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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FURINI 3	For An	Authorized Con	nmittee	Offic	ce Use Only
1. NAME OF COMMITTEE (in	TYPE OR PRIN	•	xample: If typing, type ver the lines.	12FE4M5	
Gerson for Cor	ngress				ı
ADDRESS (number and	d street)				
▼	. L				
Check if diff than previou reported. (A	sly Burnsville			MN 5533	37
2. FEC IDENTIFIC	ATION NUMBER ▼	CITY ▲		STATE A	ZIP CODE ▲
C C0052373		3. IS THIS REPORT	NEW (N) OR	AMENDED (A)	STATE ▼ DISTRICT MN 02
4. TYPE OF REF	PORT (Choose One)	(b) 12-Day PRI	E-Election Report for t	he:	
(a) Quarterly Re	ports:	П			Duno# (10D)
April 15	Quarterly Report (Q1)		Primary (12P)	General (12G)	Runoff (12R)
July 15	Quarterly Report (Q2)	Ш	Convention (12C)	Special (12S)	
	15 Quarterly Report (Q3)	Election or	M M / D D	/ Y Y Y Y	in the State of
January	31 Year-End Report (YE)	(c) 30-Day PO	ST-Election Report for	the:	
_		(5) 55 Edy 1 5			
		ш	General (30G)	Runoff (30R)	Special (30S)
Terminat	ion Report (TER)	Election or	M M / D D	/ Y Y Y Y	in the State of
5. Covering Period	M M / D D D 01	/ Y Y Y Y Y 2018	through	06 / D D / Y	Y Y Y 2018
I certify that I have ex	kamined this Report and t Gerson, Dav of Treasurer		nowledge and belief it	is true, correct and cor	mplete.
Signature of Treasure	Gerson, David, , ,		[Electronically Filed]	Date 07	08 / Y Y Y Y Y Y Y 2018
NOTE: Submission of f	alse, erroneous, or incompl	ete information may	subject the person sign	ning this Report to the pe	enalties of 52 U.S.C. §30109
Office Use					FEC FORM 3
Only					(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

2018 2018 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)

PAGE 3 / 45

Write or Type Committee Name

Gerson for Congress

04 06 01 2018 30 2018 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.	OPI	ERATING EXPENDITURES	0.00	631.93
18.		ANSFERS TO OTHER THORIZED COMMITTEES	0.00	0.00
19.	LO	AN 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.	REF	FUNDS OF CONTRIBUTIONS TO:		
	(a)	Individuals/Persons Other Than Political Committees	0.00	0.00
			0.00	200
	(b)	Political Party Committees Other Political Committees	0.00	0.00
	(0)	(such as PACs)	0.00	0.00
	(d)	TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
21.	ОТІ	HER DISBURSEMENTS	0.00	0.00
22.		TAL DISBURSEMENTS d Lines 17, 18, 19(c), 20(d), and 21)	0.00	631.93
		III. CASH SU	MMARY	
23.	CAS	SH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	103539.64
24	TO	TAL RECEIPTS THIS PERIOD (from Line 1	0.00	
25.	SUI	BTOTAL (add Line 23 and Line 24)		103539.64
26.	то	TAL DISBURSEMENTS THIS PERIOD (fror	m Line 22)	0.00
27	CAS	SH ON HAND AT CLOSE OF REPORTING	G PERIOD	103539.64

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

PAGE 5
FOR LINE NUMBER: (check only one)

13a

OF

			135
AME OF COMMITTEE (In Full) Gerson for Congress			Transaction ID : SC/10.4392
LOAN SOURCE Full Name (Last, Gerson, David, Adam, , Mailing Address	First, Mic	ddle Initial)	☐ Memo Item
PO Box 1465			
City		State MN	ZIP Code 55337 Personal Funds of the Candidate
Burnsville			
Original Amount of Loan	.96	Cumulative Pay	yment To Date Balance Outstanding at Close of This Period 0.00 16554.96
TERMS Date Incurred		D	Date Due Interest Rate Secured: (If none, enter 0)
M05M / D29D / Y Z01Ž	Y	M M / D D	
List All Endorsers or Guarantors	(if any) t	o Loan Source	
1. Full Name (Last, First, Middle In	nitial)		Name of Employer
Mailing Address			Occupation
			Amount
City	State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle In	itial)	l	Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed
		Zii Oode	Outstanding:
3. Full Name (Last, First, Middle In	itial)		Name of Employer
Mailing Address			Occupation
0''	0	710.0	Amount Guaranteed
City	State	ZIP Code	Outstanding:
4. Full Name (Last, First, Middle In	itial)		Name of Employer
Mailing Address			Occupation
	1		Amount
City	State	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (c	optional).		16554.06
TOTALS This Period (last page in this			,
Onum, autotaudina kalassa salat 11	JE O O !	andula D. franti	a line 16 no Cohodula D. com forward to sure visit 10 mg/s
Carry outstanding balance only to Lif	v⊏ 3, Sch	neaule 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

