

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Minnesota Democratic-Farmer-Labor Party

ADDRESS (number and street) 255 East Plato Blvd
 Check if different than previously reported. (ACC)
Saint Paul MN 55107

2. **FEC IDENTIFICATION NUMBER** C00025254
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 04 01 2009 through 04 30 2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Lori Sellner

Signature of Treasurer Electronically Filed by Lori Sellner Date 10 08 2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only									
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FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Minnesota Democratic-Farmer-Labor Party

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		152523.33
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	380039.12									
(c) Total Receipts (from Line 19)	256375.36	1741299.97								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	636414.48	1893823.30								
7. Total Disbursements (from Line 31)	602424.03	1859832.85								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	33990.45	33990.45								
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)	183347.71									

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Minnesota Democratic-Farmer-Labor Party

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	9

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)	13947.49	39055.80
(ii) Unitemized	9505.65	84729.37
(iii) TOTAL (add Lines 11(a)(i) and (ii)	23453.14	123785.17
(b) Political Party Committees	3220.00	6570.00
(c) Other Political Committees (such as PACs)	30732.61	34554.64
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	57405.75	164909.81
12. Transfers From Affiliated/Other Party Committees	23581.58	109712.52
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)	18239.56	101599.55
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	104443.91	1255746.81
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	52704.56	109331.28
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	52704.56	109331.28
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	256375.36	1741299.97
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	203670.80	1631968.69

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	15147.08	104662.45
(ii) Non-Federal Share.....	35693.13	165216.72
(b) Other Federal Operating Expenditures.....	76315.71	244630.62
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	127155.92	514509.79
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(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	250.00	250.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	10000.00	10000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	10250.00	10250.00
29. Other Disbursements.....	463278.15	1326768.60
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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	1739.96	8304.46
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	1739.96	8304.46
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	602424.03	1859832.85
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	566730.90	1694616.13

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	57405.75	164909.81
34. Total Contribution Refunds (from Line 28(d))	10250.00	10250.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	47155.75	154659.81
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	91462.79	349293.07
37. Offsets to Operating Expenditures (from Line 15, page 3)	18239.56	101599.55
38. Net Operating Expenditures (subtract Line 37 from Line 36)	73223.23	247693.52

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 86
(check only one)

<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

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

A.

Full Name (Last, First, Middle Initial)
Judith Bird

Mailing Address 960 Historic Dr SW

City State Zip Code
Rochester MN 55902-6615

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

Name of Employer Occupation
St Thomas University Administrator

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
04 / 06 / 2009

Transaction ID: C5193912

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Paul Brawner

Mailing Address C/O TCF Voluntary Political Contri
801 Marquette Ave

City State Zip Code
Minneapolis MN 55402

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

Name of Employer Occupation
TCF Bank Vice President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
04 / 09 / 2009

Transaction ID: C5197145

Amount of Each Receipt this Period
300.00

C.

Full Name (Last, First, Middle Initial)
Michael Bryant

Mailing Address 2610 Boone Ave S

City State Zip Code
Saint Louis Park MN 55426-2432

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

Name of Employer Occupation
Bradshaw and Bryant PLLC Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
04 / 06 / 2009

Transaction ID: C5192191

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **800.00**

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: PAGE 7 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial)
Dominic Ciresi

Mailing Address 1942 Dupont Ave S

City State Zip Code
Minneapolis MN 55403

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Haskell's Executive

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 2 / 2 0 0 9

Transaction ID: C5214936

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
William Davis

Mailing Address 2104 Park Ave S

City State Zip Code
Minneapolis MN 55404

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Community Action of Minneapolis President/CEO

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1275.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 0 9

Transaction ID: C5192198

Amount of Each Receipt this Period
1250.00

C. Full Name (Last, First, Middle Initial)
Joseph Deuhs Sr

Mailing Address 311 Pleasant Ave Apt 411

City State Zip Code
Saint Paul MN 55102-2371

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Retired Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 0 9

Transaction ID: C5206060

Amount of Each Receipt this Period
225.00

SUBTOTAL of Receipts This Page (optional) 1725.00

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: PAGE 8 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A.

Full Name (Last, First, Middle Initial)
Daniel Fanning

Mailing Address PO Box 161113

City State Zip Code
Duluth MN 55816-1113

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

Name of Employer Occupation
Marty for Governor Campaign Manager

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	3	/	2	0	0	9

Transaction ID: C5214905

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Shelley Fitzmaurice

Mailing Address 801 Marquette Ave
WYZ-02-A

City State Zip Code
Minneapolis MN 55402

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

Name of Employer Occupation
TCF National Bank Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	9	/	2	0	0	9

Transaction ID: C5197142

Amount of Each Receipt this Period
300.00

C.

Full Name (Last, First, Middle Initial)
Louis W Frillman

Mailing Address 333 S 7th St
Ste 2300

City State Zip Code
Minneapolis MN 55402-2430

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

Name of Employer Occupation
GVA Marquette President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	6	/	2	0	0	9

Transaction ID: C5192200

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **1550.00**

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 / 86
	<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)
Minnesota Democratic-Farmer-Labor Party

A.	Full Name (Last, First, Middle Initial) Joseph T Green		Date of Receipt
	Mailing Address 801 Marquette Ave WYZ-02-A		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 04 / 09 / 2009
	City	State	Zip Code
	Minneapolis	MN	55402
	FEC ID number of contributing federal political committee. C		Transaction ID: C5195180
Name of Employer TCF National Bank		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 300.00

B.	Full Name (Last, First, Middle Initial) William Harper		Date of Receipt
	Mailing Address 16276 Swede Hill Dr S		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 04 / 06 / 2009
	City	State	Zip Code
	Afton	MN	55001-9637
	FEC ID number of contributing federal political committee. C		Transaction ID: C5192195
Name of Employer Harper & Peterson		Occupation Partner	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00

C.	Full Name (Last, First, Middle Initial) James Hiller		Date of Receipt
	Mailing Address 5638 Glen Ave		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 04 / 03 / 2009
	City	State	Zip Code
	Minnetonka	MN	55345-6610
	FEC ID number of contributing federal political committee. C		Transaction ID: C5214899
Name of Employer Honeywell		Occupation Office	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 800.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 86
(check only one)

<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)
Minnesota Democratic-Farmer-Labor Party

A.

Full Name (Last, First, Middle Initial) Betsy Hodges		Date of Receipt MM / DD / YYYY 04 / 03 / 2009
Mailing Address 4312 Linden Hills Blvd Apt 203		Transaction ID: C5214098
City Minneapolis	State MN	Zip Code 55410-1630
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self Employed	Occupation Consultant	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.

Full Name (Last, First, Middle Initial) Gail Jackson		Date of Receipt MM / DD / YYYY 04 / 02 / 2009
Mailing Address 155 Central Ave S		Transaction ID: C5224924
City Milaca	State MN	Zip Code 56353-1122
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer State of Minnesota	Occupation Representative	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.

Full Name (Last, First, Middle Initial) Dan Knuth		Date of Receipt MM / DD / YYYY 04 / 03 / 2009
Mailing Address 1106 Rockstone Ln		Transaction ID: C5214097
City New Brighton	State MN	Zip Code 55112-1614
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Dan Knuth Government Affairs	Occupation Consultant	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
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: PAGE 11 / 86
(check only one)

<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)
Minnesota Democratic-Farmer-Labor Party

A.

Full Name (Last, First, Middle Initial)
David Lillehaug

Mailing Address 6701 Parkwood Ln

City Edina State MN Zip Code 55436-1735

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

Name of Employer Fredrickson & Byron Occupation Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 04 / 16 / 2009

Transaction ID: C5201209

Amount of Each Receipt this Period 1250.00

B.

Full Name (Last, First, Middle Initial)
Eric James Margolis

Mailing Address 649 North Van Buren Trail

City Hopkins State MN Zip Code 55343-8148

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

Name of Employer Self Occupation Web Page Designer

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 414.16

Date of Receipt 04 / 03 / 2009

Transaction ID: C5191856

Amount of Each Receipt this Period 22.50

C.

Full Name (Last, First, Middle Initial)
Eric James Margolis

Mailing Address 649 North Van Buren Trail

City Hopkins State MN Zip Code 55343-8148

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

Name of Employer Self Occupation Web Page Designer

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 414.16

Date of Receipt 04 / 13 / 2009

Transaction ID: C5209185

Amount of Each Receipt this Period 83.33

SUBTOTAL of Receipts This Page (optional) ► **1355.83**

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: PAGE 12 / 86
(check only one)

<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)
Minnesota Democratic-Farmer-Labor Party

A.

Full Name (Last, First, Middle Initial)
Judy Melanson

Mailing Address 5415 24th Ave S

City Minneapolis State MN Zip Code 55417-1909

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 03 / 2009

Transaction ID: C5187143

Amount of Each Receipt this Period 500.00

B.

Full Name (Last, First, Middle Initial)
Michael Olson

Mailing Address 801 Marquette Ave
C/O TCF Voluntary Political Contri

City Minneapolis State MN Zip Code 55402-2807

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

Name of Employer TCF National Bank Occupation Executive

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 09 / 2009

Transaction ID: C5195186

Amount of Each Receipt this Period 300.00

C.

Full Name (Last, First, Middle Initial)
David T Schultz

Mailing Address 885 Goodrich Ave

City Saint Paul State MN Zip Code 55105-3125

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

Name of Employer Maslon Edelman & Borman Occupation Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 06 / 2009

Transaction ID: C5192190

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 1050.00

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: PAGE 13 / 86
(check only one)

<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)
Minnesota Democratic-Farmer-Labor Party

A.

