

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Ellison for Congress

ADDRESS (number and street)

PO Box 6072

Check if different than previously reported. (ACC)

Minneapolis

MN

55406

2. FEC IDENTIFICATION NUMBER ▼

C C00422410

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

MN

05

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 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

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 Carla Kjellberg

Signature of Treasurer Carla Kjellberg

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

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

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Ellison for Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	189441.21	909374.20
(b) Total Contribution Refunds (from Line 20(d))	1000.00	1545.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	188441.21	907829.20
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	135597.27	681060.43
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	6685.38
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	135597.27	674375.05
8. Cash on Hand at Close of Reporting Period (from Line 27).....	163624.66	
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).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Ellison for Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	92713.34	422724.14
(ii) Unitemized	67227.87	336705.81
(iii) TOTAL of contributions from individuals	159941.21	759429.95
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	29500.00	149944.25
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	189441.21	909374.20
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	6685.38
15. OTHER RECEIPTS (Dividends, Interest, etc.)	6.81	21.76
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	189448.02	916081.34

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	135597.27	681060.43
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	1000.00	1045.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	1000.00	1545.00
21. OTHER DISBURSEMENTS	75475.00	184891.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	212072.27	867496.43

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	186248.91
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	189448.02
25. SUBTOTAL (add Line 23 and Line 24).....	375696.93
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	212072.27
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	163624.66

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

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

FOR LINE NUMBER: PAGE 5 OF 168
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Richard Abdo

Mailing Address 923 E Kilbourn Ave
Unit 1502

City Milwaukee State WI Zip Code 53202-3980

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

Name of Employer RA Abdo and Co., LLC Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 03 / 2013

Transaction ID : VN8A3BXQE8

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Marie Rose Adams

Mailing Address 6600 Pleasant Ave
Apt 141

City Richfield State MN Zip Code 55423-2370

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
301.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 01 / 2013

Transaction ID : VN8A3BDKBH5

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Marie Rose Adams

Mailing Address 6600 Pleasant Ave
Apt 141

City Richfield State MN Zip Code 55423-2370

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
366.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : VN8A3BW46H8

Amount of Each Receipt this Period
65.00

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

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

665.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Yasser Ads

Full Name (Last, First, Middle Initial)
Mailing Address 10 Witherell St
Apt 1203

City State Zip Code
Detroit MI 48226-1676

FEC ID number of contributing federal political committee.

Name of Employer Occupation
McKinsey and Company Engagement Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : VN8A3B7HQK8

Amount of Each Receipt this Period

B. Muzammil Ahmed

Full Name (Last, First, Middle Initial)
Mailing Address 1724 Gorman St

City State Zip Code
Canton MI 48187-4818

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Self-Employed Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : VN8A3B8H0V4

Amount of Each Receipt this Period

C. Kathleen S Ahrens

Full Name (Last, First, Middle Initial)
Mailing Address 4229 Garfield Ave

City State Zip Code
Minneapolis MN 55409

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : VN8A3BX3VE4

Amount of Each Receipt this Period

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Fahd Al Saghir

Mailing Address 1303 Porters Ln

City Bloomfield Hills State MI Zip Code 48302-0943

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

Name of Employer Michigan Kidney Consultants Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2013

Transaction ID : VN8A3B8H5X2

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Muna Al-Aseer

Mailing Address 3820 Bellewater Blvd

City Riverview State FL Zip Code 33578-3100

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

Name of Employer Tampa General Hospital Occupation Occupational Therapist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 25 / 2013

Transaction ID : VN8A3BJD6W6

Amount of Each Receipt this Period
 300.00

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

Mailing Address 15636 SW 17th St

City Weston State FL Zip Code 33326-5014

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

Name of Employer Self-Employed Occupation Real Estate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 11 / 2013

