP Code  Scool Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
5000.00		0.00 5000.00
TERMS Date Incurred	С	Date Due Interest Rate Secured:
M07 <sup>M</sup> / D29 <sup>D</sup> / Y Ž013 Y	M M / D D	/
List All Endorsers or Guarantors (if any	) to Loan Source	
1. Full Name (Last, First, Middle Initial)	,	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	,	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (options		
SOBIOTALS THIS PERIOD THIS Page (OPTIONS	11)	5000.00
TOTALS This Period (last page in this line of	only)	······································
Carry outstanding balance only to LINE 3,	Schedule D, for this	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

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AME OF COMMITTEE (In Full) Gerson for Congress			•	Transac	ction ID : SC/10.5172	
LOAN SOURCE Full Name (Last, Gerson, David, Adam, ,	First, Mid	dle Initial)		☐ Memo Item	Election: 2014  x Primary General	
Mailing Address PO Box 1465					Other (specify) ▼	
City		State	ZIP Code		✗ Personal Funds of the Candidate	
Burnsville Original Amount of Loan		MN  Cumulative Pay	ment To Date	Rala	ance Outstanding at Close of This Period	
5000	0.00	Guinalative 1 ay	ment to bate	0.00	5000.00	
TERMS Date Incurred		D	ate Due	Interest Rate (If none, enter		
M08 <sup>M</sup> / D19 <sup>D</sup> / Y Ž013	Y	M M / D D	/ Y 1ў1/2ŏ		00 % (apr) Yes No	
List All Endorsers or Guarantors	(if any) to	Loan Source				
1. Full Name (Last, First, Middle I	nitial)		Name	of Employer		
Mailing Address			Occup	oation		
City	State	ZIP Code	Amou Guara	nteed		
2. Full Name (Last, First, Middle In	itial)			Outstanding:  Name of Employer		
Mailing Address			Occup	pation		
			Amou			
City	State	ZIP Code	Guara Outsta	anding:	7 7 7 7	
3. Full Name (Last, First, Middle In	itial)		Name	of Employer		
Mailing Address			Occup	oation		
City	State	ZIP Code	Amou Guara Outsta		, ,	
4. Full Name (Last, First, Middle In	itial)		Name	of Employer		
Mailing Address			Occup	oation		
City	State	ZIP Code	Amou Guara Outsta		7	
SUBTOTALS This Period This Page (optional)						
FOTALS This Period (last page in this	line only	)		······	, , ,	
Carry outstanding balance only to LII	NE 3, Sch	edule D, for this	line. If no Sch	edule D, carry for	ward to appropriate line of Summary.	

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

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									13	D
AME OF COMMITTEE (In Full) Gerson for Congress					Trans	saction I	ID : SC/10.51	73		
LOAN SOURCE Full Name (Last, First Gerson, David, Adam, ,	st, Midd	le Initial)			Memo Ite	Elec	ction: 2014 Primary General Other (spec			
PO Box 1465										
City	S	State	ZIP Co	de		×	Personal F	unds of t	he Candid	ate
Burnsville		MN	55337	_						
Original Amount of Loan 5000.00	-	Cumulative Pay	ment To	0.00	-	alance (	Outstanding		of This Pe 5000.00	riod
TERMS Date Incurred		Da	ate Due		Interest R			Sec	ured:	
M09M / D12D / Y 2013 Y	М	M / D D	/ Y	1)1/20 Y	(II florie, el	0.00	% (apr)		Yes 🗶	No
List All Endorsers or Guarantors (if a	any) to	Loan Source								
1. Full Name (Last, First, Middle Initia	al)			Name of Em	ıployer					
Mailing Address				Occupation						
				Amount	-	_				
City	ate	ZIP Code		Guaranteed Outstanding:	L	,	7			
2. Full Name (Last, First, Middle Initial	l)	I		Name of Employer						
Mailing Address				Occupation						
				Amount	1	-				
City	ate	ZIP Code		Guaranteed Outstanding:		7	7			
3. Full Name (Last, First, Middle Initial	1)			Name of Employer						
Mailing Address				Occupation						
		1		Amount					$\overline{}$	
City	ate	ZIP Code		Guaranteed Outstanding:		7	7			
4. Full Name (Last, First, Middle Initial	l)	•		Name of Em	ployer					
Mailing Address				Occupation						
		1		Amount						
City	ate	ZIP Code		Guaranteed Outstanding:		-	7			
SUBTOTALS This Period This Page (optional)										
TOTALS This Period (last page in this lin	ne only) .						,	7		]
Carry outstanding balance only to LINE	3, Sche	dule D, for this	line. If	no Schedule	D, carry fo	orward	to appropria	ite line o	f Summar	у.