FOR LINE NUMBER: (check only one)

PAGE 6

13a

OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4365
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2012
Gerson, David, Adam, ,	Memo Item Clection: 2012	
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 10000.00
TERMS Date Incurred	[Date Due Interest Rate Secured: (If none, enter 0)
M07 ^M / D19 ^D / Y Ž01Ž 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 State	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	
CODICIALO IIIIS I ellou IIIIS Page (optiona		10000.00
TOTALS This Period (last page in this line o	nly)	······································
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.

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

PAGE 7
FOR LINE NUMBER: (check only one)

13a

				,9-	13b
NAME OF COMMITTEE (In Full) Gerson for Congress			Tra	insaction ID : SC/10.4381	
LOAN SOURCE Full Name (Last, First, Mic	Idle Initial)			Item Election: 2012	
Gerson, David, Adam, ,	Item Election: 2012 ** Primary General				
Mailing Address PO Box 1465				Other (specify)	
City	State	ZIP Code)	X Personal Funds of the 0	Candidate
Burnsville	MN	55337			
Original Amount of Loan	Cumulative Pay	yment To D		Balance Outstanding at Close of T	
5000.00	7	7	0.00	5000).00
TERMS Date Incurred	D	ate Due	Interest (If none,	enter 0)	ı :
M07 ^M / D24 ^D / Y Ž01Ž Y	M M / D D	/ Y - Y	ŃA ^Y Y	0.00 % (apr) Yes	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		1	Occupation		
		<u> </u>	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:	y y	
3. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
			Amount		
City	ZIP Code		Guaranteed Outstanding:	y y x	
4. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
			Amount		
City	ZIP Code		Guaranteed Outstanding:		
	,	1			
SUBTOTALS This Period This Page (optional)			<u> </u>	5000	.00
TOTALS This Period (last page in this line only	/)		······		
Carry outstanding balance only to LINE 3. Sch	nedule D for this	s line. If no	Schedule D. carry	forward to appropriate line of Su	ımmarv

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

PAGE 8
FOR LINE NUMBER: (check only one)

13a

OF

						130		
	ME OF COMMITTEE (In Full) erson for Congress				Trans	saction ID : SC/10.4468		
	LOAN SOURCE Full Name (Last,	First, Mic	ldle Initial)		☐ Memo Ite			
	Gerson, David, Adam, ,					Primary		
ŀ	Mailing Address					General Other (specify) ▼		
	PO Box 1465					— Other (specify) •		
	City		State	ZIP Co	de	Personal Funds of the Candidate		
-	Burnsville		MN	55337				
	Original Amount of Loan		Cumulative Pay	yment To	Date B	alance Outstanding at Close of This Period		
	5	5.00	,		0.00	5.00		
ŀ	TERMS Date Incurred		D	Date Due	Interest R (If none, er			
	^M 07 ^M / ^D 24 ^D / ^Y Ž01Ž	Y	M M / D D	/ Y	YNA Y	0.00 % (apr) Yes X No		
ŀ	List All Endorsers or Guarantors	(if any) to	o Loan Source			,		
ŀ	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 Initial)				Name of Employer			
	Mailing Address				Occupation			
					Amount			
	City	State	ZIP Code		Guaranteed Outstanding:	7		
ŀ	3. Full Name (Last, First, Middle In	itial)			Name of Employer Occupation			
	Mailing Address							
					Amount			
	City	State	ZIP Code		Guaranteed Outstanding:			
ŀ	4. Full Name (Last, First, Middle In	itial)			Name of Employer			
	Mailing Address				Occupation			
					Amount			
	City	State	ZIP Code		Guaranteed Outstanding:	9 9		
					<u>I</u>			
SU	JBTOTALS This Period This Page (optional)			<u> </u>	5.00		
TC	DTALS This Period (last page in this	line only	·) ·······		·····	, , , , , , , , ,		
_	arry outstanding halance only to LI	NF 3 Sch	edule D for this	s line If	no Schedule D. carry fr	prward to appropriate line of Summary.		
	any catatanan'i panance only to Li	0, 301	, 101 1118	S [1]	carry it	or mana to appropriate into or outlinary.		