Transaction ID : VN8A3B3SK70

Amount of Each Receipt this Period
 250.00

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

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

1050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Saba Ali

Mailing Address 14144 Yellow Wood Cir

City Orlando State FL Zip Code 32828-8297

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

Name of Employer Four Corners Resources Occupation Project Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 18 / 2013

Transaction ID : VN8A3BFZ618

Amount of Each Receipt this Period
 300.00

B. Full Name (Last, First, Middle Initial)
Arnellia Allen

Mailing Address 1183 University Ave W

City Saint Paul State MN Zip Code 55104-4124

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

Name of Employer Metro Bar & Grill Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 20 / 2013

Transaction ID : VN8A3BSNFE1

Amount of Each Receipt this Period
 250.00

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

Mailing Address 13913 Plymouth Xing

City Edmond State OK Zip Code 73013-7037

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

Name of Employer Self-Employed Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 21 / 2013

Transaction ID : VN8A3BJOKH3

Amount of Each Receipt this Period
 1000.00

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

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

1550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Clifford E. Anderson

Mailing Address 1408 La Sierra Dr

City Sacramento State CA Zip Code 95864-3035

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

Name of Employer CSUS Sacramento Occupation Teacher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 10 / 2013

Transaction ID : VN8A3B3PP65

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Clifford E. Anderson

Mailing Address 1408 La Sierra Dr

City Sacramento State CA Zip Code 95864-3035

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

Name of Employer CSUS Sacramento Occupation Teacher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 20 / 2013

Transaction ID : VN8A3BSNCC9

Amount of Each Receipt this Period
50.00

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

Mailing Address 978 Plainfield St

City Johnston State RI Zip Code 02919-6735

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

Name of Employer State of Rhode Island Occupation Shift Coordinator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 06 / 2013

Transaction ID : VN8A3B05HE6

Amount of Each Receipt this Period
25.00

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

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

125.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Farid Ansari

Mailing Address 978 Plainfield St

City Johnston State RI Zip Code 02919-6735

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

Name of Employer State of Rhode Island Occupation Shift Coordinator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **260.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 01 / 2013

Transaction ID : VN8A3BNSZY6

Amount of Each Receipt this Period
35.00

B. Full Name (Last, First, Middle Initial)
Farid Ansari

Mailing Address 978 Plainfield St

City Johnston State RI Zip Code 02919-6735

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

Name of Employer State of Rhode Island Occupation Shift Coordinator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **285.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 06 / 2013

Transaction ID : VN8A3BE44F0

Amount of Each Receipt this Period
25.00

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

Mailing Address 978 Plainfield St

City Johnston State RI Zip Code 02919-6735

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

Name of Employer State of Rhode Island Occupation Shift Coordinator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **310.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 06 / 2013

Transaction ID : VN8A3BNDJN3

Amount of Each Receipt this Period
25.00

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

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

85.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Farid Ansari

Mailing Address 978 Plainfield St

City Johnston State RI Zip Code 02919-6735

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

Name of Employer State of Rhode Island Occupation Shift Coordinator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
345.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 13 / 2013

Transaction ID : VN8A3BX3TJ3

Amount of Each Receipt this Period
35.00

B. Full Name (Last, First, Middle Initial)
M Anwar

Mailing Address 500 E Robinson St Ste 900

City Norman State OK Zip Code 73071-6681

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

Name of Employer Self-Employed Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1100.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 21 / 2013

Transaction ID : VN8A3BJ0Q08

Amount of Each Receipt this Period
1100.00

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

Mailing Address 3190 Bloomfield Park Dr

City West Bloomfield State MI Zip Code 48323-3511

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

Name of Employer Hematology Oncology Consultants Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 13 / 2013

Transaction ID : VN8A3BX3NN8

Amount of Each Receipt this Period
100.00

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

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

1235.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Arwa Atari

Mailing Address 1604 Culbreath Isles Dr

City Tampa State FL Zip Code 33629-4825

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

Name of Employer Premier Technologies Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 25 / 2013

