

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 Robins Kaplan PAC

ADDRESS (number and street) 800 LaSalle Ave. Suite 2800 Minneapolis MN 55402 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00275909 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X]

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report (MY) [X], Termination Report (TER) (b) Monthly Report Due On: Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S) (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

5. Covering Period 01 / 01 / 2017 through 06 / 30 / 2017

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Vaughn, Brandon, E., , Type or Print Name of Treasurer

Signature of Treasurer Vaughn, Brandon, E., , [Electronically Filed] Date 07 / 31 / 2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

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Page 2

Write or Type Committee Name

Robins Kaplan PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2017"/>	<input type="text" value="1664.41"/>	<input type="text" value="1664.41"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="1664.41"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="10108.12"/>	<input type="text" value="10108.12"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="11772.53"/>	<input type="text" value="11772.53"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="12900.00"/>	<input type="text" value="12900.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="- 1127.47"/>	<input type="text" value="- 1127.47"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

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

Write or Type Committee Name

Robins Kaplan PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	3261.26	3261.26
(ii) Unitemized	6846.86	6846.86
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	10108.12	10108.12
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	10108.12	10108.12
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	10108.12	10108.12
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	10108.12	10108.12

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	12900.00	12900.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. 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 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	12900.00	12900.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12900.00	12900.00

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	10108.12	10108.12
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10108.12	10108.12
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 13
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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)
Robins Kaplan PAC

A. Froio, Anthony A., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Valley Forge Drive
 City Shrewsbury State MA Zip Code 01545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Robins, Kaplan, Miller & Ciresi LLP Occupation (for Individual) Lawyer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 252.25

Date of Receipt 02 / 08 / 2017
Transaction ID : SA11AI.15552
 Amount of Each Receipt this Period 252.25
 Memo Item

B. Holdreith, Jacob M., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2199 Saint Clair Avenue
 City St. Paul State MN Zip Code 55105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Robins Kaplan Miller & Ciresi Occupation (for Individual) Lawyer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.23

Date of Receipt 02 / 08 / 2017
Transaction ID : SA11AI.15557
 Amount of Each Receipt this Period 225.23
 Memo Item

C. Larus, Chris, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7018 Dakota Circle
 City Chanhassen State MN Zip Code 55317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Robins Kaplan Miller & Ciresi Occupation (for Individual) Lawyer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.23

Date of Receipt 02 / 08 / 2017
Transaction ID : SA11AI.15563
 Amount of Each Receipt this Period 225.23
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 702.71
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 13
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Robins Kaplan PAC

A. Lueck, Martin R., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3250 Fox Street
 City Long Lake State MN Zip Code 55356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Robins Kaplan Miller & Ciresi Occupation (for Individual) Lawyer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 324.32

Date of Receipt **02 / 08 / 2017**
Transaction ID : SA11AI.15568
 Amount of Each Receipt this Period 324.32
 Memo Item

B. Madel, Christopher W., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4725 Vine Hill Road
 City Deephaven State MN Zip Code 55331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Robins Kaplan Miller & Ciresi Occupation (for Individual) Lawyer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 288.29

Date of Receipt **02 / 08 / 2017**
Transaction ID : SA11AI.15570
 Amount of Each Receipt this Period 288.29
 Memo Item

C. Peterson, Kathleen F., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 222 2nd Street SE Unit 901
 City Minneapolis State MN Zip Code 55414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Robins Kaplan Miller & Ciresi Occupation (for Individual) Lawyer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 288.29

Date of Receipt **02 / 08 / 2017**
Transaction ID : SA11AI.15582
 Amount of Each Receipt this Period 288.29
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	900.90
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 13
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Robins Kaplan PAC

A. Safranski, Stephen, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6552 Cherokee Trail W
 City Eden Prairie State MN Zip Code 55344
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Robins Kaplan Miller & Ciresi Occupation (for Individual) Lawyer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 252.25

Date of Receipt 02 / 08 / 2017
Transaction ID : SA11AI.15586
 Amount of Each Receipt this Period 252.25
 Memo Item

B. Salzman, Hollis, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 245E 25th Street Suite 6D
 City New York State NY Zip Code 10010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Robins Kaplan LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 252.25

Date of Receipt 02 / 08 / 2017
Transaction ID : SA11AI.15587
 Amount of Each Receipt this Period 252.25
 Memo Item

C. Schutz, Ronald J., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 865 Navajo Road
 City Medina State MN Zip Code 55340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Robins Kaplan Miller & Ciresi Occupation (for Individual) Lawyer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 324.32

Date of Receipt 02 / 08 / 2017
Transaction ID : SA11AI.15590
 Amount of Each Receipt this Period 324.32
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	828.82
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 13
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Robins Kaplan PAC

A. Sutton, Tara D., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2943 Fairview Lane
 City Orono State MN Zip Code 55356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Robins Kaplan Miller & Ciresi Occupation (for Individual) Lawyer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 288.29

Date of Receipt 02 / 08 / 2017
Transaction ID : SA11AI.15596
 Amount of Each Receipt this Period 288.29
 Memo Item

B. Wildfang, K. Craig, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18397 Nicklaus Way
 City Eden Prairie State MN Zip Code 55347
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Robins, Kaplan, Miller & Ciresi LLP Occupation (for Individual) Lawyer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 288.29

