



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

RQ-2

Paul Schulte, Treasurer
Minnesota Democratic-Farmer Labor Party/Federal
352 Wacouta Street
St. Paul, MN 55101

APR 14 1999

Identification Number: C00025254

Reference: 30 Day Post-General Election Report (10/15/98-11/23/98)

Dear Mr. Schulte:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-Schedule A of your report (pertinent portions attached) discloses an apparent contribution(s) from a labor organization. 2 U.S.C. §441b(a) prohibits the receipt of contributions from labor organizations unless made from a separate segregated fund established by the labor organization.

If the contribution(s) in question was incompletely or incorrectly disclosed, you should amend your original report with clarifying information. If you have received a contribution(s) from labor organizations, your committee must transfer-out the impermissible funds to an account not used to influence federal elections or refund the full amount to the donor(s) in accordance with 11 CFR §103.3(b). In the best interest of your committee, all transfers-out and refunds should be made within thirty days of the treasurer's receipt of the impermissible funds. In order to protect the donor's interests, the Commission recommends that you inform the contributor(s) in writing to provide the donor(s) with the option of receiving a refund or granting written authorization for a transfer to another account.

Please inform the Commission of your corrective action immediately in writing and provide a photocopy of your check for the transfer-out or refund. In addition, any transfers-out or refunds should be disclosed on

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Schedule B supporting Line 22 or 28 of the report covering the period during which the transaction was made.

Although the Commission may take further legal action concerning the acceptance of a prohibited contribution, prompt action by your committee to transfer-out or refund the amount will be taken into consideration.

-Schedule A of your report (pertinent portion(s) attached) discloses a contribution(s) from an organization(s) which is not a political committee registered with the Commission. In order for your committee to accept contributions from unregistered organizations into accounts used to influence federal elections, your committee should take steps to insure that the contributor(s) used permissible funds to make the contribution(s) to avoid violating 2 U.S.C. §§441a(f) and 441b or 11 CFR §102.5(b). Under 11 CFR §102.5(b), organizations which are not political committees under the Act and choose to contribute to federal committees must either: 1) establish a separate account which contains only those funds permitted under the Act, or 2) demonstrate through a reasonable accounting method that the organization has received sufficient funds subject to the limitations and prohibitions in order to make the contribution.

If the contribution(s) in question was incompletely or incorrectly disclosed, you should amend your original report with clarifying information. In addition, please clarify whether the contribution(s) received from the referenced organization(s) is permissible. To the extent that your committee has received impermissible funds, the Commission recommends that you transfer the impermissible funds to an account not used to influence federal elections or refund the impermissible amount(s) to the donor(s) in accordance with 11 CFR §103.3(b). In order to protect the donor's interests, the Commission recommends that you inform the contributor(s) in writing to provide the donor(s) with the option of receiving a refund or granting written authorization for a transfer to another account.

Please inform the Commission of your corrective action immediately in writing and provide a photocopy of your check for the transfer-out or refund. Should you choose to transfer-out or refund the contribution(s), the Commission will presume the funds were impermissible if no statement from your committee provides information to the contrary. Transfers-out and refunds should be disclosed on a Schedule B supporting Line 22 or 28 of the report covering the period during which the transaction was made.

Although the Commission may take further legal action concerning the acceptance of prohibited contributions, prompt action by your committee in transferring-out or refunding the amounts will be taken into consideration.

-Schedule A of your report (pertinent portion(s) attached) discloses a contribution(s) which appears to exceed the limits set forth in the Act. 2 U.S.C. §441a(f) and 11 CFR §110.1(d) preclude a committee and its affiliates from receiving contributions from another political committee or person in excess of \$5,000 per calendar year.

If the contribution(s) in question was incompletely or incorrectly disclosed, you should amend your original report with the clarifying information. If the contribution(s) you received exceeded the limits, you must seek reattribution of the contribution pursuant to 11 CFR §110.1(k), transfer-out the amount in excess of \$5,000 to an account not used to influence federal elections or refund the excessive amount to the donor(s) in accordance with 11 CFR §103.3(b). In the best interest of your committee, all reattributions, transfers-out, and refunds should be made within sixty days of the treasurer's receipt of the contribution(s). In order to protect the donor's interests, the Commission recommends that you inform the contributor(s) in writing to provide the donor(s) with the option of granting written authorization for a reattribution or transfer-out to another account or receiving a refund.