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

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5174
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item    Election: 2014	
Mailing Address PO Box 1465	Other (specify)	
City	State	ZIP Code  F5007  Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
3000.00		0.00 3000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M09M / D30D / Y 2013 Y	M M / D D	/ Y 1ÿ1/2ŏ Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any	) to Loan Source	
Full Name (Last, First, Middle Initial)	,	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	•	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
CURTOTAL C This Deviced TV D	-0	
SUBTOTALS This Period This Page (options	ازاد	3000.00
TOTALS This Period (last page in this line of	only)	
Carry outstanding balance only to LINE 3,	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

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45

Transaction ID: SC/10.5202 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) M 10<sup>M</sup> 0.00 D04D ž013 1/1/20 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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		Detailed Carrillary	13b
NAME OF COMMITTEE (In Full) Gerson for Congress		Trans	action ID : SC/10.5203
9			
LOAN SOURCE Full Name (Last, First,	Middle Initial)	☐ Memo Iter	m Election: 2014
Gerson, David, Adam, ,		<b>x</b> Primary	
			General
Mailing Address PO Box 1465			Other (specify)
City	State	ZIP Code	Personal Funds of the Candidate
Burnsville	MN	55337	1 ersonal runus of the Candidate
Original Amount of Loan	Cumulative Pa	yment To Date Ba	alance Outstanding at Close of This Period
5000.00	T	0.00	5000.00
, , , ,		3.00	, , , ,
TERMS Date Incurred	Г	Date Due Interest Ra (If none, ent	
M10 <sup>M</sup> / P16 <sup>D</sup> / Y Z013 Y	M M / D D	/ Y 1ў1/2Ŏ Y	0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any	/) to Loan Source		
1. Full Name (Last, First, Middle Initial)	,	Name of Employer	
Mailing Address		Occupation	
		Amazinat	
011	710.0.1	Amount Guaranteed	
City	ZIP Code	Outstanding:	9
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City	ZIP Code	Guaranteed Outstanding:	, , , , , , , , ,
3. Full Name (Last, First, Middle Initial)	•	Name of Employer	
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	7
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		A	
City State	ZIP Code	Amount Guaranteed	
City	Zii Gode	Outstanding:	7
	•		
SUBTOTALS This Period This Page (option	al)	······	5000.00
TOTALS This Period (last page in this line of	only)		
Carry outstanding balance only to LINE 3,	Schedule D. for thi	s line. If no Schedule D. carry fo	rward to appropriate line of Summary
Jany Juistanung Balance Unit to Line 3.	JULIEUUIE D, IUI UII	o mile. Il lio ociiduule di cally lo	i waia lu appiupiale ille ui Julillialv.

