

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
AJ Kern for Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	3841.25	7124.25
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	3841.25	7124.25
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	9382.46	11455.54
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	9382.46	11455.54
8. Cash on Hand at Close of Reporting Period (from Line 27).....	5728.71	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	10000.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

AJ Kern for Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1346.25	2346.25
(ii) Unitemized	2495.00	4778.00
(iii) TOTAL of contributions from individuals	3841.25	7124.25
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	3841.25	7124.25
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	10000.00	10000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	10000.00	10000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	13841.25	17124.25

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	9382.46	11455.54
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) ►	9382.46	11455.54

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1269.92
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	13841.25
25. SUBTOTAL (add Line 23 and Line 24).....	15111.17
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	9382.46
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	5728.71

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

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
AJ Kern for Congress

A. Full Name (Last, First, Middle Initial)
Edward F Burns

Mailing Address 16250 County Road, 20

City State Zip Code
Mayer MN 55360

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

Name of Employer Occupation
Retired Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
240.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 23 / 2016

Transaction ID : SA11AI.4230

Amount of Each Receipt this Period
40.00

Memo Item
Cash Contribution

B. Full Name (Last, First, Middle Initial)
Edward F Burns

Mailing Address 16250 County Road, 20

City State Zip Code
Mayer MN 55360

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

Name of Employer Occupation
Retired Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
340.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 16 / 2016

Transaction ID : SA11AI.4233

Amount of Each Receipt this Period
100.00

Memo Item
Contribution

C. Full Name (Last, First, Middle Initial)
Kevin Durken

Mailing Address 1222 8th Ave SE

City State Zip Code
St Cloud MN 56301

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

Name of Employer Occupation
Boot Shack Retail

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 01 / 2016

Transaction ID : SA11AI.4232

Amount of Each Receipt this Period
200.00

Memo Item
Contribution

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

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

340.00

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

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

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NAME OF COMMITTEE (In Full)
AJ Kern for Congress

A. Full Name (Last, First, Middle Initial)
Kevin Durken

Mailing Address 1222 8th Ave SE

City St Cloud State MN Zip Code 56301

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

Name of Employer Boot Shack Occupation Retail

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1306.25

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 29 / 2016

Transaction ID : SA11AI.4244

Amount of Each Receipt this Period
906.25

Memo Item
Billboard Rental --To be refunded

B. Full Name (Last, First, Middle Initial)
Aliena Jeanene Kern

Mailing Address 5175 NE River RD

City Sauk Rapids State MN Zip Code 56379

FEC ID number of contributing federal political committee. **C H6MN06165**

Name of Employer Self Occupation Business Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 01 / 2016

Transaction ID : SA11AI.4270

Amount of Each Receipt this Period
100.00

Memo Item
GoFundMe Contribution

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

Memo Item

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

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

1006.25

1346.25

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

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

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NAME OF COMMITTEE (In Full)
AJ Kern for Congress

A. Full Name (Last, First, Middle Initial)
Aliena Jeanene Kern

Mailing Address 5175 NE River RD

City: Sauk Rapids State: MN Zip Code: 56379

FEC ID number of contributing federal political committee: **C H6MN06165**

Name of Employer: Self Occupation: Business Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 5200.00

Date of Receipt: 04 / 14 / 2016

Transaction ID : SA13A.4207

Amount of Each Receipt this Period: 5000.00

Memo Item
 Loan to Campaign (1) from Personal Funds

B. Full Name (Last, First, Middle Initial)
Aliena Jeanene Kern

Mailing Address 5175 NE River RD

City: Sauk Rapids State: MN Zip Code: 56379

FEC ID number of contributing federal political committee: **C H6MN06165**

Name of Employer: Self Occupation: Business Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 10200.00

Date of Receipt: 04 / 21 / 2016

Transaction ID : SA13A.4208

Amount of Each Receipt this Period: 5000.00

Memo Item
 Loan to Campaign (2) From Personal Funds

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

Memo Item

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

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

10000.00

10000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 12
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
AJ Kern for Congress

Full Name (Last, First, Middle Initial) A. Allume Studios		Date of Disbursement MM / DD / YYYY 05 / 03 / 2016
Mailing Address 515 Washington Ave		Amount of Each Disbursement this Period 1650.00 <input type="checkbox"/> Memo Item
City Minneapolis	State MN	
Zip Code 55401	Purpose of Disbursement Video Production	Transaction ID : SB17.4310
Candidate Name AJ Kern for Congress	Category/Type 006	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MN	District: 06	