Full Name (Last, First, Middle Initial)
Tina Flint Smith

Mailing Address 4720 W Lake Harriet Parkway

City State Zip Code
Minneapolis MN 55410-1923

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

Name of Employer Occupation
McWilliams Cosgrove Consultant

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
04 / 09 / 2009

Transaction ID: C5194183

Amount of Each Receipt this Period
5000.00

B.

Full Name (Last, First, Middle Initial)
Cordy Strand

Mailing Address 33801 446th PI

City State Zip Code
Aitkin MN 56431-5089

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

Name of Employer Occupation
Retired Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
583.32

Date of Receipt
MM / DD / YYYY
04 / 01 / 2009

Transaction ID: C5209196

Amount of Each Receipt this Period
83.33

C.

Full Name (Last, First, Middle Initial)
Cordy Strand

Mailing Address 33801 446th PI

City State Zip Code
Aitkin MN 56431-5089

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

Name of Employer Occupation
Retired Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
583.32

Date of Receipt
MM / DD / YYYY
04 / 29 / 2009

Transaction ID: C5206051

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **5333.33**

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:	PAGE 14 / 86
	(check only one)	
<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)
Minnesota Democratic-Farmer-Labor Party

A.

Full Name (Last, First, Middle Initial)
Jennifer Thomas

Mailing Address 4744 Thomas Ave S

City State Zip Code
Minneapolis MN 55410-1834

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

Name of Employer Self Employed Occupation
Consultant

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
MM / DD / YYYY
04 / 03 / 2009

Transaction ID: C5214907

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Rolf E. Westgard

Mailing Address 25189 Moonrise Trl

City State Zip Code
Deerwood MN 56444-8832

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

Name of Employer N/A Occupation
Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1483.32

Date of Receipt
MM / DD / YYYY
04 / 17 / 2009

Transaction ID: C5209203

Amount of Each Receipt this Period
83.33

SUBTOTAL of Receipts This Page (optional)	333.33
TOTAL This Period (last page this line number only)	13947.49

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 15 / 86
	(check only one)	
<input type="checkbox"/> 11a	<input checked="" 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)
Minnesota Democratic-Farmer-Labor Party

A.

Full Name (Last, First, Middle Initial) Democratic National Committee		Date of Receipt
Mailing Address 430 S Capitol St SE Federal Fund		<input type="text" value="04"/> / <input type="text" value="19"/> / <input type="text" value="2009"/>
City	State	Zip Code
Washington	DC	20003-4024
FEC ID number of contributing federal political committee.	<input type="text" value="C00010603"/>	Transaction ID: C5226098
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="265151.58"/>	<input type="text" value="3220.00"/>

* In-Kind: On Line Voter File Access

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="3220.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="3220.00"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 86
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial)
Friends of Jim Oberstar

Mailing Address PO Box 465

City Duluth State MN Zip Code 55801-0465

FEC ID number of contributing federal political committee. **C** C00187419

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 16275.00

Date of Receipt: 04 / 09 / 2009
Transaction ID: C5194171
Amount of Each Receipt this Period: 15000.00

Transfer of Excess Funds

B. Full Name (Last, First, Middle Initial)
McCollum (Betty) for Congress

Mailing Address PO Box 14131

City Saint Paul State MN Zip Code 55114

FEC ID number of contributing federal political committee. **C** C00354688

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 6250.00

Date of Receipt: 04 / 20 / 2009
Transaction ID: C5201232
Amount of Each Receipt this Period: 5000.00

Transfer of Excess Funds

C. Full Name (Last, First, Middle Initial)
Obama for America

Mailing Address PO Box 8102

City Chicago State IL Zip Code 60680

FEC ID number of contributing federal political committee. **C** C00431445

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 732.61

Date of Receipt: 04 / 09 / 2009
Transaction ID: C5406576
Amount of Each Receipt this Period: 732.61

* In-Kind: COBRA premium CFC employees

SUBTOTAL of Receipts This Page (optional) ► 20732.61

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: PAGE 17 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A.

Full Name (Last, First, Middle Initial)
Tinklenberg for Congress

Mailing Address PO Box 49787

City State Zip Code
Blaine MN 55449

FEC ID number of contributing federal political committee. **C** C00411066

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 0 9

Transaction ID: C5186013

Amount of Each Receipt this Period
10000.00

Transfer of Excess Funds

SUBTOTAL of Receipts This Page (optional)	▶	10000.00
TOTAL This Period (last page this line number only)	▶	30732.61

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 18 / 86
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A.

Full Name (Last, First, Middle Initial) Democratic National Committee		Date of Receipt MM / DD / YYYY 04 / 30 / 2009
Mailing Address 430 S Capitol St SE Federal Fund		Transaction ID: C5206300
City Washington	State DC	Zip Code 20003-4024
FEC ID number of contributing federal political committee. C C00010603	Amount of Each Receipt this Period 8581.58	
Name of Employer	Occupation	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265151.58	

B.

Full Name (Last, First, Middle Initial) Dollars for Democrats		Date of Receipt MM / DD / YYYY 04 / 22 / 2009
Mailing Address 430 S Capitol St SE C00073791		Transaction ID: C5201247
City Washington	State DC	Zip Code 20003
FEC ID number of contributing federal political committee. C C00073791	Amount of Each Receipt this Period 15000.00	
Name of Employer	Occupation	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 96000.00	

SUBTOTAL of Receipts This Page (optional)	23581.58
TOTAL This Period (last page this line number only)	23581.58

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 86

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A.

Full Name (Last, First, Middle Initial)
Ellison (Keith) for Congress

Mailing Address 1629 Bryant Ave N

City State Zip Code
Minneapolis MN 55411

FEC ID number of contributing federal political committee. **C** C00422410

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
46188.50

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 0 / 2 0 0 9

Transaction ID: C5198825

Amount of Each Receipt this Period

4760.12

Payroll Service

B.

Full Name (Last, First, Middle Initial)
Ellison (Keith) for Congress

Mailing Address 1629 Bryant Ave N

City State Zip Code
Minneapolis MN 55411

FEC ID number of contributing federal political committee. **C** C00422410

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
46188.50

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 2 / 2 0 0 9

Transaction ID: C5201246

Amount of Each Receipt this Period

4402.00

Payroll Service

C.

Full Name (Last, First, Middle Initial)
Ellison (Keith) for Congress

Mailing Address 1629 Bryant Ave N

City State Zip Code
Minneapolis MN 55411

FEC ID number of contributing federal political committee. **C** C00422410

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
46188.50

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 9 / 2 0 0 9

Transaction ID: C5206052

Amount of Each Receipt this Period

3.79

Actual Cost of Email Service

SUBTOTAL of Receipts This Page (optional)

9165.91

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: PAGE 20 / 86
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A.

Full Name (Last, First, Middle Initial)
QWest

Mailing Address PO Box 1301

City State Zip Code
Minneapolis MN 55483-0002

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
39331.01

Date of Receipt
MM / DD / YYYY
04 / 29 / 2009

Transaction ID: C5206039

Amount of Each Receipt this Period
28.38

Refund

B.

Full Name (Last, First, Middle Initial)
QWest

Mailing Address PO Box 1301

City State Zip Code
Minneapolis MN 55483-0002

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
39331.01

Date of Receipt
MM / DD / YYYY
04 / 29 / 2009

Transaction ID: C5206040

Amount of Each Receipt this Period
100.85

Refund

C.

Full Name (Last, First, Middle Initial)
QWest

Mailing Address PO Box 1301

City State Zip Code
Minneapolis MN 55483-0002

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
39331.01

Date of Receipt
MM / DD / YYYY
04 / 29 / 2009

Transaction ID: C5206041

Amount of Each Receipt this Period
783.18

Refund

SUBTOTAL of Receipts This Page (optional) ► **912.41**

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: PAGE 21 / 86
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A.

Full Name (Last, First, Middle Initial)
QWest

Mailing Address PO Box 1301

City State Zip Code
Minneapolis MN 55483-0002

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
39331.01

Date of Receipt
MM / DD / YYYY
04 / 29 / 2009

Transaction ID: C5206042

Amount of Each Receipt this Period
975.34

Refund

B.

Full Name (Last, First, Middle Initial)
QWest

Mailing Address PO Box 1301

City State Zip Code
Minneapolis MN 55483-0002

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
39331.01

Date of Receipt
MM / DD / YYYY
04 / 29 / 2009

Transaction ID: C5206043

Amount of Each Receipt this Period
835.00

Refund

C.

Full Name (Last, First, Middle Initial)
QWest

Mailing Address PO Box 1301

City State Zip Code
Minneapolis MN 55483-0002

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
39331.01

Date of Receipt
MM / DD / YYYY
04 / 29 / 2009

Transaction ID: C5206044

Amount of Each Receipt this Period
1279.44

Refund

SUBTOTAL of Receipts This Page (optional) ► **3089.78**

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: PAGE 22 / 86

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A.

Full Name (Last, First, Middle Initial)
QWest

Mailing Address PO Box 1301

City State Zip Code
Minneapolis MN 55483-0002

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
39331.01

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 0 9

Transaction ID: C5206288

Amount of Each Receipt this Period

897.61

Refund

B.

Full Name (Last, First, Middle Initial)
QWest

Mailing Address PO Box 1301

City State Zip Code
Minneapolis MN 55483-0002

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
39331.01

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 0 9

Transaction ID: C5206289

Amount of Each Receipt this Period

756.20

Refund

C.