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

PAGE 9
FOR LINE NUMBER: (check only one)

13a

OF

						100	
AME OF COMMITTEE (In Full) Gerson for Congress					Transa	ction ID : SC/10.4128	
LOAN SOURCE Full Name (Last,	First, Mi	ddle Initial)			Memo Item	Election: 2012	
Gerson, David, Adam, ,					,	x Primary	
Mailing Address						☐ General Other (specify) ▼	
Mailing Address PO Box 1465						Other (specify)	
City		State	ZIP Cod	de		Paramal Funda of the Condidate	
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	
5000	0.00			0.00		5000.00	
TERMS Date Incurred		D	ate Due		Interest Rat		
^M 07 ^M / ^D 26 ^D / ^Y Ž01Ž	Y	M M / D D	/ Y	YNA Y	•	0.00	
List All Endorsers or Guarantors	(if any) t	o Loan Source					
Full Name (Last, First, Middle I	,			Name of Em	ployer		
Mailing Address				Occupation			
				Amount			
City	State	ZIP Code		Guaranteed Outstanding:		7	
2. Full Name (Last, First, Middle In	itial)			Name of Employer			
Mailing Address				Occupation			
	,			Amount			
City	State	ZIP Code		Guaranteed Outstanding:		7 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	Mailing Address				Occupation		
				Amount			
City	State	ZIP Code		Guaranteed Outstanding:		7	
SUBTOTALS This Period This Page (optional).				···· >	5000.00	
FOTALS This Period (last page in this	line only	y)			▶	, , , , , , ,	
Carry outstanding balance only to Lli	NE 3. Scl	hedule D. for this	s line. If	no Schedule	D. carry for	ward to appropriate line of Summary.	
. ,	,	, . .			,		

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

PAGE 10
FOR LINE NUMBER: (check only one)

13a

OF

		130
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID: SC/10.4389
		·
LOAN SOURCE Full Name (Last, First, Mic Gerson, David, Adam, ,	Idle Initial)	☐ Memo Item Election: 2012 ✓ Primary
Mailing Address PO Box 1465		General Other (specify) ▼
City	State	ZIP Code
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 08M / D01D / Y Z01Z Y	M M / D D	/ Y Yna Y 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 State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		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	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	y)	······································
Carry outstanding balance only to LINE 3, Sch	edule 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

PAGE 11
FOR LINE NUMBER: (check only one)

13a

OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4129
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Memo Item Election: 2012
Gerson, David, Adam, ,	Memo Item Clection: 2012	
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	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M08M / D10D / Y Z01Ž 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	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	- I	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 O This Deviced This Deve (aution	-10	
SUBTOTALS This Period This Page (option	aı)	5000.00
TOTALS This Period (last page in this line	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

FOR LINE NUMBER: (check only one)

PAGE 12

13a

OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4470
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Election: 0040
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
6.00		0.00 6.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
^M 08 ^M / □10 □ / □ Ž01Ž □ Y	M M / D D	/ Y YNA 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 Guaranteed
City	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 (options	al)	
CODICIALS THIS FEHOU THIS FAGE (OPHONE	٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠	6.00
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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

PAGE 13
FOR LINE NUMBER: (check only one)

X 13a

OF

							130
AME OF COMMITTEE (In Full) Gerson for Congress					Transa	ction ID : SC/10.4130	
LOAN SOURCE Full Name (Last,	First, Mid	ddle Initial)			Memo Item	Election: 2012	
Gerson, David, Adam,	,	,			Memo item	rimary	
Gerson, David, Adam,						General	
Mailing Address PO Box 1465				Other (specify) ▼			
City		State	ZIP Cod	de		X Personal Funds of the Ca	andidate
Burnsville		MN	55337				
Original Amount of Loan		Cumulative Pay	yment To	Date	Bal	ance Outstanding at Close of Thi	s Period
1000	.00			0.00	<u> </u>	1000.0)0
TERMS Date Incurred		D	ate Due		Interest Rat (If none, enter		
^M 08 ^M / □17 [□] / Y Ž01Ž	Υ	M M / D D	/ Y	YNA Y	,	.00	x No
List All Endorsers or Guarantors	(if any) t	o Loan Source					
Full Name (Last, First, Middle II	, ,,	O LOUIT GOUIGE		Name of Em	ployer		
Mailing Address				Occupation			
				Amount			
City	State	ZIP Code		Guaranteed Outstanding:		7	
2. Full Name (Last, First, Middle In	itial)			Name of Employer			
Mailing Address				Occupation			
				Amount			1
City	State	ZIP Code		Guaranteed Outstanding:		9 9 9	
3. Full Name (Last, First, Middle In	itial)			Name of Employer			
Mailing Address				Occupation			
	1			Amount			1
City	State	ZIP Code		Guaranteed Outstanding:		y y	
4. Full Name (Last, First, Middle In	itial)			Name of Employer			
Mailing Address				Occupation			
	T			Amount			1
City	State	ZIP Code		Guaranteed Outstanding:		y y y y	
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	, p. 101 iai).					1000.0	U
TOTALS This Period (last page in this	line only	y)			▶		
Carry outstanding balance only to LII	NE 3, Scl	nedule D, for this	s line. If r	no Schedule	D, carry for	ward to appropriate line of Sun	ımary.