Full Name (Last, First, Middle Initial) B. AMG Promotions		Date of Disbursement MM / DD / YYYY 05 / 02 / 2016
Mailing Address 2229 26th St S		Amount of Each Disbursement this Period 1095.00 <input type="checkbox"/> Memo Item
City st cloud	State MN	
Zip Code 56301	Purpose of Disbursement Banners	Transaction ID : SB17.4306
Candidate Name AJ Kern for Congress	Category/Type 006	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MN	District: 06	

Full Name (Last, First, Middle Initial) C. FEDEX		Date of Disbursement MM / DD / YYYY 04 / 25 / 2016
Mailing Address 2423 W Division St.		Amount of Each Disbursement this Period 141.07 <input type="checkbox"/> Memo Item
City st Cloud	State MN	
Zip Code 56301	Purpose of Disbursement Printing	Transaction ID : SB17.4297
Candidate Name AJ Kern for Congress	Category/Type 006	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MN	District: 06	

SUBTOTAL of Disbursements This Page (optional).....	2886.07
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 12			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
AJ Kern for Congress

Full Name (Last, First, Middle Initial) A. Franklin Graphics		Date of Disbursement MM / DD / YYYY 04 / 26 / 2016
Mailing Address 20092 Edison Cir		Amount of Each Disbursement this Period 513.00 <input type="checkbox"/> Memo Item
City Clearwater	State MN	
Zip Code 55320	Purpose of Disbursement Truck Banner	Transaction ID : SB17.4304
Candidate Name AJ Kern for Congress	Category/Type 006	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MN	District: 06	

Full Name (Last, First, Middle Initial) B. Minuteman Press		Date of Disbursement MM / DD / YYYY 05 / 02 / 2016
Mailing Address 1529 W St. Germain		Amount of Each Disbursement this Period 251.26 <input type="checkbox"/> Memo Item
City st Cloud	State MN	
Zip Code 56301	Purpose of Disbursement Printing	Transaction ID : SB17.4308
Candidate Name AJ Kern for Congress	Category/Type 006	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MN	District: 06	

Full Name (Last, First, Middle Initial) c. Rengel Printing		Date of Disbursement MM / DD / YYYY 04 / 21 / 2016
Mailing Address 1922 7th Street North		Amount of Each Disbursement this Period 336.08 <input type="checkbox"/> Memo Item
City St Cloud	State MN	
Zip Code 56303	Purpose of Disbursement Printing	Transaction ID : SB17.4303
Candidate Name AJ Kern for Congress	Category/Type 006	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MN	District: 06	

SUBTOTAL of Disbursements This Page (optional).....	1100.34
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 OF 12	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
AJ Kern for Congress

Full Name (Last, First, Middle Initial) A. Mathew Westlund		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2016
Mailing Address 415 6th Ave S		Amount of Each Disbursement this Period 5000.00
City Sartell	State MN	
Zip Code 56377	Purpose of Disbursement Consulting	<input type="checkbox"/> Memo Item
Candidate Name AJ Kern for Congress	Category/Type 003	Transaction ID : SB17.4316
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MN District: 06		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	8986.41

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **AJ Kern for Congress** Transaction ID : **SC/10.4207**

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** Memo Item
Aliena Jeanene Kern

Election: 2016
 Primary
 General
 Other (specify) ▼

Mailing Address
 5175 NE River RD

City State ZIP Code
 Sauk Rapids MN 56379

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

Date Incurred: M 04 / D 14 / Y 2016
 Date Due: M / D / Y 1/1/2018
 Interest Rate: 0.00 % (apr)
 Secured: Yes No

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

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

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

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

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **AJ Kern for Congress** Transaction ID : **SC/10.4208**

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** Memo Item
Aliena Jeanene Kern
 Election: 2016
 Primary
 General
 Other (specify) ▼

Mailing Address
5175 NE River RD
 City State ZIP Code
 Sauk Rapids MN 56379

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

TERMS
 Date Incurred: M 04 / D 21 / Y 2016
 Date Due: M / D / Y 1/1/2018
 Interest Rate: 0.00 % (apr)
 Secured: Yes No

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

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

SUBTOTALS This Period This Page (optional).....	5000.00
TOTALS This Period (last page in this line only).....	10000.00

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