Please inform the Commission of your corrective action immediately in writing and provide a photocopy of your check for the transfer-out or refund. In addition, any reattributions should be reported as memo entries on Schedule A of the report covering the period during which the authorization for the reattribution is received. Any transfers-out or refunds should be disclosed on Schedule B supporting Line 22 or 28 of the report during which the transaction was made.

Although the Commission may take further legal action regarding the acceptance of an excessive contribution(s), prompt action by your committee to seek reattribution, transfer-out or refund the excessive amount will be taken into consideration.

-Please clarify all expenditures made for "Telemarketing", "Consulting-Fundraising", "Media Consulting", "Fundraiser-Stage Set Up", "Advertising-Rally", "Fundraising Event" and "Olaf Rally Materials" on Schedule H4 for Line 21(a) and Schedule B for Line 21(b). If a portion or

all of these expenditures were made on behalf of specifically identified federal candidates, this amount should be disclosed on Schedule B, E or F supporting Lines 23, 24 or 25 and include the amount, name, address and office sought by each candidate. 11 CFR §§104.3(b) and 106.1

-On Schedule H2 of your report you disclose the ratio for Absentee Ballot to be 2% FEDERAL and 98% NON-FEDERAL. However, your Schedule H4 calculations reflect the ratio to be 98% FEDERAL and 2% NON-FEDERAL. Please amend your report to clarify this discrepancy.

Please note that if your non-federal account has overpaid your federal account because of this miscalculation, it will be necessary to immediately transfer these funds back to the non-federal account. While the Commission may take further legal action concerning any impermissible overpayments by the non-federal account, your prompt action will be taken into consideration.

-Your report includes computer produced formats of Schedule H4. Computer produced formats may only be used upon prior approval of the Commission. You should submit a separate sample format with a cover letter requesting approval. Until your format has been approved, FEC forms must be used. 11 CFR §104.2(d)

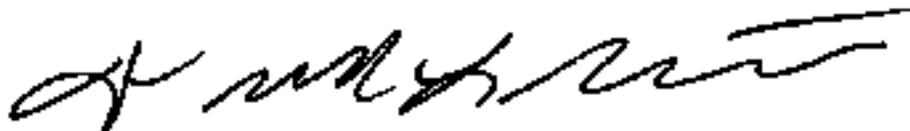
-On Schedule H4 supporting Line 21(a) of the Detailed Summary Page, you have failed to check the appropriate CATEGORY box for the payments made. Please amend your report to disclose the appropriate category.

-Your EVENT YEAR-TO-DATE calculations for Administrative/Voter Drive and the Riley Fundraiser, Gore Fundraiser, Absentee Ballot, Fall Festival, Glickman Event, and Beckman events are incorrect. EVENT YEAR-TO-DATE totals for administrative and voter drive costs are derived by aggregating all disbursements during the calendar year for the whole Administrative/Voter Drive category. EVENT YEAR-TO-DATE totals for fundraising, direct candidate support, and exempt activities are derived by aggregating all disbursements during the calendar year within a specific event. These should be calculated by adding the latest disbursement for a category or event to the previous EVENT YEAR-TO-DATE total for that category or event. This running EVENT YEAR-TO-DATE total should be disclosed after each disbursement is listed. Please amend your report by providing the correct EVENT YEAR-TO-DATE totals.

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A written response or an amendment to your original report(s) correcting the above problem(s) should be filed with the Federal Election Commission within fifteen (15) days of the date of this letter. If you need assistance, please feel free to contact me on our toll-free number, (800) 424-9530. My local number is (202) 694-1130.

Sincerely,

A handwritten signature in black ink, appearing to read "D. Averett", written in a cursive style.