Full Name (Last, First, Middle Initial)
QWest

Mailing Address PO Box 1301

City State Zip Code
Minneapolis MN 55483-0002

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
39331.01

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 0 9

Transaction ID: C5206290

Amount of Each Receipt this Period

737.43

Refund

SUBTOTAL of Receipts This Page (optional)

2391.24

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: PAGE 23 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial)
QWest
Mailing Address PO Box 1301
City Minneapolis State MN Zip Code 55483-0002
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 39331.01
Date of Receipt: 04 / 30 / 2009
Transaction ID: C5206291
Amount of Each Receipt this Period: 718.41
Refund

B. Full Name (Last, First, Middle Initial)
QWest
Mailing Address PO Box 1301
City Minneapolis State MN Zip Code 55483-0002
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 39331.01
Date of Receipt: 04 / 30 / 2009
Transaction ID: C5206292
Amount of Each Receipt this Period: 1103.61
Refund

C. Full Name (Last, First, Middle Initial)
Xcel Energy
Mailing Address 414 Nicollet Mall
City Minneapolis State MN Zip Code 55401-1927
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 785.60
Date of Receipt: 04 / 29 / 2009
Transaction ID: C5214948
Amount of Each Receipt this Period: 785.60
Refund

SUBTOTAL of Receipts This Page (optional) ► 2607.62
TOTAL This Period (last page this line number only) ► 18166.96

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 86
(check only one)

<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A.

Full Name (Last, First, Middle Initial) Franken Recount Fund		Date of Receipt MM / DD / YYYY 04 / 14 / 2009
Mailing Address 4190 Vinewood Ln N # 111-554		Transaction ID: C5201157
City Minneapolis	State MN	Zip Code 55442-1715
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 64560.13
Name of Employer	Occupation	
Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Recount	Aggregate Year-to-Date ▼ 959055.13	

B.

Full Name (Last, First, Middle Initial) Franken Recount Fund		Date of Receipt MM / DD / YYYY 04 / 28 / 2009
Mailing Address 4190 Vinewood Ln N # 111-554		Transaction ID: C5205962
City Minneapolis	State MN	Zip Code 55442-1715
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30000.00
Name of Employer	Occupation	
Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Recount	Aggregate Year-to-Date ▼ 959055.13	

C.

Full Name (Last, First, Middle Initial) State Tax Checkoff - MN Dept. of Revenue		Date of Receipt MM / DD / YYYY 04 / 16 / 2009
Mailing Address PO Box 821		Transaction ID: C5223334
City Minneapolis	State MN	Zip Code 55480-0821
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 9828.00
Name of Employer	Occupation	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 19985.90	

State Check Off Money

SUBTOTAL of Receipts This Page (optional)	104388.13
TOTAL This Period (last page this line number only)	104388.13

A. Form/Schedule : **SA17**
Transaction ID : **C5201157**

Winston Barbara 03/26/2009 \$1,000.00 2219 Del Monte Houston TX 77019 Retired Ludwig Eugene 03/30/2009 \$1,000.00 2629 Foxhall Rd NW Washington DC 20007 Promontory Interfinancial Network Managing Partner Kovner Victor 03/30/2009 \$700.00 27 W 67th St New York NY 10023 Davis Wright Tremaine Attorney Crosby Harriet 03/30/2009 \$1,500.00 6515 79th Pl Cabin John MD 20818 ISAR CEO Bunge Jonathan 03/31/2009 \$200.00 339 White Oak Ln Winnetka IL 60093 Kirkland Ellis Attorney Lakhani Muslim 03/30/2009 \$200.00 1111 23rd St PH 2A Washington DC 20037 ML Resources CEO Gordon Rena 03/29/2009 \$200.00 11607 Springridge Rd Potomac MD 20854 Not Employed Not Employed Burgy William 03/30/2009 \$2,700.00 11529 Stardust Ln Ellicott City MD 21042 Law Office of Peter T Nicholl Attorney Goldberg Henry 03/30/2009 \$5,000.00 7200 Wisconsin Ave Bethesda MD 20814 Atery Group LLC Owner Goldberg Carol 03/30/2009 \$5,000.00 5630 Wisconsin Ave #1702W Chevy Chase MD 20815 American University Professor Benter William 03/30/2009 \$10,000.00 2901 Smallman St 5D Pittsburgh PA 15201 Self-Employed Business Owner Rice Edward 03/30/2009 \$10,000.00 2217 Halcon Ln Vienna VA 22181 Self-Employed Consultant Sussman Donald 03/30/2009 \$10,000.00 6100 Red Hook Qtrs St. Thomas VI 802 Self-Employed Financial Advisor America's Leadership PAC 03/26/2009 \$5,000.00 607 14th St NW #800 Washington DC 20005 C-00375584 New Jersey First 03/26/2009 \$5,000.00 PO Box 200597 Newark NJ 07102 C-00391458 UAW V CAP 03/30/2009 \$5,000.00 8000 East Jefferson Detroit MI 48214 C-00002840 To Organize A Majority PAC 03/30/2009 \$5,000.00 PO Box 752 Des Moines IA 50303 C-00385732

B. Form/Schedule : **SA17**
Transaction ID : **C5205962**

Richard Warner 04/12/2009 \$200.00 3100 Newport Ct Arlington TX 76015 SDS Software Engineer Marc Seltzer 04/07/2009 \$200.00 1022 Ridgedale Dr Beverly Hills CA 90210 Susman Godfrey Attorney Michael Klein 04/10/2009 \$200.00 500 W Texas Midland TX 79701 Midland Oil Executive Wolfe Rudman 04/07/2009 \$2,700.00 1700 Pacific Ave Suite 4700 Dallas TX 75201 The Rudman Partnership Executive Max L Tribble Jr 04/21/2009 \$2,700.00 3461 Piping Rock Houston TX 77027 Susman Godfrey Attorney H Lee Godfrey 04/21/2009 \$2,700.00 1000 Louisiana Houston TX 77002 Susman Godfrey Attorney Neal Manne 04/21/2009 \$2,700.00 1000 Louisiana Houston TX 77002 Susman Godfrey Attorney Harry Reasoner 04/21/2009 \$2,700.00 2800 First City Tower Houston TX 77002 Vinson & Elkins Attorney James Chanos 04/03/2009 \$10,000.00 20 West 55th St New York NY 10019 Kynikos Associates LLP Investor David Glassco 04/19/2009 \$7,700.00 2001 Travis Heights Blvd Austin TX 78704 Self-Employed Investor David Bart 04/19/2009 \$50.00 204 South Saratoga Street New Orleans LA 70112 Student Student Paul Zygielbaum 04/19/2009 \$312.00 5916 Yerba Buena Rd Santa Rosa CA 95409 MediSensors Inc Vice President Susan Dietz 04/15/2009 \$200.00 3905 Ventura Canyon Ave Sherman Oaks CA 91423 Reprise Theater Company Producing Director Richard Warner 04/12/2009 \$200.00 3100 Newport Ct Arlington TX 76015 SDS Software Engineer

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) Apres Party & Tent Rental Mailing Address 7625 Cahill Rd City Edina State MN Zip Code 55439-2747 Purpose of Disbursement Finance Charge Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D281575 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 9
	Amount of Each Disbursement this Period 6.22

B. Full Name (Last, First, Middle Initial) Anna Bregier Mailing Address 2700 Lake St E #2400 City Minneapolis State MN Zip Code 55406 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D281634 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 9
	Amount of Each Disbursement this Period 1458.00

C. Full Name (Last, First, Middle Initial) Anna Bregier Mailing Address 2700 Lake St E #2400 City Minneapolis State MN Zip Code 55406 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D281635 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 1458.00

SUBTOTAL of Disbursements This Page (optional) ▶	2922.22
TOTAL This Period (last page this line number only) ▶	(Empty box)

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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
Minnesota Democratic-Farmer-Labor Party

A.	Full Name (Last, First, Middle Initial) Donna Cassutt	Transaction ID: D281617 Date of Disbursement 04 / 10 / 2009
	Mailing Address 815 E 61st St	Amount of Each Disbursement this Period 1866.14
	City Minneapolis State MN Zip Code 55417-3144	
	Purpose of Disbursement Payroll	
	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:	

B.	Full Name (Last, First, Middle Initial) Donna Cassutt	Transaction ID: D281618 Date of Disbursement 04 / 24 / 2009
	Mailing Address 815 E 61st St	Amount of Each Disbursement this Period 1866.16
	City Minneapolis State MN Zip Code 55417-3144	
	Purpose of Disbursement Payroll	
	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:	

C.	Full Name (Last, First, Middle Initial) Donna Cassutt	Transaction ID: D281619 Date of Disbursement 04 / 28 / 2009
	Mailing Address 815 E 61st St	Amount of Each Disbursement this Period 1800.00
	City Minneapolis State MN Zip Code 55417-3144	
	Purpose of Disbursement Payroll	
	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)	5532.30
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
Minnesota Democratic-Farmer-Labor Party

A.	Full Name (Last, First, Middle Initial) Democratic National Committee	Transaction ID: D281664 Date of Disbursement
	Mailing Address 430 S Capitol St SE Federal Fund	<input type="text" value="04"/> / <input type="text" value="19"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20003-4024	Amount of Each Disbursement this Period
	Purpose of Disbursement On Line Voter File Access	<input type="text" value="3220.00"/>
	Candidate Name Democratic National Committee	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) ▼	* In-Kind Received
	State: District:	

B.	Full Name (Last, First, Middle Initial) EFTPS Fed Tax Payment	Transaction ID: D281601 Date of Disbursement
	Mailing Address Federal Withholding Taxes	<input type="text" value="04"/> / <input type="text" value="08"/> / <input type="text" value="2009"/>
	City Iowa City State IA Zip Code 52244	Amount of Each Disbursement this Period
	Purpose of Disbursement Withholding Tax	<input type="text" value="1185.68"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) EFTPS Fed Tax Payment	Transaction ID: D281602 Date of Disbursement
	Mailing Address Federal Withholding Taxes	<input type="text" value="04"/> / <input type="text" value="14"/> / <input type="text" value="2009"/>
	City Iowa City State IA Zip Code 52244	Amount of Each Disbursement this Period
	Purpose of Disbursement Withholding Tax	<input type="text" value="5105.26"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="9510.94"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
Minnesota Democratic-Farmer-Labor Party