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

FOR LINE NUMBER: (check only one)

PAGE 14

13a

OF

						130		
	ME OF COMMITTEE (In Full) Serson for Congress				Trans	eaction ID : SC/10.4131		
		Circh NA:-	- - :4:- \			Fr		
	LOAN SOURCE Full Name (Last, Gerson, David, Adam, ,	FIRST, IVIIC	idie initial)		☐ Memo Ite	x Primary		
	Mailing Address PO Box 1465					General Other (specify) ▼		
	City		State	ZIP Cod	de	✗ Personal Funds of the Candidate		
	Burnsville		MN	55337		1 ersonal runus of the Candidate		
	Original Amount of Loan		Cumulative Pay	ment To	Date B	alance Outstanding at Close of This Period		
	1000	0.00	7		0.00	1000.00		
	TERMS Date Incurred		D	ate Due	Interest R (If none, er			
	M08 ^M / D20 ^D / Y Ž01Ž	Y	M M / D D	/ Y	YNA 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 Initial)				Name of Employer			
	Mailing Address				Occupation			
					Amount			
	City	State	ZIP Code		Guaranteed Outstanding:	, , , , , , , , , , , , , , , , , , , ,		
	3. Full Name (Last, First, Middle In	itial)	'		Name of Employer Occupation			
	Mailing Address							
					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 7		
		•	•					
S	UBTOTALS This Period This Page (optional)			······	1000.00		
T	OTALS This Period (last page in this	s line only	·)		······	7		
c	Carry outstanding balance only to LI	NE 3, Sch	edule D, for this	s line. If	no Schedule D, carry fo	orward to appropriate line of Summary.		

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

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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/10.4442
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:
SUBTOTALS This Period This Page (optional		
		7
TOTALS This Period (last page in this line or	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.

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

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OF

IAME OF COMMITTEE (In Gerson for Congres			Transa	action ID : SC/10.4444		
LOAN SOURCE Full Name (Last, First, Middle Initial) Gerson, David, Adam, ,				n Election: 2014 x Primary General		
Mailing Address PO Box 1465				Other (specify) ▼		
City		State	ZIP Code	X Personal Funds of the Candidate		
Burnsville		MN	55337	Torsonal Funds of the Canadate		
Original Amount of Loa	n	Cumulative Page	yment To Date Ba	alance Outstanding at Close of This Period		
	3000.00		0.00	3000.00		
TERMS Date Inc.	urred	С	Date Due Interest Ra			
M02M / D25D /	^Y Ž013 ^Y	M M / D D		0.00 % (apr) Yes X No		
List All Endorsers or G	, ,	o Loan Source				
1. Full Name (Last, Firs	st, Middle Initial)		Name of Employer			
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:	7		
2. Full Name (Last, First	t, Middle Initial)		Name of Employer	Name of Employer		
Mailing Address			Occupation			
0:1	lo	710 0 1	Amount Guaranteed			
City	State	ZIP Code	Outstanding:	9 9		
3. Full Name (Last, First	t, Middle Initial)		Name of Employer			
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed			
•		Zir Code	Outstanding:	9 9		
4. Full Name (Last, First	t, Middle Initial)		Name of Employer			
Mailing Address		Occupation	Occupation			
City	State	ZIP Code	Amount Guaranteed			
Oity	State	Zii Oode	Outstanding:	9 9		
SUBTOTALS This Period T	his Page (optional)			3000.00		
TOTALS This Period (last p	page in this line only	·) ·······				
Carry outstanding balance	only to LINE 3 Sob	nedule D for this	s line If no Schedule D. carry fo	rward to appropriate line of Summary.		
Carry outstanding balance	only to LINE 3, Sch	neaule D, for this	s line. It no Schedule D, carry fo	rward 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/10.4464
LOAN SOURCE Full Name (Last, First, N	liddle 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)
M03M / D26D / Y Ž013 Y	M M / D D	/ Y 1/1/2020 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 Guaranteed
City	ZIP Code	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		
COSTOTATO THIS FEROU THIS FAGE (OPLICHAL	,	3000.00
TOTALS This Period (last page in this line or	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.