Donald L. Averett
Senior Reports Analyst
Reports Analysis Division

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page

FOR LINE NUMBER 11C

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)

Minnesota Democratic Farmer Labor Party

C00025254

A. Full Name, Mailing Address and ZIP Code International Association of Firefighters Washington, DC 20006	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation	10/14/98	5000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	5000.00	

B. Full Name, Mailing Address and ZIP Code Laborers Political League 905 16th St. NW Washington DC 20006	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation	10/27/98	3000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	3000.00	

C. Full Name, Mailing Address and ZIP Code Leadership 98 1800 K Street NW #710 Washington, DC 20006	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation	10/15/98 10/16/98 10/21/98	2000.00 2000.00 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	5000.00	

D. Full Name, Mailing Address and ZIP Code Machinists Non-Partisan Political League 9000 Machinists Pl. Upper Marlboro, MD 20772	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation	10/19/98	5000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	6250.00	PCMA & Excess Refund 10/2 see sched. B pg. 1, line 28C

E. Full Name, Mailing Address and ZIP Code Mortgage Bankers - MDR PAC 1125 15th Street NW Washington DC 20005	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation	11/3/98	2070.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	2000.00	

F. Full Name, Mailing Address and ZIP Code National Education Association PAC 1201 16th St. NW Washington, DC 20036	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation	10/30/98	5000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	5000.00	

G. Full Name, Mailing Address and ZIP Code SEIU COPE US Division 1313 L Street NW Washington DC 20005	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation	10/26/98	5000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	5000.00	

GUSTOTAL of Receipts This Page (optional) 30000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER **11C**

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NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

C00025254

A. Full Name, Mailing Address and ZIP Code
The Progressive Politics Network
P.O. Box 65588
STPAUL, MN 55165

Name of Employer
 Occupation

Date (month, day, year)
10/30/98

Amount of Each Receipt this Period
1000.00

Receipt For: Primary General Other (specify):

Aggregate Year-to-Date > \$ **1750.00**

B. Full Name, Mailing Address and ZIP Code
Transportation Pol. Edu. League
14600 Detroit Avenue
Cleveland, OH 44107

Name of Employer
 Occupation

Date (month, day, year)
10/27/98

Amount of Each Receipt this Period
200.00

Receipt For: Primary General Other (specify):

Aggregate Year-to-Date > \$ **4700.00**

C. Full Name, Mailing Address and ZIP Code
UAW V CAP
8000 E. Jefferson Avenue
Detroit, MI 48214

Name of Employer
 Occupation

Date (month, day, year)
11/2/98

Amount of Each Receipt this Period
5000.00

Receipt For: Primary General Other (specify):

Aggregate Year-to-Date > \$ **5000.00**

D. Full Name, Mailing Address and ZIP Code
UNITE State & Local Election
1710 BROADWAY
NEW YORK, NY 10019

Name of Employer
 Occupation

Date (month, day, year)
11/16/98

Amount of Each Receipt this Period
2000.00

Receipt For: Primary General Other (specify):

Aggregate Year-to-Date > \$ **2000.00**

E. Full Name, Mailing Address and ZIP Code
United Food & Commercial Workers
1775 K Street NW
Washington, DC 20006

Name of Employer
 Occupation

Date (month, day, year)
11/2/98

Amount of Each Receipt this Period
5000.00

Receipt For: Primary General Other (specify):

Aggregate Year-to-Date > \$ **5000.00**

F. Full Name, Mailing Address and ZIP Code

Name of Employer
 Occupation

Date (month, day, year)

Amount of Each Receipt this Period

Receipt For: Primary General Other (specify):

Aggregate Year-to-Date > \$

G. Full Name, Mailing Address and ZIP Code

Name of Employer
 Occupation

Date (month, day, year)

Amount of Each Receipt this Period

Receipt For: Primary General Other (specify):

Aggregate Year-to-Date > \$

SUBTOTAL of Receipts This Page (optional) **13200.00**

TOTAL This Period (last page this line number only) **TOTAL LINE 11C 68700.00**

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 116

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NAME OF COMMITTEE (In Full)