A.	Full Name (Last, First, Middle Initial) EFTPS Fed Tax Payment	Transaction ID: D281603 Date of Disbursement
	Mailing Address Federal Withholding Taxes	<input type="text" value="04"/> / <input type="text" value="29"/> / <input type="text" value="2009"/>
	City Iowa City State IA Zip Code 52244	Amount of Each Disbursement this Period
	Purpose of Disbursement Withholding Tax	<input type="text" value="5337.54"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) EFTPS Fed Tax Payment	Transaction ID: D281604 Date of Disbursement
	Mailing Address Federal Withholding Taxes	<input type="text" value="04"/> / <input type="text" value="29"/> / <input type="text" value="2009"/>
	City Iowa City State IA Zip Code 52244	Amount of Each Disbursement this Period
	Purpose of Disbursement Federal Unemployment Tax	<input type="text" value="470.40"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Eric Fought	Transaction ID: D281548 Date of Disbursement
	Mailing Address 215 Oak Grove St #1801	<input type="text" value="04"/> / <input type="text" value="22"/> / <input type="text" value="2009"/>
	City Minneapolis State MN Zip Code 55440	Amount of Each Disbursement this Period
	Purpose of Disbursement Parking, Cell Phone	<input type="text" value="215.79"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="6023.73"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

C. Form/Schedule : **SB21B**
Transaction ID : **D281548**

4/9/09 Verizon Wireless Cell Phone Bill \$203.79 4/9/09 City CenterParking Minneapolis MN Parking \$12-.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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
Minnesota Democratic-Farmer-Labor Party

A.	Full Name (Last, First, Middle Initial) Eric Fought	Transaction ID: D281620 Date of Disbursement 04 / 24 / 2009
	Mailing Address 215 Oak Grove St #1801	Amount of Each Disbursement this Period 703.42
	City Minneapolis State MN Zip Code 55440	
	Purpose of Disbursement Payroll	
	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:	

B.	Full Name (Last, First, Middle Initial) Eric Fought	Transaction ID: D281621 Date of Disbursement 04 / 22 / 2009
	Mailing Address 215 Oak Grove St #1801	Amount of Each Disbursement this Period 700.00
	City Minneapolis State MN Zip Code 55440	
	Purpose of Disbursement Payroll	
	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:	

C.	Full Name (Last, First, Middle Initial) Eric Fought	Transaction ID: D281622 Date of Disbursement 04 / 14 / 2009
	Mailing Address 215 Oak Grove St #1801	Amount of Each Disbursement this Period 700.00
	City Minneapolis State MN Zip Code 55440	
	Purpose of Disbursement Payroll	
	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) ▶

2103.42

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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
Minnesota Democratic-Farmer-Labor Party

<p>A. Full Name (Last, First, Middle Initial) Eric Fought</p> <p>Mailing Address 215 Oak Grove St #1801</p> <p>City Minneapolis State MN Zip Code 55440</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D281623</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1456.96"/></p>
<p>B. Full Name (Last, First, Middle Initial) HealthPartners</p> <p>Mailing Address 8170 33rd Ave S</p> <p>City Bloomington State MN Zip Code 55425</p> <p>Purpose of Disbursement Health Insurance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D281572</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="18082.40"/></p>
<p>C. Full Name (Last, First, Middle Initial) Sarah Helgen</p> <p>Mailing Address 3127 18th Ave S</p> <p>City Minneapolis State MN Zip Code 55407-4791</p> <p>Purpose of Disbursement Parking, Tolls, Travel, Postage, Maintenance, Office Supplies, Gas</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D281547</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="160.43"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="19699.79"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

C. Form/Schedule : **SB21B**
Transaction ID : **D281547**

Parking - Graves 101 & Crown Plaza \$29.00. Tolls- Maryland Transportation - 9.00. General Office postage - 17.50. Target- Light Bulbs \$ 52.38. Gas \$21.86 Flying J Travel Plaza, Fed X & Kinko's \$30.69
Misc construction paper

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
Minnesota Democratic-Farmer-Labor Party

A.	Full Name (Last, First, Middle Initial) Sarah Helgen	Transaction ID: D281624 Date of Disbursement 04 / 10 / 2009
	Mailing Address 3127 18th Ave S	
	City Minneapolis State MN Zip Code 55407-4791	Amount of Each Disbursement this Period 1228.28
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Sarah Helgen	Transaction ID: D281625 Date of Disbursement 04 / 24 / 2009
	Mailing Address 3127 18th Ave S	
	City Minneapolis State MN Zip Code 55407-4791	Amount of Each Disbursement this Period 1228.29
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Hibo S Isaq	Transaction ID: D281626 Date of Disbursement 04 / 10 / 2009
	Mailing Address 371 S Winthrop St #291	
	City Saint Paul State MN Zip Code 55119	Amount of Each Disbursement this Period 298.37
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2754.94
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
Minnesota Democratic-Farmer-Labor Party

A.	Full Name (Last, First, Middle Initial) Libby Keefe <hr/> Mailing Address 591 Lincoln Ave <hr/> City Saint Paul State MN Zip Code 55102-2814 <hr/> Purpose of Disbursement Postage, Office Supplies, Trash Pick Up Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D281546 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 406.96
B.	Full Name (Last, First, Middle Initial) LawProse Inc <hr/> Mailing Address 14180 Dallas Parkway, Suite 280 <hr/> City Dallas State TX Zip Code 75225 <hr/> Purpose of Disbursement Writing Seminar Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D281565 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 8 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 410.00
C.	Full Name (Last, First, Middle Initial) Lori Peterson & Associates <hr/> Mailing Address 10 S 5th St <hr/> City Minneapolis State MN Zip Code 55402-1001 <hr/> Purpose of Disbursement Issue Research Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D281553 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 311.46

SUBTOTAL of Disbursements This Page (optional) ▶	1128.42
TOTAL This Period (last page this line number only) ▶	

A. Form/Schedule : **SB21B**
Transaction ID : **D281546**

3/27/09 Got Junk 2194 Irene St Roseville MN 55113 Trash Removal \$345.38 3/27/09 USPS Riverside Station 180 Kellogg Blvd E # 127 St Paul, MN 55101-9998 Postage \$10.75 2/26/09 Office Max 1450 Mendota Road, Inner Grove Heights MN 55077 Office Supplies \$7.49 3/25/09 USPS Riverside Station 180 Kellogg Blvd E # 127 St Paul, MN 55101-9998 Postage \$1.34

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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
Minnesota Democratic-Farmer-Labor Party

<p>A. Full Name (Last, First, Middle Initial) Brian Melendez</p> <p>Mailing Address 1777 Dupont Ave S</p> <p>City Minneapolis State MN Zip Code 55403-3066</p> <p>Purpose of Disbursement Travel, Periodical, Fundraising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D281545 Date of Disbursement 04 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 2766.11</p>
<p>B. Full Name (Last, First, Middle Initial) Minnesota Department of Revenue</p> <p>Mailing Address PO Box 821</p> <p>City Minneapolis State MN Zip Code 55480-0821</p> <p>Purpose of Disbursement Withholding tax</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D281595 Date of Disbursement 04 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 214.00</p>
<p>C. Full Name (Last, First, Middle Initial) Minnesota Department of Revenue</p> <p>Mailing Address PO Box 821</p> <p>City Minneapolis State MN Zip Code 55480-0821</p> <p>Purpose of Disbursement Withholding Tax</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D281596 Date of Disbursement 04 / 14 / 2009</p> <p>Amount of Each Disbursement this Period 794.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3774.11

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

A. Form/Schedule : **SB21B**
Transaction ID : **D281545**

Food for Chair fundraising meetings- Pizza Hut \$83.62, Boca Chica \$25.18, Peter's Grill - \$20.96, Ike's Food \$39.38, Vincents Restaurant \$31.89, Key's Cafe \$11.01, Murray's 20 S 6th St Minneapolis, MN \$310.36 , Fogo de Chao 645 Hennepin Ave, Minneapolis, MN 55403 \$571.33 Periodical- The Spokesman Recorder Subscription \$60.00, Amazon, Periodicals \$20.99. Olmstead County DFL Dinner \$150.00, Lowry Hill Liquor, 1922 Hennepin Ave, Minneapolis, MN HHH Day reception \$402.52, Air Fare \$ 1,038.57 for Andy O'Leary, Donna Cassutt, Jamie Tincher, meetings in Washington DC

**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)

PAGE 39 / 86

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
Minnesota Democratic-Farmer-Labor Party

<p>A. Full Name (Last, First, Middle Initial) Minnesota Department of Revenue</p> <p>Mailing Address PO Box 821</p> <p>City Minneapolis State MN Zip Code 55480-0821</p> <p>Purpose of Disbursement Withholding Tax</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D281597 Date of Disbursement 04 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 966.00</p>
<p>B. Full Name (Last, First, Middle Initial) Minnesota Department of Revenue</p> <p>Mailing Address PO Box 821</p> <p>City Minneapolis State MN Zip Code 55480-0821</p> <p>Purpose of Disbursement Withholding Tax</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D281598 Date of Disbursement 04 / 10 / 2009</p> <p>Amount of Each Disbursement this Period 246.05</p>
<p>C. Full Name (Last, First, Middle Initial) Minnesota UC Fund</p> <p>Mailing Address PO Box 821</p> <p>City Minneapolis State MN Zip Code 55480-0821</p> <p>Purpose of Disbursement State Unemployment Tax</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D281609 Date of Disbursement 04 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 3395.23</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4607.28

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)

PAGE 40 / 86

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
Minnesota Democratic-Farmer-Labor Party