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

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			Detailed Guillinary I	age	13b
NAME OF COMMITTEE (In Full)			Trans	action ID : SC/10.4502	
Gerson for Congress					
LOAN SOURCE Full Name (Last, First, Mic	ldle Initial)		☐ Memo Itei	m Election: 2014	
Gerson, David, Adam, ,				x Primary	
				General	
Mailing Address PO Box 1465				Other (specify)	
City	State	ZIP Code)		
Burnsville	MN	55337		Personal Funds of the	Candidate
Original Amount of Loan	Cumulative Pay	yment To D	ate Ba	alance Outstanding at Close of T	his Period
4000.00			0.00	4000	0.00
TERMS Date Incurred	D	Date Due	Interest Ra		<u></u> :
M04 ^M / P18 ^D / Y Ž013 Y	M M / D D	/ Y 1		0.00 % (apr) Yes	s x No
List All Endorsers or Guarantors (if any) to	o Loan Source				
1. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
		<u> </u>	Amount		
City	ZIP Code		Guaranteed Outstanding:	7 7 7	
2. Full Name (Last, First, Middle Initial)	<u>'</u>		Name of Employer		
Mailing Address			Occupation		
			Amount		
City State	ZIP Code		Guaranteed Outstanding:	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
3. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address		1	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	I	Guaranteed Outstanding:	7 7 7 7	
1	-1				
SUBTOTALS This Period This Page (optional)			······································	4000	0.00
TOTALS This Period (last page in this line only	·) ·······		·····		
Carry outstanding balance only to LINE 3, Sch	nedule D, for this	s line. If no	Schedule D, carry fo	orward to appropriate line of Si	ummary.

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

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LOAN SOURCE Full N Gerson, David, A		ddle 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		MN	55337			
Original Amount of Lo	4000.00	Cumulative Pa	nent To Date Bal	ance Outstanding at Close of This Period		
	,		9	4000.00		
TERMS Date Inc	curred		te Due Interest Rat (If none, ente	er 0)		
^M 05 ^M / ^D 13 ^D /	^Y Ž01Š ^Y	M M / D D	/ Y 1)1/20 Y	% (apr) Yes X No		
List All Endorsers or	Guarantors (if any) to	o Loan Source				
1. Full Name (Last, Fi	rst, Middle Initial)		Name of Employer			
Mailing Address			Occupation	Occupation		
			Amount			
City	State	ZIP Code	Guaranteed Outstanding:	7		
2. Full Name (Last, Fire	st, Middle Initial)		Name of Employer			
Mailing Address			Occupation			
			Amount			
City	State	ZIP Code	Guaranteed Outstanding:	7 7		
3. Full Name (Last, Fire	st, Middle Initial)		Name of Employer			
Mailing Address			Occupation			
			Amount			
City	State	ZIP Code	Guaranteed Outstanding:	7		
4. Full Name (Last, Firs	st, Middle Initial)		Name of Employer	-		
Mailing Address			Occupation			
			Amount			
City	State	ZIP Code	Guaranteed Outstanding:	7		
	ı		_			
BTOTALS This Period	This Page (optional)			4000.00		

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AME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4591
LOAN SOURCE Full Name (Last, First, M Gerson, David, Adam, ,	Memo Item Election: 2014 X Primary General	
Mailing Address PO Box 1465		Other (specify) ▼
City	State	ZIP Code ** Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	ment To Date Balance Outstanding at Close of This Period
5000.00		0.00 5000.00
TERMS Date Incurred	Γ	ate Due Interest Rate Secured: (If none, enter 0)
M06 ^M / D10 ^D / Y Ž013 Y	M M / D D	/ Y 1⅓1/2Ŏ 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
City	ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		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
City State	ZIP Code	Amount Guaranteed
-	ZIP Code	Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed
Gitate	ZIF Code	Outstanding:
SUBTOTALS This Period This Page (optional)	5000.00
TOTALS This Period (last page in this line or	nly)	7 7 7
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/10.4622
LOAN SOURCE Full Name (Last, First, N	liddle Initial)	Floation: 2044
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
131.12		0.00 131.12
TERMS Date Incurred	[Date Due Interest Rate Secured: (If none, enter 0)
M06 ^M / D30 ^D / Y Ž013 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)	·	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 State	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional		
GODICIALS THIS PERIOD THIS Page (optional)	131.12
TOTALS This Period (last page in this line or	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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Transaction ID: SC/10.5169 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 D05D M 07M 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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OF