Minnesota Democratic Farmer Labor Party C00025254

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<i>Mike for Congress Campaign 520 N 9th St. P.O. Box 5 Monticello, MN 56265</i>		<i>5/20/98</i>	<i>95.00</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date <i>> 6</i> 3,095.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<i>Wellstone for Senate P.O. Box 65588 St. Paul, MN 55165</i>		<i>4/6/98</i>	<i>1250.00</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date <i>> 6</i> 1250.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date <i>> 6</i>	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date <i>> 6</i>	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date <i>> 6</i>	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date <i>> 6</i>	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date <i>> 6</i>	

SUBTOTAL of Receipts This Page (optional)

1345.00

TOTAL This Period (last page this line number only)

TOTAL Line 116

1345.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1 FOR LINE NUMBER 116

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NAME OF COMMITTEE (In Full)

Minnesota Democratic Farmer Labor Party C00075254

A. Full Name, Mailing Address and ZIP Code Minke For Congress Campaign 520 N. 9th Street Montevideo, MN 56265 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer 18K C00264846	Date (month, day, year) 7/21/98	Amount of Each Receipt this Period 200.00
	Occupation Aggregate Year-to-Date > \$ 200.00		

B. Full Name, Mailing Address and ZIP Code Martin Sabo for Congress 2425 E. Franklin Avenue #301 Minneapolis, MN 55406 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer C00086728	Date (month, day, year) 7/21/98	Amount of Each Receipt this Period 100.00
	Occupation Aggregate Year-to-Date > \$ 100.00		

C. Full Name, Mailing Address and ZIP Code Jim Oberstar for U.S. Congress P.O. Box 465 Duluth, MN 55802 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer C00187419	Date (month, day, year) 8/31/98	Amount of Each Receipt this Period 200.00
	Occupation Aggregate Year-to-Date > \$ 200.00		

D. Full Name, Mailing Address and ZIP Code Jay Leino for Congress 7118 France Avenue N. Brooklyn Center, MN 55429 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer C00321968	Date (month, day, year) 9/14/98	Amount of Each Receipt this Period 160.00
	Occupation Aggregate Year-to-Date > \$ 160.00		

E. Full Name, Mailing Address and ZIP Code Colin Peterson for Congress P.O. Box 265 Detroit Lakes, MN 56502 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer C00253187	Date (month, day, year) 9/28/98	Amount of Each Receipt this Period 4000.00
	Occupation Aggregate Year-to-Date > \$ 4000.00		

F. Full Name, Mailing Address and ZIP Code Mary Reider for Congress P.O. Box 9250 Rochester, MN 55903 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer C00287649	Date (month, day, year) 9/30/98	Amount of Each Receipt this Period 100.00
	Occupation Aggregate Year-to-Date > \$ 100.00		

G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer 	Date (month, day, year) 	Amount of Each Receipt this Period
	Occupation Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional) 4760.00

TOTAL This Period (last page this line number only) TOTAL Line 116 4760.00

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 12

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)

Minnesota Democratic Farmer Labor Party C00025254

A. Full Name, Mailing Address and ZIP Code
DNC SERVICES CORPORATION
430 S CAPITOL ST SE
WASHINGTON, DC 20003
Receipt For: Primary General
 Other (specify):

Name of Employer
C00010603
Occupation
Aggregate Year-to-Date > 3178.33

Date (month, day, year)
9/20/98
Amount of Each Receipt this Period
3178.33

B. Full Name, Mailing Address and ZIP Code
Minge for Congress
520 N. 9th Street
Montevideo, MN 56265
Receipt For: Primary General
 Other (specify):

Name of Employer
C000264846
Occupation
Aggregate Year-to-Date > 15000.00

Date (month, day, year)
9/14/98
Amount of Each Receipt this Period
12000.00

C. Full Name, Mailing Address and ZIP Code
Oberstar U.S. Congress
P.O. Box 465
Duluth, MN 55802
Receipt For: Primary General
 Other (specify):

Name of Employer
C00187419
Occupation
Aggregate Year-to-Date > 12000.00

Date (month, day, year)
8/7/98
9/10/98
Amount of Each Receipt this Period
8000.00
4000.00