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

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5204
LOAN SOURCE Full Name (Last, First, I	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item    Clection: 2014	
Mailing Address PO Box 1465	Other (specify)	
City	State	ZIP Code  F5007  Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
5000.00	l ,	0.00 5000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M10M / D23D / Y Ž01Š Y	M M / D D	/ Y 1ÿ1/2ŏ Y 0.00
List All Endorsers or Guarantors (if any	) to Loan Source	
Full Name (Last, First, Middle Initial)	,	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
	I	Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
CURTOTAL C. This Deviced This Device (entires	Λ.	
SUBTOTALS This Period This Page (optional		5000.00
TOTALS This Period (last page in this line of	nly)	······································
Carry outstanding balance only to LINE 3, 5	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5205
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item    Clection: 2014	
Mailing Address PO Box 1465	Other (specify)	
City	State	ZIP Code  F5007  Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
5000.00	,	0.00 5000.00
TERMS Date Incurred	[	Date Due Interest Rate Secured: (If none, enter 0)
M11M / D04D / Y Ž01Š Y	M M / D D	/ Y 1//1/20 Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any	) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
CURTOTAL C. This Desired This Desire (asking		
SUBTOTALS This Period This Page (optional	11)	5000.00
TOTALS This Period (last page in this line of	only)	······
Carry outstanding balance only to LINE 3,	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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		De	etailed Summary	y Fage	13b
AME OF COMMITTEE (In Full)		•	Tra	ansaction ID : SC/10.5206	
Gerson for Congress					
	LOAN SOURCE Full Name (Last, First, Middle Initial)    Memo Item   Election: 2014				
Gerson, David, Adam, ,				Primary General	
Mailing Address PO Box 1465				Other (specify) ▼	
City	State	ZIP Code			
Burnsville	MN	55337		Personal Funds of the Ca	ndidate
Original Amount of Loan	Cumulative Pay	yment To Date		Balance Outstanding at Close of This	s Period
4000.00	2		0.00	4000.0	0
TERMS Date Incurred	D	Date Due	Interest (If none,	: Rate Secured: enter 0)	
M11M / D13D / Y Ž013 Y	M M / D D	/ Y 1ÿ1/2ŏ	Y	0.00 % (apr) Yes	× No
List All Endorsers or Guarantors (if any)	to Loan Source				
1. Full Name (Last, First, Middle Initial)		Name	e of Employer		
Mailing Address		Occu	pation		
		Amou	unt		
City	ZIP Code		anding:		
2. Full Name (Last, First, Middle Initial)		Name	e of Employer		
Mailing Address		Occu	pation		
	1	Amou	unt		
City	ZIP Code		anding:	y y y	
3. Full Name (Last, First, Middle Initial)		Name	Name of Employer		
Mailing Address		Occu	pation		
		Amou	unt		
City	ZIP Code		anding:	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
4. Full Name (Last, First, Middle Initial)	·	Name	e of Employer		
Mailing Address		Occu	pation		
		Amou			
City	ZIP Code		anteed anding:	9 9	
SUBTOTALS This Period This Page (optional)					
FOTALS This Period (last page in this line on	ly)		······•	, , , , , , , , ,	
Carry outstanding balance only to LINE 3, So	chedule D, for this	s line. If no Sch	nedule D, carry	r forward to appropriate line of Sum	ımary.

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FOR LINE NUMBER: (check only one)

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5207
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item    Clection: 2014	
Mailing Address PO Box 1465	Other (specify)	
City	State	ZIP Code  F5007  Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
3000.00	,	0.00 3000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M11M / D19D / Y 2013 Y	M M / D D	/ Y 1/√1/20 Y 0.00
List All Endorsers or Guarantors (if any)	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	1	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	<b>'</b>	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional	)	0000 00
		, , , , , , , , , , , , , , , , , , , ,
TOTALS This Period (last page in this line or	ıly)	<b>—————————————————————————————————————</b>
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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OF

NAME OF COMMITTEE (In F Gerson for Congress			Transa	action ID : SC/10.5208
Gerson, David, Ada	•	Idle Initial)	☐ Memo Iter	n Election: 2014  x Primary General
Mailing Address PO Box 1465	Mailing Address PO Box 1465			
City		State	ZIP Code	Personal Funds of the Candidate
Burnsville		MN	55337	
Original Amount of Loan		Cumulative Page		lance Outstanding at Close of This Period
7 7	4000.00	7	0.00	4000.00
TERMS Date Incur	rred		Date Due Interest Ra	
M11M / D29D /	<sup>Y</sup> Ž013 <sup>Y</sup>	M M / D D	/ Y 1)1/20 Y	0.00 % (apr) Yes X No
List All Endorsers or Gu	uarantors (if any) to	o Loan Source		
1. Full Name (Last, First	, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed	
City	Sidle	ZIP Code	Outstanding:	9 9
2. Full Name (Last, First,	Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed	
•			Outstanding:	7
3. Full Name (Last, First,	Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed	
		Zii Gode	Outstanding:	9
4. Full Name (Last, First,	Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed	
Oity	State	ZIF Code	Outstanding:	9 9
SUBTOTALS This Period Th	nis Page (optional)			4000.00
TOTALS This Period (last pa	age in this line only	·) ·······		7 7 7
Corns outstanding halans	only to LINE 2. Cal	odulo D. for this	a line. If no Cohedule D. serve fo	www.d to oppropriate line of Commercial
Carry outstanging balance	only to LINE 3. Sch	ieauie D, for this	s line. It no Schedule D, carry to	rward to appropriate line of Summary.