						100
AME OF COMMITTEE (In Full) Gerson for Congress					Transa	action ID : SC/10.5170
LOAN SOURCE Full Name (Last,	First, Mi	ddle Initial)			Memo Iten	Election: 2014
Gerson, David, Adam, ,					j wemo item	rimary Primary
Gerson, David, Adam,						General
Mailing Address PO Box 1465						Other (specify) ▼
City		State	ZIP Cod	de		Personal Funds of the Candidate
Burnsville		MN	55337			
Original Amount of Loan		Cumulative Pay	yment To	Date	Ва	lance Outstanding at Close of This Period
5000	.00	7		0.00)	5000.00
TERMS Date Incurred		D	Date Due		Interest Ra	
^M 07 ^M / ^D 29 ^D / Y Ž013	Υ	M M / D D	/ Y	1)1/20 Y		0.00
List All Endorsers or Guarantors	(if any) t	o Loan Source				
Full Name (Last, First, Middle II	,	o Louir Gourge		Name of Em	ployer	
Mailing Address				Occupation		
				Amount		
City	State	ZIP Code Guaranteed Outstanding:		9 9		
2. Full Name (Last, First, Middle In	itial)	I		Name of Em	ployer	
Mailing Address				Occupation		
				Amount		
City	State	ZIP Code		Guaranteed Outstanding:		7
3. Full Name (Last, First, Middle In	itial)			Name of Em	ployer	
Mailing Address				Occupation		
	T			Amount		
City	State	ZIP Code		Guaranteed Outstanding:		7
4. Full Name (Last, First, Middle In	itial)			Name of Em	ployer	
Mailing Address				Occupation		
	ı			Amount		
City	State	ZIP Code		Guaranteed Outstanding:		9 1 9 1 9 1
SUBTOTALS This Period This Page (o	ontional).					500000
	, puonai).					5000.00
FOTALS This Period (last page in this	line only	y)			▶	, , , , , , ,
Carry outstanding balance only to LIF	NE 3, Scl	hedule D, for this	s line. If ı	no Schedule	D, carry for	rward to appropriate line of Summary.

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OF

		130
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5172
	dalla loiti-!\	Te: ··
Gerson, David, Adam, ,	iale initial)	☐ Memo Item Election: 2014 ▼ Primary Concrete
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 08 ^M / D19 ^D / Y Ž013 Y	M M / D D	/
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 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 (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/10.5173
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	Г	Date Due Interest Rate Secured: (If none, enter 0)
M09M / D12D / 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	
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:
CULTUTAL C This Davied This Davie (1.1)		
SUBTOTALS This Period This Page (option	તા)	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.

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

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OF

NAME OF COMMITTEE (In Gerson for Congres			Trans	action ID : SC/10.5174
Gerson, David, A	•	ddle Initial)	☐ Memo Iter	Election: 2014 X Primary General
Mailing Address PO Box 1465				Other (specify)
City		State	ZIP Code	▼ Personal Funds of the Candidate
Burnsville		MN	55337	1 Craoriai i unua oi tric Garialdate
Original Amount of Loa	an	Cumulative Page	yment To Date Ba	alance Outstanding at Close of This Period
	3000.00		0.00	3000.00
TERMS Date Inc	urred	С	Pate Due Interest Ra (If none, en	
M09M / D30D /	^Y ž01š ^Y	M M / D D		0.00 % (apr) Yes X No
List All Endorsers or C	, ,,	o Loan Source		
1. Full Name (Last, Fire	st, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	, , , , , , ,
2. Full Name (Last, Firs	t, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
0:1	0	710 0 1	Amount Guaranteed	
City	State	ZIP Code	Outstanding:	9 9
3. Full Name (Last, Firs	t, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed	
•		Zir Code	Outstanding:	7
4. Full Name (Last, Firs	t, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed	
City	State	ZIP Code	Outstanding:	9 9
SUBTOTALS This Period	This Page (optional)			3000.00
TOTALS This Period (last	page in this line only	v)	· · · · · · · · · · · · · · · · · · ·	9 9 555
Carry outstanding halance	a only to LINE 2 Sob	nedule D. for this	s line If no Schedule D. correcte	rward to appropriate line of Summary.
Carry outstanding palance	e only to LINE 3. Sch	iedule D, for this	s ime. ii no Schedule D, carry fo	rward to appropriate line of Summary.

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OF

		130
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5202
	L-11 - 1 141 P	
Gerson, David, Adam, ,	iale Initial)	☐ Memo Item Election: 2014 ▼ Primary
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	7	0.00 5000.00
TERMS Date Incurred	D	ate Due Interest Rate Secured: (If none, enter 0)
M10M / D04D / Y Ž01Š Y	M M / D D	/ Y 1ÿ1/2ŏ Y 0.00 % (apr) Yes ▼ 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 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:
SUBTOTALS This Period This Page (optional)		5000.00
TOTALS This Period (last page in this line only	y)	······································
Carry outstanding balance only to LINE 3, Sch	nedule 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/10.5203
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	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M10 ^M / D16 ^D / Y Ž01Š	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
City	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
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	<u>'</u>	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
CURTOTALS This Deviced This Dega (entire)	SI)	
SUBTOTALS 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 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/10.5204
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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FOR LINE NUMBER: (check only one)