A.	Full Name (Last, First, Middle Initial) Andrew O'Leary	Transaction ID: D281631 Date of Disbursement 04 / 22 / 2009
	Mailing Address 255 Plato Blvd E	Amount of Each Disbursement this Period 800.00
	City Saint Paul State MN Zip Code 55107-1623	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Andrew O'Leary	Transaction ID: D281612 Date of Disbursement 04 / 07 / 2009
	Mailing Address 255 Plato Blvd E	Amount of Each Disbursement this Period 1907.86
	City Saint Paul State MN Zip Code 55107-1623	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Andrew O'Leary	Transaction ID: D281613 Date of Disbursement 04 / 07 / 2009
	Mailing Address 255 Plato Blvd E	Amount of Each Disbursement this Period 1186.20
	City Saint Paul State MN Zip Code 55107-1623	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	3894.06
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
Minnesota Democratic-Farmer-Labor Party

A.	Full Name (Last, First, Middle Initial) Andrew O'Leary	Transaction ID: D281614 Date of Disbursement 04 / 07 / 2009
	Mailing Address 255 Plato Blvd E	Amount of Each Disbursement this Period 800.00
	City Saint Paul State MN Zip Code 55107-1623	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Andrew O'Leary	Transaction ID: D281615 Date of Disbursement 04 / 24 / 2009
	Mailing Address 255 Plato Blvd E	Amount of Each Disbursement this Period 1107.85
	City Saint Paul State MN Zip Code 55107-1623	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Andrew O'Leary	Transaction ID: D281616 Date of Disbursement 04 / 24 / 2009
	Mailing Address 255 Plato Blvd E	Amount of Each Disbursement this Period 1186.20
	City Saint Paul State MN Zip Code 55107-1623	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	3094.05
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) Obama for America Mailing Address PO Box 8102 City Chicago State IL Zip Code 60680 Purpose of Disbursement COBRA premium CFC employees Candidate Name Barack Obama Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D289868 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 0 9
	Amount of Each Disbursement this Period 732.61 * In-Kind Received

B. Full Name (Last, First, Middle Initial) OPEIU # 12 Mailing Address 2520 Broadway St NE Ste 200 City Minneapolis State MN Zip Code 55413-1975 Purpose of Disbursement Union Dues Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D281568 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 3 / 2 0 0 9
	Amount of Each Disbursement this Period 1049.00

C. Full Name (Last, First, Middle Initial) Take Action Minnesota Mailing Address 1821 University Ave W City Saint Paul State MN Zip Code 55104 Purpose of Disbursement Bowling Event Candidate Name Take Action Minnesota Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D281551 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 9
	Amount of Each Disbursement this Period 150.00

SUBTOTAL of Disbursements This Page (optional) ▶	1931.61
TOTAL This Period (last page this line number only) ▶	(Empty box)

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)

PAGE 43 / 86

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
Minnesota Democratic-Farmer-Labor Party

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Jaime Tincher</p> <p>Mailing Address 3628 24th Ave S</p> <p>City Minneapolis State MN Zip Code 55406-2521</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D281629</p> <p>Date of Disbursement 04 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 2585.71</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Jaime Tincher</p> <p>Mailing Address 3628 24th Ave S</p> <p>City Minneapolis State MN Zip Code 55406-2521</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D281630</p> <p>Date of Disbursement 04 / 10 / 2009</p> <p>Amount of Each Disbursement this Period 2585.73</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) David Wakely</p> <p>Mailing Address 1151 Hamline Ave N</p> <p>City Saint Paul State MN Zip Code 55108-2613</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D281627</p> <p>Date of Disbursement 04 / 10 / 2009</p> <p>Amount of Each Disbursement this Period 1413.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

6584.44

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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
Minnesota Democratic-Farmer-Labor Party

A.	Full Name (Last, First, Middle Initial) David Wakely	Transaction ID: D281628 Date of Disbursement MM / DD / YYYY 04 / 24 / 2009
	Mailing Address 1151 Hamline Ave N	Amount of Each Disbursement this Period 1413.00
	City Saint Paul State MN Zip Code 55108-2613	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Mary Xiong	Transaction ID: D281632 Date of Disbursement MM / DD / YYYY 04 / 10 / 2009
	Mailing Address 480 Hazel St N Apt 201	Amount of Each Disbursement this Period 742.30
	City Saint Paul State MN Zip Code 55119-3497	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Mary Xiong	Transaction ID: D281633 Date of Disbursement MM / DD / YYYY 04 / 10 / 2009
	Mailing Address 480 Hazel St N Apt 201	Amount of Each Disbursement this Period 549.10
	City Saint Paul State MN Zip Code 55119-3497	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2704.40
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)

PAGE 45 / 86

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
Minnesota Democratic-Farmer-Labor Party

A.

Full Name (Last, First, Middle Initial)
Young Democrats of America

Mailing Address PO Box 77496

City Washington State DC Zip Code 20006

Purpose of Disbursement
Registration Fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D281543

Date of Disbursement

MM / DD / YYYY
04 / 03 / 2009

Amount of Each Disbursement this Period

50.00

SUBTOTAL of Disbursements This Page (optional)

50.00

TOTAL This Period (last page this line number only)

76315.71

**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)

PAGE 46 / 86

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" 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)
Minnesota Democratic-Farmer-Labor Party

A.

Full Name (Last, First, Middle Initial)
John Raplinger

Mailing Address 11897 210th St W

City State Zip Code
Lakeville MN 55044-7450

Purpose of Disbursement
Refund Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D281571

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

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)

PAGE 47 / 86

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input checked="" type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A.

Full Name (Last, First, Middle Initial)
Laborers Political League Edu Fund

Transaction ID: D281561

Date of Disbursement

Mailing Address 905 16th St NW

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	0	9

City Washington State DC Zip Code 20006

Amount of Each Disbursement this Period

10000.00

Purpose of Disbursement
Refund Contribution

--

Candidate Name
Laborers Political League Edu Fund

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

10000.00

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

10000.00

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

<p>A. Full Name (Last, First, Middle Initial) American Security</p> <p>Mailing Address PO Box 1150</p> <p>City Minneapolis State MN Zip Code 55480-1150</p> <p>Purpose of Disbursement Recount Office Security</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p> <p>Recount</p>	<p>Transaction ID: D281554</p> <p>Date of Disbursement 04 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 6398.95</p>
<p>B. Full Name (Last, First, Middle Initial) American Security</p> <p>Mailing Address PO Box 1150</p> <p>City Minneapolis State MN Zip Code 55480-1150</p> <p>Purpose of Disbursement Recount Office Security</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p> <p>Recount</p>	<p>Transaction ID: D281555</p> <p>Date of Disbursement 04 / 27 / 2009</p> <p>Amount of Each Disbursement this Period 6524.19</p>
<p>C. Full Name (Last, First, Middle Initial) Coie Perkins</p> <p>Mailing Address 1201 Third Ave #4800</p> <p>City Seattle State WA Zip Code 98101</p> <p>Purpose of Disbursement Recount Legal Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p> <p>Recount</p>	<p>Transaction ID: D281560</p> <p>Date of Disbursement 04 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 250000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

262923.14

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)

PAGE 49 / 86

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A.	Full Name (Last, First, Middle Initial) EFTPS Fed Tax Payment	Transaction ID: D281605 Date of Disbursement
	Mailing Address Federal Withholding Taxes	<input type="text" value="04"/> / <input type="text" value="29"/> / <input type="text" value="2009"/>
	City Iowa City State IA Zip Code 52244	Amount of Each Disbursement this Period
	Purpose of Disbursement Recount Federal Unemployment Tax	<input type="text" value="374.77"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
	Recount	

B.	Full Name (Last, First, Middle Initial) Fredrikson & Byron, PA	Transaction ID: D281557 Date of Disbursement
	Mailing Address PO Box 1484	<input type="text" value="04"/> / <input type="text" value="22"/> / <input type="text" value="2009"/>
	City Minneapolis State MN Zip Code 55480	Amount of Each Disbursement this Period
	Purpose of Disbursement Recount Legal Services	<input type="text" value="160233.18"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
	Recount	

C.	Full Name (Last, First, Middle Initial) Lockridge Grindal Nauen PLLP	Transaction ID: D281558 Date of Disbursement
	Mailing Address 100 Washington Ave S, Ste 2200	<input type="text" value="04"/> / <input type="text" value="22"/> / <input type="text" value="2009"/>
	City Minneapolis State MN Zip Code 55401	Amount of Each Disbursement this Period
	Purpose of Disbursement Recount Legal Services	<input type="text" value="34216.81"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
	Recount	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="194824.76"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A.	Full Name (Last, First, Middle Initial) Lockridge Grindal Nauen PLLP	Transaction ID: D281559 Date of Disbursement 04 / 22 / 2009
	Mailing Address 100 Washington Ave S, Ste 2200	Amount of Each Disbursement this Period 1900.00
	City Minneapolis State MN Zip Code 55401	
	Purpose of Disbursement Recount Legal Services	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Recount
B.	Full Name (Last, First, Middle Initial) Minnesota UC Fund	Transaction ID: D281610 Date of Disbursement 04 / 30 / 2009
	Mailing Address PO Box 821	Amount of Each Disbursement this Period 1748.25
	City Minneapolis State MN Zip Code 55480-0821	
	Purpose of Disbursement Recount State Unemployment Taxes	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Recount
C.	Full Name (Last, First, Middle Initial) Schlough Strategic Consulting	Transaction ID: D281556 Date of Disbursement 04 / 16 / 2009
	Mailing Address 2328 Champlain St NW #324	Amount of Each Disbursement this Period 1882.00
	City Washington State DC Zip Code 20009	
	Purpose of Disbursement Recount Consulting Interactive Media	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Recount