Transaction ID : VN8A3BJD8E9

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Husein A Atari

Mailing Address 1604 Culbreath Isles Dr

City Tampa State FL Zip Code 33629-4825

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

Name of Employer CLI Solutions Occupation CEO/President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 25 / 2013

Transaction ID : VN8A3BJD6H9

Amount of Each Receipt this Period
 400.00

C. Full Name (Last, First, Middle Initial)
Husein A Atari

Mailing Address 1604 Culbreath Isles Dr

City Tampa State FL Zip Code 33629-4825

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

Name of Employer CLI Solutions Occupation CEO/President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 25 / 2013

Transaction ID : VN8A3BJD6K5

Amount of Each Receipt this Period
 2600.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
David Baker

Mailing Address 1197 Roesville Rd

City Felton State DE Zip Code 19943-4455

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 04 / 2013

Transaction ID : VN8A3BDX6J1

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
David Baker

Mailing Address 1197 Roesville Rd

City Felton State DE Zip Code 19943-4455

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **335.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : VN8A3BW4H41

Amount of Each Receipt this Period
35.00

C. Full Name (Last, First, Middle Initial)
Virginia H Baker

Mailing Address 1716 Bath St
Apt 3

City Santa Barbara State CA Zip Code 93101-2965

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 01 / 2013

Transaction ID : VN8A3BDKF76

Amount of Each Receipt this Period
100.00

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

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

385.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. Abdul Barakat		Date of Receipt M M / D D / Y Y Y Y 11 / 16 / 2013
Mailing Address 4175 Misty Hollow Ct		Transaction ID : VN8A3BFSFW1
City Moorpark State CA Zip Code 93021-3327	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self-Employed	Occupation Property Management	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) B. Abdul Barakat		Date of Receipt M M / D D / Y Y Y Y 11 / 16 / 2013
Mailing Address 4175 Misty Hollow Ct		Transaction ID : VN8A3BFSFX8
City Moorpark State CA Zip Code 93021-3327	Amount of Each Receipt this Period 400.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self-Employed	Occupation Property Management	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) C. Faten Barakat		Date of Receipt M M / D D / Y Y Y Y 11 / 21 / 2013
Mailing Address 13134 Andalusia Dr		Transaction ID : VN8A3BHZ7T1
City Santa Rosa Valley State CA Zip Code 93012-8867	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self-Employed	Occupation Property Mgmt.	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Nader A Barakat

Mailing Address 11261 Broadview Dr

City State Zip Code
Moorpark CA 93021-3723

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

Name of Employer Occupation
NBR Holdings Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 25 / 2013

Transaction ID : VN8A3BJD6T0

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Nidal Barakat

Mailing Address 7440 Sepulveda Blvd
Ste 331

City State Zip Code
Van Nuys CA 91405-4939

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

Name of Employer Occupation
Self Employed Property Management

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 21 / 2013

Transaction ID : VN8A3BHZ7J8

Amount of Each Receipt this Period
500.00

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

Mailing Address 30701 Woodward Ave

City State Zip Code
Royal Oak MI 48073-0987

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

Name of Employer Occupation
Self Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 21 / 2013

Transaction ID : VN8A3B7HRE0

Amount of Each Receipt this Period
500.00

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

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

1300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Ahmed Bedier

Mailing Address 7320E Fletcher Avenue

City Tampa State FL Zip Code 33637-0916

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

Name of Employer Self Employed Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 17 / 2013

Transaction ID : VN8A3BFWX4

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Ray Bellamy MD

Mailing Address 509 Vinnedge Ride

City Tallahassee State FL Zip Code 32303-5141

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

Name of Employer Tallahassee Orthopedic Clinic Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 08 / 2013

Transaction ID : VN8A3BNT028

Amount of Each Receipt this Period
 200.00

C. Full Name (Last, First, Middle Initial)
Ray Bellamy MD

Mailing Address 509 Vinnedge Ride

City Tallahassee State FL Zip Code 32303-5141

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

Name of Employer Tallahassee Orthopedic Clinic Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 02 / 2013