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OF

NAME OF COMMITTEE (In Gerson for Congres			Transa	action ID : SC/10.5205		
Gerson, David, Ad	•	ddle Initial)	☐ Memo Iten	Election: 2014 X Primary General		
Mailing Address PO Box 1465	Mailing Address PO Box 1465			Other (specify) ▼		
City		State	ZIP Code	Personal Funds of the Candidate		
Burnsville		MN	55337	1 Craonal 1 unus of the Candidate		
Original Amount of Loa	ın	Cumulative Pa	yment To Date Ba	lance Outstanding at Close of This Period		
9	5000.00	7	0.00	5000.00		
TERMS Date Inc	urred	С	ate Due Interest Ra			
M11M / D04D /	^Y Ž013 ^Y	M M / D D	/ Y 1ў1/2Ŏ Y	% (apr) Yes X No		
List All Endorsers or G	· · · · · · · · · · · · · · · · · · ·	o Loan Source				
1. Full Name (Last, Fire	st, Middle Initial)		Name of Employer			
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:	7		
2. Full Name (Last, Firs	t, Middle Initial)		Name of Employer	Name of Employer		
Mailing Address			Occupation			
011	lo	710 0 1	Amount Guaranteed			
City	State	ZIP Code	Outstanding:	7		
3. Full Name (Last, First	t, Middle Initial)		Name of Employer			
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed			
		Zii Gode	Outstanding:	7		
4. Full Name (Last, First	t, Middle Initial)		Name of Employer			
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed			
J.,			Outstanding:	7		
SUBTOTALS This Period 1	Гhis Page (optional)		······	5000.00		
TOTALS This Period (last	page in this line only	·) ·······		7		
Carry outstanding balance	e only to LINE 3. Sch	nedule D. for this	s line. If no Schedule D. carry for	rward to appropriate line of Summary.		

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

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OF

		130	
AME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5206	
LOAN SOURCE Full Name (Last, First, Notes) Gerson, David, Adam, , Mailing Address PO Box 1465	fiddle Initial)	☐ Memo Item Election: 2014 X Primary General Other (specify) ▼	
City	State	ZIP Code F5007 Personal Funds of the Candidate	
Burnsville	MN	55337	
Original Amount of Loan	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period	
4000.00	2	0.00 4000.00	
TERMS Date Incurred	С	ate Due Interest Rate Secured: (If none, enter 0)	
M11M / D13D / Y Ž013 Y	M M / D D	/ Y 1/1/20 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	
		Amount	
City	ZIP Code	Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
	710.0.1	Amount Guaranteed	
City	ZIP Code	Outstanding:	
3. Full Name (Last, First, Middle Initial)	·	Name of Employer	
Mailing Address		Occupation	
0.1	710.0.1	Amount Guaranteed	
City	ZIP Code	Outstanding:	
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
Ott	710 0-1-	Amount Guaranteed	
City State	ZIP Code	Outstanding:	
SUBTOTALS This Period This Page (optional)			
FOTALS This Period (last page in this line or	nly)	······	
Carry outstanding balance only to LINE 3, S	chedule D, for this	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/10.5207
LOAN SOURCE Full Name (Last, First, Mic Gerson, David, Adam, ,	Idle Initial)	☐ Memo Item Election: 2014 ✓ Primary
Mailing Address PO Box 1465		General Other (specify) ▼
City	State	ZIP Code
Burnsville	MN	55337 Personal Funds of the Candidate
Original Amount of Loan	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period
3000.00		0.00 3000.00
TERMS Date Incurred	D	ate Due Interest Rate Secured: (If none, enter 0)
M11M / D19D / 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) t	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)		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	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 (optional)		3000.00
TOTALS This Period (last page in this line only	y)	······································
Carry outstanding balance only to LINE 3, Sch	edule D, for this	s line. If no Schedule D, carry forward to appropriate line of Summary.