Date of Receipt 02 / 08 / 2017
Transaction ID : SA11AI.15606
 Amount of Each Receipt this Period 288.29
 Memo Item

C. Woods, Matthew L., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6745 Lakeway Drive
 City Chanhassen State MN Zip Code 55317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Robins Kaplan Miller & Ciresi Occupation (for Individual) Lawyer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 252.25

Date of Receipt 02 / 08 / 2017
Transaction ID : SA11AI.15608
 Amount of Each Receipt this Period 252.25
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	828.83
TOTAL This Period (last page this line number only).....	3261.26

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Robins Kaplan PAC

A. AMERICAN ASSOCIATION FOR JUSTICE POLITICAL ACTION COMMITTEE (AAJ PAC)

Full Name (Last, First, Middle Initial)
Date of Disbursement: MM / DD / YYYY
03 / 14 / 2017

Mailing Address 777 6th Street, NW
Suite 200

City Washington State DC Zip Code 20001

Purpose of Disbursement contribution
FEC Identification Number: C 00024521
Transaction ID : SB23.15528
Amount of Each Disbursement this Period: 5000.00

Candidate Name
Category/Type

Office Sought: House Senate President
Disbursement For: 2017
 Primary General Other (specify) ▼

State: District:

Memo Item

B. Bill Nelson for U.S. Senate

Full Name (Last, First, Middle Initial)
Date of Disbursement: MM / DD / YYYY
06 / 15 / 2017

Mailing Address 500 Red Sail Way

City Satellite Beach State FL Zip Code 32937

Purpose of Disbursement contribution
FEC Identification Number: C 000344051
Transaction ID : SB23.15611
Amount of Each Disbursement this Period: 250.00

Candidate Name
Category/Type

Office Sought: House Senate President
Disbursement For: 2018
 Primary General Other (specify) ▼

State: FL District: 00

Memo Item

C. Bob Casey for Pennsylvania Committee

Full Name (Last, First, Middle Initial)
Date of Disbursement: MM / DD / YYYY
06 / 15 / 2017

Mailing Address P.O. Box 1177

City Harrisburg State PA Zip Code 17108

Purpose of Disbursement contribution
FEC Identification Number: C
Transaction ID : SB23.15538
Amount of Each Disbursement this Period: 250.00

Candidate Name
Category/Type

Office Sought: House Senate President
Disbursement For: 2018
 Primary General Other (specify) ▼

State: PA District:

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5500.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Robins Kaplan PAC

Full Name (Last, First, Middle Initial) A. HEIDI FOR SENATE		Date of Disbursement MM / DD / YYYY 02 / 08 / 2017
Mailing Address PO BOX 1577		FEC Identification Number C00505552 Transaction ID : SB23.15527 Amount of Each Disbursement this Period 1000.00
City BISMARCK	State ND	Zip Code 58502
Purpose of Disbursement contribution		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: ND	District: 00	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. KLOBUCHAR FOR MINNESOTA		Date of Disbursement MM / DD / YYYY 03 / 30 / 2017
Mailing Address 1430 CONCORDIA AVENUE PO BOX 4146		FEC Identification Number C00410191 Transaction ID : SB23.15530 Amount of Each Disbursement this Period 1900.00
City SAINT PAUL	State MN	Zip Code 55104
Purpose of Disbursement contribution		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MN	District: 00	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. Lindsey Graham for Senate		Date of Disbursement MM / DD / YYYY 05 / 16 / 2017
Mailing Address P.O. Box 1155		FEC Identification Number C00364505 Transaction ID : SB23.15531 Amount of Each Disbursement this Period 2000.00
City Seneca	State SC	Zip Code 29679
Purpose of Disbursement contribution		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: SC	District:	<input type="checkbox"/> Memo Item

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

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

4900.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Robins Kaplan PAC

A. MCCASKILL FOR MISSOURI

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 6771

City ST LOUIS State MO Zip Code 63144

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: MO District: 00

Disbursement For: 2018
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 15 / 2017

FEC Identification Number

C C00414961

Transaction ID : SB23.15610

Amount of Each Disbursement this Period

250.00

Memo Item

B. McCollum for Congress

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 14131

City St. Paul State MN Zip Code 55114

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: MN District: 04

Disbursement For: 2018
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 15 / 2017

FEC Identification Number

C

Transaction ID : SB23.15529

Amount of Each Disbursement this Period

1000.00

Memo Item

C. McCollum for Congress

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 14131

City St. Paul State MN Zip Code 55114

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: MN District: 04

Disbursement For: 2018
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 26 / 2017

FEC Identification Number

C

Transaction ID : SB23.15533

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

2250.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Robins Kaplan PAC

A. MONTANANS FOR TESTER

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 1248

City: BIG SANDY State: MT Zip Code: 59520

Purpose of Disbursement: contribution

Candidate Name: _____

Office Sought: House Senate President
 Disbursement For: 2018 Primary General Other (specify) ▼

State: MT District: 00

Date of Disbursement: 06 / 15 / 2017

FEC Identification Number: C 000412304
 Transaction ID : SB23.15612
 Amount of Each Disbursement this Period: 250.00

Memo Item

B.

Full Name (Last, First, Middle Initial)
Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State District

Date of Disbursement

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)
Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State District

Date of Disbursement

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	12900.00