Transaction ID : VN8A3BVM471

Amount of Each Receipt this Period
 33.34

* Earmarked Contribution: See Below

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

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

1233.34

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

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

Name of Employer _____ Occupation **Conduit total listed in Agg. field**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **7161.90**

Date of Receipt
 M M / D D / Y Y Y Y
12 / 08 / 2013

Transaction ID : VN8A3BVM471E

Amount of Each Receipt this Period
33.34

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Owen Bieber

Mailing Address **901 Amber Ridge Dr SW**

City **Byron Center** State **MI** Zip Code **49315-9796**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **290.00**

Date of Receipt
 M M / D D / Y Y Y Y
12 / 20 / 2013

Transaction ID : VN8A3BSNNJ5

Amount of Each Receipt this Period
50.00

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

Mailing Address **3839 Hart Blvd**
Apt 313

City **Minneapolis** State **MN** Zip Code **55421-4141**

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

Name of Employer **none** Occupation **retired**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y
12 / 13 / 2013

Transaction ID : VN8A3BP9X50

Amount of Each Receipt this Period
100.00

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

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

150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Cleo J. Bohne

Mailing Address 516 4th St N

City State Zip Code
New Ulm MN 56073-1706

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 05 / 2013

Transaction ID : VN8A3BNA410

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Marilyn L Bowman

Mailing Address 1424 Fruit Ave NW

City State Zip Code
Albuquerque NM 87104-1228

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
180.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 11 / 2013

Transaction ID : VN8A3BF1QQ0

Amount of Each Receipt this Period
60.00

C. Full Name (Last, First, Middle Initial)
Marilyn L Bowman

Mailing Address 1424 Fruit Ave NW

City State Zip Code
Albuquerque NM 87104-1228

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
230.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 01 / 2013

Transaction ID : VN8A3BDKE81

Amount of Each Receipt this Period
50.00

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

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

160.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Jeffrey Brooks

Mailing Address 3716 39th Ave S

City Minneapolis State MN Zip Code 55406-2841

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

Name of Employer Occupation
Murphy Warehouse Co. Truck Driver

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 16 / 2013

Transaction ID : VN8A3B4CV69

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Jeffrey Brooks

Mailing Address 3716 39th Ave S

City Minneapolis State MN Zip Code 55406-2841

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

Name of Employer Occupation
Murphy Warehouse Co. Truck Driver

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 20 / 2013

Transaction ID : VN8A3BSP573

Amount of Each Receipt this Period
50.00

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

Mailing Address 1011 W 36th St

City Minneapolis State MN Zip Code 55408-4027

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

Name of Employer Occupation
Blue Plate Restaurant Company Restaurateur

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 30 / 2013

Transaction ID : VN8A3BD75J7

Amount of Each Receipt this Period
250.00

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

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

350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Maura E Cahill

Mailing Address 525 N Moore St

City State Zip Code
Blue Earth MN 56013-1819

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

Name of Employer Occupation
Fairmont Medical Center Radiologic Technologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 10 / 2013

Transaction ID : VN8A3B3PJ16

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Maura E Cahill

Mailing Address 525 N Moore St

City State Zip Code
Blue Earth MN 56013-1819

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

Name of Employer Occupation
Fairmont Medical Center Radiologic Technologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 29 / 2013

Transaction ID : VN8A3BD4ZY3

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Zahid F Cheema MD

Mailing Address 16501 Bradbury Cir

City State Zip Code
Edmond OK 73012-6876

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

Name of Employer Occupation
Saint Anthony Hospital Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 21 / 2013