SUBTOTAL of Disbursements This Page (optional) ▶

5530.25

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

463278.15

**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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) Brunswick Zone Mailing Address 7545 Brooklyn Blvd City Brooklyn Park State MN Zip Code 55443 Purpose of Disbursement FEA/GOTV Bowling Party Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D281549 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 2 / 2 0 0 9
	Amount of Each Disbursement this Period 487.34
B. Full Name (Last, First, Middle Initial) Worldcall Internet Inc Mailing Address 1250 S Capital of Texas Hwy Building #2 #235 City Austin State TX Zip Code 78746 Purpose of Disbursement FEA Voice Mail & Phone Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D281566 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 2 / 2 0 0 9
	Amount of Each Disbursement this Period 1252.62

SUBTOTAL of Disbursements This Page (optional) ►

1739.96

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

1739.96

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor AJ Shaake Inc			Nature of Debt (Purpose): HHH Dinner Award
Mailing Address 919 St Claire Ave			
City Saint Paul	State MN	ZIP Code 55104	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: D289886	
Amount Incurred This Period <input type="text" value="329.91"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="329.91"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Apres Party & Tent Rental			Nature of Debt (Purpose): Finance Charge
Mailing Address 7625 Cahill Rd			
City Edina	State MN	ZIP Code 55439-2747	

Outstanding Balance Beginning This Period <input type="text" value="6.22"/>		Transaction ID: D293785	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="6.22"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Avenet LLC			Nature of Debt (Purpose): Web Hosting
Mailing Address 400 Sibley St Ste 560			
City Saint Paul	State MN	ZIP Code 55101-3170	

Outstanding Balance Beginning This Period <input type="text" value="4609.00"/>		Transaction ID: D293788	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="4609.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="4938.91"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor AVVR Inc			Nature of Debt (Purpose): State Convention Sound
Mailing Address 3994 Cedarvale Dr			
City Eagan	State MN	ZIP Code 55122-1410	

Outstanding Balance Beginning This Period 5221.35		Transaction ID: D293794	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5221.35	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Best Western Inn Thief River Falls			Nature of Debt (Purpose): Travel Expenses
Mailing Address 1060 Highway 32 South			
City Thief River Falls	State MN	ZIP Code 56701	

Outstanding Balance Beginning This Period 86.25		Transaction ID: D219896	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 86.25	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Charter Communications			Nature of Debt (Purpose): Field Office Phones
Mailing Address 3380 NORTHERN VALLEY PL NE			
City Rochester	State MN	ZIP Code 55906-3954	

Outstanding Balance Beginning This Period 7932.90		Transaction ID: D293803	
Amount Incurred This Period 289.99	Payment This Period 0.00	Outstanding Balance at Close of This Period 8222.89	

1) SUBTOTALS This Period This Page (optional).....	▶	13530.49
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Claude M Anderson Electic			Nature of Debt (Purpose): Building Repair
Mailing Address 1551 Payne Ave			
City Saint Paul	State MN	ZIP Code 55130	

Outstanding Balance Beginning This Period <input type="text" value="98.00"/>		Transaction ID: D294008	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="98.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Convio			Nature of Debt (Purpose): Web Page Data Host
Mailing Address PO Box 671445			
City Dallas	State TX	ZIP Code 75267-1445	

Outstanding Balance Beginning This Period <input type="text" value="4050.00"/>		Transaction ID: D219888	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="4050.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Cooperative Print Solutions			Nature of Debt (Purpose): Printing State Party Annual Report
Mailing Address PO Box 2667 PO Box 9438			
City Minneapolis	State MN	ZIP Code 55402-0667	

Outstanding Balance Beginning This Period <input type="text" value="4461.36"/>		Transaction ID: D293512	
Amount Incurred This Period <input type="text" value="725.01"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="5186.37"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="9236.37"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Deep Rock Water Company			Nature of Debt (Purpose): Drinking Water
Mailing Address PO Box 173898			
City Denver	State CO	ZIP Code 80217-3898	

Outstanding Balance Beginning This Period 210.62		Transaction ID: D28194	
Amount Incurred This Period 79.52	Payment This Period 0.00	Outstanding Balance at Close of This Period 290.14	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Electro Watchman			Nature of Debt (Purpose): Building Alarm System
Mailing Address 1 Water St W Ste 110			
City Saint Paul	State MN	ZIP Code 55107-2097	

Outstanding Balance Beginning This Period 0.00		Transaction ID: D295357	
Amount Incurred This Period 521.24	Payment This Period 0.00	Outstanding Balance at Close of This Period 521.24	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Expedite			Nature of Debt (Purpose): Fundraising Direct Mail
Mailing Address 3770 Dunlap St N			
City Arden Hills	State MN	ZIP Code 55112-6907	

Outstanding Balance Beginning This Period 1798.64		Transaction ID: D294009	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1798.64	

1) SUBTOTALS This Period This Page (optional).....	2610.02
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 56 / 86
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Carole Faricy	Nature of Debt (Purpose): Decorations HHH Day Dinner
Mailing Address 2211 St Clair Ave	
City Saint Paul State MN ZIP Code 55105-1136	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID: D289887	
Amount Incurred This Period <input type="text" value="1589.29"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1589.29"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Graphics Exhibit Inc	Nature of Debt (Purpose): Flag Replacement
Mailing Address 339 Fillmore Ave E	
City Saint Paul State MN ZIP Code 55107-1205	

Outstanding Balance Beginning This Period <input type="text" value="209.14"/>	Transaction ID: D294043	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="209.14"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Honsa-Binder Printing	Nature of Debt (Purpose): Fundraising Envelopes & Letterhead
Mailing Address 320 Spruce St	
City Saint Paul State MN ZIP Code 55101-2445	

Outstanding Balance Beginning This Period <input type="text" value="3761.40"/>	Transaction ID: D294010	
Amount Incurred This Period <input type="text" value="495.50"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="4256.90"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="6055.33"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Independent School District 279			Nature of Debt (Purpose): State Central Committee Rent
Mailing Address 11200 93rd Ave N			
City Maple Grove	State MN	ZIP Code 55369-3669	

Outstanding Balance Beginning This Period <input type="text" value="351.00"/>		Transaction ID: D287471	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="351.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Joe's Lawnscape			Nature of Debt (Purpose): Lawn Service
Mailing Address 256 6th Ave S			
City South Saint Paul	State MN	ZIP Code 55075-2339	

Outstanding Balance Beginning This Period <input type="text" value="1456.86"/>		Transaction ID: D293811	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1456.86"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor LexisNexis			Nature of Debt (Purpose): Search Engine
Mailing Address PO Box 933			
City Dayton	State OH	ZIP Code 45401-0933	

Outstanding Balance Beginning This Period <input type="text" value="2005.00"/>		Transaction ID: D287475	
Amount Incurred This Period <input type="text" value="461.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2466.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="2817.00"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Lori Peterson & Associates			Nature of Debt (Purpose): Issue Research
Mailing Address 10 S 5th St			
City Minneapolis	State MN	ZIP Code 55402-1001	

Outstanding Balance Beginning This Period <input type="text" value="311.46"/>		Transaction ID: D293812	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="311.46"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mayo Civic Center			Nature of Debt (Purpose): Convention Rent
Mailing Address 30 Civic Center Dr SE			
City Rochester	State MN	ZIP Code 55904-3773	

Outstanding Balance Beginning This Period <input type="text" value="598.61"/>		Transaction ID: D293813	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="598.61"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Meyer Associates Inc			Nature of Debt (Purpose): GOTV Calling
Mailing Address 14 7th Ave N			
City Saint Cloud	State MN	ZIP Code 56303-4753	

Outstanding Balance Beginning This Period <input type="text" value="10000.00"/>		Transaction ID: D287478	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="10000.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="10598.61"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Midwest Radio Rentals			Nature of Debt (Purpose): Election Night Party Comm- unication
Mailing Address 1800 Cliff Rd E			
City	State	ZIP Code	
Burnsville	MN	55337-1345	

Outstanding Balance Beginning This Period		Transaction ID: D287479	
197.34			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	197.34	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Minnesota UC Fund			Nature of Debt (Purpose): Correction of Underpayment
Mailing Address PO Box 821			
City	State	ZIP Code	
Minneapolis	MN	55480-0821	

Outstanding Balance Beginning This Period		Transaction ID: D293874	
25196.60			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	25196.60	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mitel Leasing			Nature of Debt (Purpose): Phone Equipment Lease
Mailing Address 1140 West Loop N			
City	State	ZIP Code	
Houston	TX	77055	

Outstanding Balance Beginning This Period		Transaction ID: D293814	
365.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	365.00	

1) SUBTOTALS This Period This Page (optional).....	▶	25758.94
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor North Central States Regional Council of Carpenter			Nature of Debt (Purpose): Volunteer Generic GOTV meetings
Mailing Address 700 Olive St			
City Saint Paul	State MN	ZIP Code 55130	

Outstanding Balance Beginning This Period 700.00		Transaction ID: D287474	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 700.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mini Storage North Star			Nature of Debt (Purpose): Storage Space
Mailing Address 2356 University Ave W			
City Saint Paul	State MN	ZIP Code 55114	

Outstanding Balance Beginning This Period 140.00		Transaction ID: D293842	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 140.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ocean Ocean Tech			Nature of Debt (Purpose): Waste Recycler
Mailing Address 7509 W 27th St			
City Minneapolis	State MN	ZIP Code 55426-3105	

Outstanding Balance Beginning This Period 357.50		Transaction ID: D287483	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 357.50	

1) SUBTOTALS This Period This Page (optional).....	1197.50
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Office Depot	Nature of Debt (Purpose): Office Supplies
Mailing Address PO Box 633211	
City State ZIP Code Cincinnati OH 45263-3211	