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Transaction ID: SC/10.5208 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 M 1 1 M ^D29^D 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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Transaction ID: SC/10.5209 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 M 12M D09D 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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							130
AME OF COMMITTEE (In Full) Gerson for Congress					Transa	ction ID : SC/10.5210	
LOAN SOURCE Full Name (Last,	First, Mi	ddle Initial)			Memo Item	Election: 2014	
Gerson, David, Adam, ,					I Wellie Reli	x Primary	
						General	
Mailing Address PO Box 1465						Other (specify)	
City		State	ZIP Cod	de			
Burnsville		MN	55337			Personal Funds of the Ca	ndidate
Original Amount of Loan		Cumulative Pay	yment To	Date	Bal	lance Outstanding at Close of This	s Period
3000	.00	2		0.00)	3000.0	0
TERMS Date Incurred		D	Date Due		Interest Rat		
^M 12 ^M / ^D 16 ^D / Y Ž013	Υ	M M / D D	/ Y	1)1/20 Y	,	0.00	x No
List All Endorsers or Guarantors	(if anv) t	o Loan Source					
1. Full Name (Last, First, Middle In	,			Name of Em	nployer		
Mailing Address				Occupation			
				Amount			1
City	State	ZIP Code Guaranteed Outstanding:		7			
2. Full Name (Last, First, Middle Ini	2. Full Name (Last, First, Middle Initial)			Name of Employer			
Mailing Address				Occupation			
				Amount			
City	State	ZIP Code		Guaranteed Outstanding:		9 9	
3. Full Name (Last, First, Middle Ini	tial)			Name of Employer			
Mailing Address				Occupation			
				Amount			1
City	State	ZIP Code		Guaranteed Outstanding:		7	
4. Full Name (Last, First, Middle Ini	tial)			Name of Em	ployer		
Mailing Address				Occupation			
			ŀ	Amount			1
City	State	ZIP Code		Guaranteed Outstanding:		7 7	
SUBTOTALS This Period This Page (c	ntional\						$\overline{}$
This remod this rage (C	γριισι ιαι) ·					3000.0	U
FOTALS This Period (last page in this	line only	y)			▶		
Carry outstanding balance only to LIN	NE 3, Scl	nedule D, for this	s line. If r	no Schedule	D, carry for	ward to appropriate line of Sum	mary.

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5542
LOAN SOURCE Full Name (Last, First, N	liddle 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	ļ,	0.00 3000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M01M / D08D / Y Ž014 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	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	·	Name of Employer
Mailing Address		Occupation
	T	Amount Guaranteed
City	ZIP Code	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:
SUBTOTALS This Period This Page (optional		
CODICIALS This renor this rage (optional	,	3000.00
TOTALS This Period (last page in this line or	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.

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/10.5543	
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	l,	0.00 5000.00	
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)	
M01M / D16D / Y Z014 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 State	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 (optional)			
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TOTALS This Period (last page in this line or	ıly)	······	
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/10.5544		
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)			
		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)		
^M 02 ^M / ^D 26 ^D / 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:		
SURTOTALS This Poriod This Page (antions				
SUBTOTALS This Period This Page (optional)				
TOTALS This Period (last page in this line of	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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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)			
SUBTOTALS This Period This Page (optional) 391.00			
TOTALS This Period (last page in this line or	ıly)	······································	
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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LOAN SOURCE Full Na Gerson, David, Ac	•	Idle Initial)	☐ Memo Iter	m Election: 2016 x Primary General	
Mailing Address PO Box 1465				Other (specify) ▼	
Dity		State	ZIP Code	Personal Funds of the Candidate	
Burnsville		MN	55337		
Original Amount of Loa		Cumulative Pa		alance Outstanding at Close of This Period	
	3500.00		0.00	3500.00	
TERMS Date Incu	ırred		te Due Interest Ra (If none, ent		
M03M / D04D /	^Y Ž01Š ^Y	M M / D D	/ Y YNAY Y	0.00 % (apr) Yes X No	
List All Endorsers or G	uarantors (if any) to	o Loan Source			
1. Full Name (Last, Firs	t, Middle Initial)		Name of Employer		
Mailing Address			Occupation		
	I-	T	Amount Guaranteed		
City	State	ZIP Code	Outstanding:	9	
2. Full Name (Last, First	, Middle Initial)	·	Name of Employer		
Mailing Address			Occupation		
			Amount Guaranteed		
City	State	ZIP Code	Outstanding:	9	
3. Full Name (Last, First	, Middle Initial)		Name of Employer		
Mailing Address			Occupation		
			Amount		
City	State	ZIP Code	Guaranteed Outstanding:	9 9	
4. Full Name (Last, First	, Middle Initial)		Name of Employer		
Mailing Address		Occupation			
			Amount		
City	State	ZIP Code	Guaranteed Outstanding:	9	
	'				
BTOTALS This Period T	his Page (optional)		······	3500.00	

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Transaction ID: SC/10.5867 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 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 ^D12^D ^M80^M 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 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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OF

		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 (options	SUBTOTALS This Period This Page (optional)			
COLUMN TOTAL TIME TOTAL TIME TAGE (OPTIONA	'y	10000.00		
TOTALS This Period (last page in this line o	nly)	······································		
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.		

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

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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) 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 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)..... 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.

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

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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) 50000.00			
TOTALS This Period (last page in this line only)			
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

FOR LINE NUMBER: (check only one)

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Transaction ID: SC/10.6765 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 Other (specify) \blacktriangledown PO Box 1465 City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 25000.00 0.00 25000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D30 D M 03M ž016 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 State ZIP Code City 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)..... 25000.00 TOTALS This Period (last page in this line only)..... 275000.00 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.