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5209
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item    Election: 2014	
Mailing Address PO Box 1465	Other (specify)	
City	State	ZIP Code  F5007  Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
4000.00	l ,	0.00 4000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured:
M12M / D09D / Y Ž01Š Y	M M / D D	/ Y 1ÿ1/2ŏ Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any)	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
2. Full Name (Last, First, Middle Initial)	1	Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City State	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	!	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optiona	ı)	
COSTOTALO TINO I GNOW TINO Page (optiona	y	4000.00
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Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

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Transaction ID: SC/10.5210 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 3000.00 0.00 3000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) M 12M 0.00 <sup>D</sup>16<sup>D</sup> ž013 1/1/20 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 3000.00 TOTALS This Period (last page in this line only) ..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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Transaction ID: SC/10.5542 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 3000.00 0.00 3000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D08D M01M ž014 1/1/20 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 3000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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Transaction ID: SC/10.5543 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 <sup>D</sup>16<sup>D</sup> M 01M ž014 1/1/20 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only) ..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5544
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item    Clection: 2014	
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code  F5007  Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
10000.00	l,	0.00 10000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
<sup>M</sup> 02 <sup>M</sup> / <sup>D</sup> 26 <sup>D</sup> / Y Ž014 Y	M M / D D	/ Y 1/√1/20 Y 0.00
List All Endorsers or Guarantors (if any)	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	1	Name of Employer
Mailing Address		Occupation
0.44	710.0-4-	Amount Guaranteed
City State	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)  Name of Employer		
Mailing Address		Occupation
Tau .		Amount Guaranteed
City	ZIP Code	Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address		Occupation
	1	Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optiona		
SOBTOTALS This Feriod This Page (optional	······································	10000.00
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Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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OF

		100	
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5587	
LOAN SOURCE Full Name (Last, First, N	liddle Initial)	Election: 0044	
Gerson, David, Adam,	☐ Memo Item		
Mailing Address PO Box 1465	Other (specify)		
City	State	ZIP Code  F5007  Personal Funds of the Candidate	
Burnsville	MN	55337	
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period	
391.00		0.00 391.00	
TERMS Date Incurred	]	Date Due Interest Rate Secured: (If none, enter 0)	
M10M / D28D / Y Ž014 Y	M M / D D	/ Y YNAY Y 0.00 % (apr) Yes X No	
List All Endorsers or Guarantors (if any)	to Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City	ZIP Code	Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)	'	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	ZIP Code	Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Initial)  Name of Employer			
Mailing Address		Occupation	
		Amount	
City	ZIP Code	Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	
SUBTOTALS This Period This Page (optional	)		
CODICIALO IIIIS FERIOU IIIIS FAGE (OPLIONAL	,	391.00	
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Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.	

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AME OF COMMITTEE (In Full) Berson for Congress					Transa	ction ID : SC/10.5608	
LOAN SOURCE Full Name (Last,	First, Mi	ddle Initial)			Memo Item	Election: 2016	
Gerson, David, Adam, ,					_ Memo item	Primary  General	
Mailing Address PO Box 1465						Other (specify)	
City	State ZIP Co			de		X Personal Funds	of the Candidate
Burnsville		MN	55337			T orderial r amae	
Original Amount of Loan		Cumulative Pag	yment To	Date	Bal	ance Outstanding at Clo	se of This Period
350	0.00	9		0.00	0	, ,	3500.00
TERMS Date Incurred		С	Date Due		Interest Rat (If none, ente		Secured:
M03M / D04D / Y 2015	Υ	M M / D D	/ Y	YNA Y		0.00	Yes X No
List All Endorsers or Guarantors	(if any)	to Loan Source					
1. Full Name (Last, First, Middle	Initial)			Name of Em	nployer		
Mailing Address				Occupation			
				Amount			
City	State	ZIP Code		Guaranteed Outstanding:	. L	, ,	/W
2. Full Name (Last, First, Middle II	nitial)	<u> </u>		Name of Em	nployer		
Mailing Address				Occupation			
				Amount			
City	State	e ZIP Code Guaranteed Outstanding:			-		
3. Full Name (Last, First, Middle Initial)			Name of Employer				
Mailing Address				Occupation			
				Amount			
City	State	ZIP Code		Guaranteed Outstanding:	:	7	
4. Full Name (Last, First, Middle II	nitial)			Name of Em	nployer		
Mailing Address				Occupation			
				Amount			
City	State	ZIP Code		Guaranteed Outstanding:		7	-
SUBTOTALS This Period This Page	(optional)				Г		3500.00
						7	3500.00
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Carry outstanding balance only to L	INE 3, Sc	hedule D, for this	s line. If ı	no Schedule	D, carry for	ward to appropriate line	e of Summary.