Outstanding Balance Beginning This Period 4392.22	Transaction ID: D287484	
Amount Incurred This Period 304.74	Payment This Period 0.00	Outstanding Balance at Close of This Period 4696.96

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Pitney Bowes Purchase Power	Nature of Debt (Purpose): Office Postage
Mailing Address PO Box 85390	
City State ZIP Code Louisville KY 40285-5390	

Outstanding Balance Beginning This Period 29487.03	Transaction ID: D287529	
Amount Incurred This Period 0.00	Payment This Period 3103.80	Outstanding Balance at Close of This Period 26383.23

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor RJF Kramer & Associates	Nature of Debt (Purpose): Printing
Mailing Address 1471 Barclay St	
City State ZIP Code Saint Paul MN 55106-1405	

Outstanding Balance Beginning This Period 1554.73	Transaction ID: D287515	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1554.73

1) SUBTOTALS This Period This Page (optional).....	▶	32634.92
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Saint Paul Public Schools			Nature of Debt (Purpose): SCC Meeting Rent
Mailing Address 360 Colborne St			
City Saint Paul	State MN	ZIP Code 55102-3228	

Outstanding Balance Beginning This Period 1558.00		Transaction ID: D293515	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1558.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Sandler Reiff & Young			Nature of Debt (Purpose): Legal Fees
Mailing Address 300 M Street, SE Suite 1102			
City Washington	State DC	ZIP Code 20003	

Outstanding Balance Beginning This Period 1200.00		Transaction ID: D287517	
Amount Incurred This Period 1200.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2400.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Seven Clans Casino			Nature of Debt (Purpose): Food - Generic GOTV Training
Mailing Address Red Lake			
City Red Lake	State MN	ZIP Code 56000	

Outstanding Balance Beginning This Period 300.00		Transaction ID: D287465	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 300.00	

1) SUBTOTALS This Period This Page (optional).....	4258.00
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Seven Corners Printing			Nature of Debt (Purpose): Printing
Mailing Address 230 7th St W			
City Saint Paul	State MN	ZIP Code 55102-2523	

Outstanding Balance Beginning This Period <input type="text" value="202.70"/>		Transaction ID: D287518	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="202.70"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Shooting Star			Nature of Debt (Purpose): Room Rental
Mailing Address PO Box 418			
City Mahnomon	State MN	ZIP Code 56557-0418	

Outstanding Balance Beginning This Period <input type="text" value="1716.63"/>		Transaction ID: D287519	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1716.63"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Solution Builders			Nature of Debt (Purpose): Software Support
Mailing Address 7800 Metro Pkwy Ste 300			
City Bloomington	State MN	ZIP Code 55425-1509	

Outstanding Balance Beginning This Period <input type="text" value="10248.81"/>		Transaction ID: D293816	
Amount Incurred This Period <input type="text" value="1950.00"/>	Payment This Period <input type="text" value="3000.00"/>	Outstanding Balance at Close of This Period <input type="text" value="9198.81"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="11118.14"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Special School District No 1	Nature of Debt (Purpose): Meeting Room Rent
Mailing Address 807 Northeast Broadway	
City State ZIP Code Minneapolis MN 55413	

Outstanding Balance Beginning This Period 385.00	Transaction ID: D293818	
Amount Incurred This Period 0.00	Payment This Period 385.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Coates Plaza Hotel	Nature of Debt (Purpose): SCC meeting
Mailing Address 502 Chestnut St	
City State ZIP Code Virginia MN 55792-2532	

Outstanding Balance Beginning This Period 1904.11	Transaction ID: D287521	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1904.11

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Southpaw Group	Nature of Debt (Purpose): Fundraising Consulting
Mailing Address 316 Hennepin Ave	
City State ZIP Code Minneapolis MN 55414	

Outstanding Balance Beginning This Period 2404.60	Transaction ID: D287522	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2404.60

1) SUBTOTALS This Period This Page (optional).....	4308.71
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Voter Activation Network	Nature of Debt (Purpose): Email Service
Mailing Address 54 Regent St	
City State ZIP Code Cambridge MA 02140-2112	

Outstanding Balance Beginning This Period 31179.30	Transaction ID: D287524	
Amount Incurred This Period 3756.25	Payment This Period 0.00	Outstanding Balance at Close of This Period 34935.55

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Weinblatt & Gaylord PLC	Nature of Debt (Purpose): Legal Fees
Mailing Address 111 Kellogg Blvd E	
City State ZIP Code Saint Paul MN 55101-1236	

Outstanding Balance Beginning This Period 9337.80	Transaction ID: D287525	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 9337.80

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor David Weinlick	Nature of Debt (Purpose): Volunteer Food
Mailing Address 7380 Sanel Rd	
City State ZIP Code Saint Paul MN 55125	

Outstanding Balance Beginning This Period 11.42	Transaction ID: D287469	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 11.42

1) SUBTOTALS This Period This Page (optional).....	44284.77
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 66 / 86
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Winning Connections			Nature of Debt (Purpose): Voter Turnout
Mailing Address 317 Pennsylvania Ave SE #200			
City Washington	State DC	ZIP Code 20003	

Outstanding Balance Beginning This Period		Transaction ID: D293820	
10000.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	10000.00	

1) SUBTOTALS This Period This Page (optional).....	10000.00
2) TOTALS This Period (last page this line number only).....	183347.71
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	183347.71

**SCHEDULE H2 (FEC Form 3X)
ALLOCATION RATIOS**

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

**RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT
ACTIVITIES APPEARING ON THIS REPORT.**

Methods of allocation :

- I. FUNDRAISING activities are allocated using the 'funds received method' where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity.
For PACs Only : Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

ACTIVITY OR EVENT IDENTIFIER

Humphrey Day

ACTIVITY IS:

- Fundraising Direct Candidate Support

CHECK IF THE RATIO IS:

- New Revised Same as Previously Reported

FEDERAL %

39.00 %

NONFEDERAL %

61.00 %

**Transaction ID:
R805**

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Minnesota Democratic-Farmer-Labor Party

NAME OF ACCOUNT Non Federal Portion of Admin	DATE OF RECEIPT M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 9	TOTAL AMOUNT TRANSFERRED 4953.50
--	---	-------------------------------------

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	4953.50	Transaction ID: T2062
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Minnesota Democratic-Farmer-Labor Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Non Federal Portion of Admin	M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 9	5313.50

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	5313.50	Transaction ID: T2063
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		
		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Non Federal Portion of Admin	M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 9	5000.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	5000.00	Transaction ID: T2064
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Minnesota Democratic-Farmer-Labor Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Non Federal Portion of Admin	M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 9	4000.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	4000.00	Transaction ID: T2073
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Minnesota Democratic-Farmer-Labor Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Non Federal Portion of Admin	M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 9	2966.38

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative		2966.38	Transaction ID: T2074
ii) Generic Voter Drive			Transaction ID:
iii) Exempt Activities			Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)			
a) _____			Transaction ID:
b) _____			Transaction ID:
c) Total Amount Transferred for Direct Fundraising			
v) Direct Candidate Support (List of Activity or Event Identifier)			
a) _____			Transaction ID:
b) _____			Transaction ID:
c) Total Amount Transferred For Direct Candidate Support			
vi) Public Communications Referring Only to Party (Made by PAC)			Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Minnesota Democratic-Farmer-Labor Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Non Federal Portion of Admin	M M / D D / Y Y Y Y 0 4 / 2 9 / 2 0 0 9	1600.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	1600.00	Transaction ID: T2075
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		
		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Minnesota Democratic-Farmer-Labor Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Non Federal Portion of Admin	M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 9	2871.18

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	2871.18	Transaction ID: T2084
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Minnesota Democratic-Farmer-Labor Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
State Share of Fundraising	M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 9	26000.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative		0.00	Transaction ID: T2089
ii) Generic Voter Drive			Transaction ID:
iii) Exempt Activities			Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)			
a) 207F Humphrey Day Dinner	26000.00		Transaction ID: T2090
b) _____			Transaction ID:
c) Total Amount Transferred for Direct Fundraising		26000.00	
v) Direct Candidate Support (List of Activity or Event Identifier)			
a) _____			Transaction ID:
b) _____			Transaction ID:
c) Total Amount Transferred For Direct Candidate Support			
vi) Public Communications Referring Only to Party (Made by PAC)			Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	26704.56
TOTAL This Period (Generic Voter Drive)	0.00
TOTAL This Period (Exempt Activities)	0.00
TOTAL This Period (Direct Fundraising)	26000.00
TOTAL This Period (Direct Candidate Support)	0.00
TOTAL This Period (Public Communications Referring Only to Party)	0.00
TOTAL This Period (Total Amount Transferred)	52704.56

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) Array Financial Services			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 9449 Science Center Dr			Allocated Activity or Event Year-To-Date 175822.46	
City New Hope	State MN	Zip Code 55428-3623	Category/ Type	
Purpose of Disbursement: Directors abd Officers Insurance				
Activity or Event Identifier: Administrative			Date M M / D D / Y Y Y Y 04 / 23 / 2009 Transaction ID: D281552	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
155.55		881.45		1037.00

B. Full Name (Last, First, Middle Initial) Array Financial Services			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 9449 Science Center Dr			Allocated Activity or Event Year-To-Date 175822.46	
City New Hope	State MN	Zip Code 55428-3623	Category/ Type	
Purpose of Disbursement: General Liability Insurance				
Activity or Event Identifier: Administrative			Date M M / D D / Y Y Y Y 04 / 13 / 2009 Transaction ID: D281586	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
506.65		2871.03		3377.68

C. Full Name (Last, First, Middle Initial) Aspen Waste Systems			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2951 Weeks Ave SE			Allocated Activity or Event Year-To-Date 175822.46	
City Minneapolis	State MN	Zip Code 55414-2833	Category/ Type	
Purpose of Disbursement: Trash & Recycling				
Activity or Event Identifier: Administrative			Date M M / D D / Y Y Y Y 04 / 12 / 2009 Transaction ID: D281576	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.59		94.01		110.60