D. Full Name, Mailing Address and ZIP Code
Colin Peterson for Congress
P.O. Box 265
Detroit Lakes, MN 56502
Receipt For: Primary General
 Other (specify):

Name of Employer
C000253187
Occupation
Aggregate Year-to-Date > 12000.00

Date (month, day, year)
9/10/98
Amount of Each Receipt this Period
12000.00

E. Full Name, Mailing Address and ZIP Code
Martin Smed for Congress
2425 E. Franklin Ave
Minneapolis, MN 55406
Receipt For: Primary General
 Other (specify):

Name of Employer
C00086728
Occupation
Aggregate Year-to-Date > 16000.00

Date (month, day, year)
7/21/98
9/8/98
Amount of Each Receipt this Period
8000.00
8000.00

F. Full Name, Mailing Address and ZIP Code
State Party Victory Fund
430 S. Capitol Street SE
Washington, DC 20003
Receipt For: Primary General
 Other (specify):

Name of Employer
C00010603
Occupation
Aggregate Year-to-Date > 11548.80

Date (month, day, year)
7/10/98
8/20/98
Amount of Each Receipt this Period
1692.95
1695.76

G. Full Name, Mailing Address and ZIP Code
Volunteers for Vento
P.O. Box 65254
St Paul, MN 55165
Receipt For: Primary General
 Other (specify):

Name of Employer
C00046003
Occupation
Aggregate Year-to-Date > 12000.00

Date (month, day, year)
5/21/98
9/10/98
Amount of Each Receipt this Period
8000.00
4000.00

SUBTOTAL of Receipts This Page (optional)

70567.04

TOTAL This Period (last page this line number only)

TOTAL Line 12

70567.04

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full) **Minnesota Democratic-Farmer Labor Party** C00025254

A. Full Name, Mailing Address and ZIP Code
2ND Congressional District
6364 25th St-NW
MAPLE LAKE, MN 55358

Receipt For: Primary General
 Other (specify):

Name of Employer
C00068981

Occupation

Aggregate Year-to-Date > \$ **5000.00**

Date (month, day, year)
10/20/98

Amount of Each Receipt this Period
5000.00

B. Full Name, Mailing Address and ZIP Code
SABO FOR CONGRESS
2425 E. FRANKLIN AVE #301
MINNEAPOLIS, MN 55406

Receipt For: Primary General
 Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date > \$ **3200.00**

Date (month, day, year)
10/19/98
10/26/98

Amount of Each Receipt this Period
2000.00
1200.00

C. Full Name, Mailing Address and ZIP Code

Receipt For: Primary General
 Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date > \$

Date (month, day, year)

Amount of Each Receipt this Period

D. Full Name, Mailing Address and ZIP Code

Receipt For: Primary General
 Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date > \$

Date (month, day, year)

Amount of Each Receipt this Period

E. Full Name, Mailing Address and ZIP Code

Receipt For: Primary General
 Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date > \$

Date (month, day, year)

Amount of Each Receipt this Period

F. Full Name, Mailing Address and ZIP Code

Receipt For: Primary General
 Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date > \$

Date (month, day, year)

Amount of Each Receipt this Period

G. Full Name, Mailing Address and ZIP Code

Receipt For: Primary General
 Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date > \$

Date (month, day, year)

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	8200.00
TOTAL This Period (last page this line number only)	TOTAL Line 116 8200.00

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 12

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NAME OF COMMITTEE (in Full)

Minnesota Democratic-Farmer-Labor Party

C00025254

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Monte For Congress 520 N. 9th St. Montevideo, MN 56265		10/16/98	3000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 17900.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Opentax For Congress P.O. Box 465 Duluth, MN 55802		10/20/98	4000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 25000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Peterson for Congress P.O. Box 265 Detroit Lakes, MN 56502		10/30/98	7000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 18800.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
State Party Victory Fund 430 South Capital Street SE Washington, DC 20003		10/23/98	2543.20
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 19092.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

16543.20

TOTAL This Period (last page this line number only)

TOTAL Line 12

16543.20