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OF

		100	
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5867	
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2016	
Gerson, David, Adam, ,	Memo Item    Election: 2016		
Mailing Address PO Box 1465		Other (specify)	
City	State	ZIP Code  Second Personal Funds of the Candidate	
Burnsville	MN	55337	
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period	
5000.00		0.00 5000.00	
TERMS Date Incurred	]	Date Due Interest Rate Secured: (If none, enter 0)	
M08M / D12D / Y Ž01Š Y	M M / D D	/ Y YNA Y O.00 % (apr) Yes X No	
List All Endorsers or Guarantors (if any)	to Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City	ZIP Code	Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)	1	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	ZIP Code	Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Initial)  Name of Employer			
Mailing Address		Occupation	
		Amount	
City	ZIP Code	Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address		Occupation	
		Amount	
City	ZIP Code	Guaranteed Outstanding:	
CURTOTAL C This Deviced This Dane (subtiness	n		
SUBTOTALS This Period This Page (optional		5000.00	
TOTALS This Period (last page in this line o	nly)	······································	
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.	

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		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5980
LOAN SOURCE Full Name (Last, First, N	Aiddle Initial)	Memo Item Election: 2016
Gerson, David, Adam, ,	Memo Item    Clection: 2016	
Mailing Address PO Box 1465	Other (specify)	
City	State	ZIP Code  F5007  Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
10000.00		0.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
MO9M / D08D / Y Z015 Y	M M / D D	/ Y YNAY Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optiona	N	40000 00
COLUMN TOTAL TIME TOTAL TIME TO AGE (OPTIONA	'y	10000.00
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Carry outstanding balance only to LINE 3, S	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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Transaction ID: SC/10.6013 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2016 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify)  $\blacktriangledown$ City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 33932.59 0.00 33932.59 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D30 D M09M Ž015 YNA Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 33932.59 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.

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OF

		100	
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.6284	
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2016	
Gerson, David, Adam, ,	Memo Item    Clection: 2016		
Mailing Address PO Box 1465	Other (specify) ▼		
City	State	ZIP Code  Second Personal Funds of the Candidate	
Burnsville	MN	55337	
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period	
50000.00		0.00 50000.00	
TERMS Date Incurred	[	Date Due Interest Rate Secured: (If none, enter 0)	
M12M / P23P / Y Ž01Š Y	M M / D D	/ Y YNAY Y 0.00 % (apr) Yes X No	
List All Endorsers or Guarantors (if any)	to Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City	ZIP Code	Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)	1	Name of Employer	
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Initial)  Name of Employer			
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initial)  Name of Employer			
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	
SUBTOTALS This Period This Page (optional	l)·····	50000.00	
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Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.	

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OF

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NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.6765	
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2016	
Gerson, David, Adam, ,	Memo Item    Clection: 2016		
Mailing Address PO Box 1465	Other (specify)		
City	State	ZIP Code  Scool Personal Funds of the Candidate	
Burnsville	MN	55337	
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period	
25000.00		0.00 25000.00	
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)	
M03 <sup>M</sup> / D30 <sup>D</sup> / Y 2016 Y	M M / D D	/ Y YNAY Y 0.00 % (apr) Yes X No	
List All Endorsers or Guarantors (if any)	to Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City	ZIP Code	Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Initial)  Name of Employer			
Mailing Address		Occupation	
		Amount	
City	ZIP Code	Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City	ZIP Code	Guaranteed Outstanding:	
SUBTOTALS This Period This Page (optiona	l)	25000.00	
TOTALS This Period (last page in this line o	nly)	275000.00	
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.	