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
678.79		3846.49		4525.28

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) Atomic			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 615 N. 3rd Street			Allocated Activity or Event Year-To-Date 175822.46		
City Minneapolis	State MN	Zip Code 55101	Date <input type="text" value="04"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: Internet Access			Transaction ID: D281567		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
107.07		606.68		713.75

B. Full Name (Last, First, Middle Initial) City of Saint Paul			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 350 St Peter St #300			Allocated Activity or Event Year-To-Date 175822.46		
City Saint Paul	State MN	Zip Code 55102	Date <input type="text" value="04"/> / <input type="text" value="12"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: Alarm Fee			Transaction ID: D281577		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.25		29.75		35.00

C. Full Name (Last, First, Middle Initial) Claude M Anderson Electric			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1551 Payne Ave			Allocated Activity or Event Year-To-Date 175822.46		
City Saint Paul	State MN	Zip Code 55130	Date <input type="text" value="04"/> / <input type="text" value="12"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: Building Repair			Transaction ID: D281578		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.70		83.30		98.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
127.02		719.73		846.75

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial)
Cornerstone Horses, Inc.
Mailing Address
591 Lincoln Avenue
City State Zip Code
Saint Paul MN 55102
Purpose of Disbursement:
Accounting Services
Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
175822.46
Date 04 / 09 / 2009
Transaction ID: D281544

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
750.00		4250.00		5000.00

B. Full Name (Last, First, Middle Initial)
Department of Administration
Mailing Address
50 Sherburne Ave
City State Zip Code
Saint Paul MN 55155-1402
Purpose of Disbursement:
Meeting Space Rental
Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
175822.46
Date 04 / 12 / 2009
Transaction ID: D281579

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.73		94.77		111.50

C. Full Name (Last, First, Middle Initial)
Direct TV
Mailing Address
PO Box 60036
City State Zip Code
Los Angeles CA 90060-0036
Purpose of Disbursement:
Cable TV
Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
175822.46
Date 04 / 12 / 2009
Transaction ID: D281580

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
47.23		267.63		314.86

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
813.96		4612.40		5426.36

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) GE Capital			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 31001 0273			Allocated Activity or Event Year-To-Date 175822.46		
City Pasadena	State CA	Zip Code 91110	Date MM / DD / YYYY 04 / 12 / 2009		
Purpose of Disbursement: Copier Lease			Transaction ID: D281581		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
135.07		765.37		900.44

B. Full Name (Last, First, Middle Initial) Hilton Hotel			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1001 Marquette Ave			Allocated Activity or Event Year-To-Date 69000.00		
City Minneapolis	State MN	Zip Code 55403	Date MM / DD / YYYY 04 / 03 / 2009		
Purpose of Disbursement: HHH Dinner			Transaction ID: D281570		
Activity or Event Identifier: Humphrey Day 39% Federal 61% State					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3510.00		5490.00		9000.00

C. Full Name (Last, First, Middle Initial) Hotels.com			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 10440 N Central Expy			Allocated Activity or Event Year-To-Date 175822.46		
City Dallas	State TX	Zip Code 75231-2221	Date MM / DD / YYYY 04 / 23 / 2009		
Purpose of Disbursement: Room Rental			Transaction ID: D281592		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
58.94		333.96		392.90

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3704.01		6589.33		10293.34

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

C. Form/Schedule : **H4**

Hilton Washington 1919 Connecticut Ave NW Washington DC 20009 2 nights hotel room

Transaction ID : **D281592**

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) Joe's Lawnscape			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 256 6th Ave S			Allocated Activity or Event Year-To-Date 175822.46		
City South Saint Paul	State MN	Zip Code 55075-2339	Date <input type="text" value="04"/> / <input type="text" value="28"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: Lawn Service			Transaction ID: D281593		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
218.53		1238.33		1456.86

B. Full Name (Last, First, Middle Initial) Farmer Labor Party Minnesota Democratic -STATE AC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 255 E Plato Blvd			Allocated Activity or Event Year-To-Date 175822.46		
City Saint Paul	State MN	Zip Code 55107	Date <input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: Transfer of Non Federal Share of Refunds			Transaction ID: D288914		
Activity or Event Identifier: Administrative 2008 Ratio 36% Fed 64% St					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6307.12		0.00		6307.12

C. Full Name (Last, First, Middle Initial) Pitney Bowes Purchase Power			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 85390			Allocated Activity or Event Year-To-Date 175822.46		
City Louisville	State KY	Zip Code 40285-5390	Date <input type="text" value="04"/> / <input type="text" value="10"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: Office Postage			Transaction ID: D281573		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
465.57		2638.23		3103.80

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6991.22		3876.56		10867.78

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial)
Solution Builders

Mailing Address
7800 Metro Pkwy Ste 300

City State Zip Code
Bloomington MN 55425-1509

Purpose of Disbursement:
Software Support

Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
175822.46

Date MM / DD / YYYY
04 / 15 / 2009

Transaction ID: D281588

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
450.00		2550.00		3000.00

B. Full Name (Last, First, Middle Initial)
Special School District No 1

Mailing Address
807 Northeast Broadway

City State Zip Code
Minneapolis MN 55413

Purpose of Disbursement:
Meeting Room Rent

Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
175822.46

Date MM / DD / YYYY
04 / 12 / 2009

Transaction ID: D281582

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
57.75		327.25		385.00

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

Mailing Address
1900 Rice St

City State Zip Code
Saint Paul MN 55113-6810

Purpose of Disbursement:
Water Service

Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
175822.46

Date MM / DD / YYYY
04 / 12 / 2009

Transaction ID: D281574

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.99		45.29		53.28

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
515.74		2922.54		3438.28

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) UPS			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 505820			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: center;">175822.46</div>	
City The Lakes	State NV	Zip Code 88905-5820	Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; text-align: center;">04 / 12 / 2009</div> Transaction ID: D281583	
Purpose of Disbursement: Shipping				
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.99		50.97		59.96

B. Full Name (Last, First, Middle Initial) US Bank			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 5th and Robert St			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: center;">175822.46</div>	
City Saint Paul	State MN	Zip Code 55101	Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; text-align: center;">04 / 01 / 2009</div> Transaction ID: D281562	
Purpose of Disbursement: Bank Charges				
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.63		128.22		150.85

C. Full Name (Last, First, Middle Initial) US Bank			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 5th and Robert St			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: center;">175822.46</div>	
City Saint Paul	State MN	Zip Code 55101	Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; text-align: center;">04 / 03 / 2009</div> Transaction ID: D281563	
Purpose of Disbursement: Bank Charges				
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
45.77		259.33		305.10

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
77.39		438.52		515.91

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) US Bank			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 5th and Robert St			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">175822.46</div>	
City	State	Zip Code	Category/ Type	
Saint Paul	MN	55101		
Purpose of Disbursement: Bank Charges			Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">04 / 14 / 2009</div>	
Activity or Event Identifier: Administrative			Transaction ID: D281564	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.25		29.75		35.00

B. Full Name (Last, First, Middle Initial) US Bank			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 5th and Robert St			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">175822.46</div>	
City	State	Zip Code	Category/ Type	
Saint Paul	MN	55101		
Purpose of Disbursement: Mortgage			Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">04 / 15 / 2009</div>	
Activity or Event Identifier: Administrative			Transaction ID: D281587	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
779.35		4416.38		5195.73

C. Full Name (Last, First, Middle Initial) US Bank			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 5th and Robert St			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">175822.46</div>	
City	State	Zip Code	Category/ Type	
Saint Paul	MN	55101		
Purpose of Disbursement: Bank Charges			Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">04 / 21 / 2009</div>	
Activity or Event Identifier: Administrative			Transaction ID: D281590	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.62		31.88		37.50

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
790.22		4478.01		5268.23

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) US Bank			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 5th and Robert St			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">175822.46</div>	
City	State	Zip Code	Category/ Type	
Saint Paul	MN	55101		
Purpose of Disbursement: Bank Charges			Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">04 / 22 / 2009</div>	
Activity or Event Identifier: Administrative			Transaction ID: D281591	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.62		31.88		37.50

B. Full Name (Last, First, Middle Initial) Verizon Wireless			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 25505			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">175822.46</div>	
City	State	Zip Code	Category/ Type	
Lehigh Valley	PA	18002-5505		
Purpose of Disbursement: Cell Phones			Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">04 / 12 / 2009</div>	
Activity or Event Identifier: Administrative			Transaction ID: D281584	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
443.79		2514.79		2958.58

C. Full Name (Last, First, Middle Initial) Vonage			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2147 Route 27			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">175822.46</div>	
City	State	Zip Code	Category/ Type	
Edison	NJ	08817		
Purpose of Disbursement: Phone Service			Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">04 / 20 / 2009</div>	
Activity or Event Identifier: Administrative			Transaction ID: D281589	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
593.25		3361.80		3955.05

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1042.66		5908.47		6951.13

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) Xcel Energy			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 414 Nicollet Mall			Allocated Activity or Event Year-To-Date 175822.46		
City Minneapolis	State MN	Zip Code 55401-1927	Date <input type="text" value="04"/> / <input type="text" value="12"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: Utilities			Transaction ID: D281585		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
263.12		1491.03		1754.15

B. Full Name (Last, First, Middle Initial) XO Communications			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 828618			Allocated Activity or Event Year-To-Date 175822.46		
City Philadelphia	State PA	Zip Code 19182-0001	Date <input type="text" value="04"/> / <input type="text" value="03"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: Phone Service			Transaction ID: D281569		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
142.95		810.05		953.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
406.07		2301.08		2707.15

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
15147.08		35693.13		50840.21