Transaction ID : VN8A3BJ0PC0

Amount of Each Receipt this Period
500.00

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Asim Jafar Chohan

Mailing Address 5600 Normandy Ter

City Oklahoma City State OK Zip Code 73142-1824

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

Name of Employer Self-Employed Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 21 / 2013

Transaction ID : VN8A3BJOMB7

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
Charles H. Cline

Mailing Address 1860 Alta Vista Dr

City Roseville State MN Zip Code 55113-6560

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
220.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2013

Transaction ID : VN8A3BVM600

Amount of Each Receipt this Period
100.00

* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

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

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7161.90

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2013

Transaction ID : VN8A3BVM600E

Amount of Each Receipt this Period
100.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

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

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

2100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Eileen F Collard Phd

Mailing Address 4412 47th Ave S

City Minneapolis	State MN	Zip Code 55406-3623
---------------------	-------------	------------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		08		2013

Transaction ID : VN8A3B1GKH3

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Eileen F Collard Phd

Mailing Address 4412 47th Ave S

City Minneapolis	State MN	Zip Code 55406-3623
---------------------	-------------	------------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		29		2013

Transaction ID : VN8A3BVM633

Amount of Each Receipt this Period
100.00

* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City Cambridge	State MA	Zip Code 02238-2110
-------------------	-------------	------------------------

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

Name of Employer	Occupation Conduit total listed in Agg. field
------------------	--

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7161.90

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		29		2013

Transaction ID : VN8A3BVM633E

Amount of Each Receipt this Period
100.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

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

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

200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Shirley Anne Conn

Mailing Address 4636 Cedar Lake Rd S
Apt 3

City Minneapolis State MN Zip Code 55416-3770

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2013

Transaction ID : VN8A3B8HBF4

Amount of Each Receipt this Period
 100.00

B. Full Name (Last, First, Middle Initial)
Shirley Anne Conn

Mailing Address 4636 Cedar Lake Rd S
Apt 3

City Minneapolis State MN Zip Code 55416-3770

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 17 / 2013

Transaction ID : VN8A3BS5Y06

Amount of Each Receipt this Period
 200.00

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

Mailing Address 4300 W River Pkwy
Apt 602

City Minneapolis State MN Zip Code 55406-3682

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 01 / 2013

Transaction ID : VN8A3BDKGB0

Amount of Each Receipt this Period
 250.00

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

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

550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Catherine Coult

Mailing Address 4300 W River Pkwy
Apt 602

City Minneapolis State MN Zip Code 55406-3682

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 21 / 2013

Transaction ID : VN8A3BJ0J97

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
John S. Dahler

Mailing Address 1602 Mississippi River Blvd S

City Saint Paul State MN Zip Code 55116-1825

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 25 / 2013

Transaction ID : VN8A3BJD4F7

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Sharon L Dalmasso

Mailing Address 6640 Parkwood Rd

City Edina State MN Zip Code 55436-1088

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **235.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 30 / 2013

Transaction ID : VN8A3BD8YP2

Amount of Each Receipt this Period
100.00

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

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

300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Lester J Dequaine

Mailing Address 3140 Sundance Cir

City Naples State FL Zip Code 34109-8921

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2013

Transaction ID : VN8A3BD8YD0

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Kelly Jerome Doran

Mailing Address 404 River St

City Minneapolis State MN Zip Code 55401-2530

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

Name of Employer Doran Companies Occupation Real Estate Investor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 01 / 2013

Transaction ID : VN8A3BDK653

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
William E. Dufford

Mailing Address 101 S Edisto Ave

City Columbia State SC Zip Code 29205-3301

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 25 / 2013

Transaction ID : VN8A3BJD5F0

Amount of Each Receipt this Period
100.00

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

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

2950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
William E. Dufford

Mailing Address 101 S Edisto Ave

City Columbia State SC Zip Code 29205-3301

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **650.00**

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 31 / 2013

Transaction ID : VN8A3BW4CW8

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Bethany A. Dusenberry

Mailing Address 3930 River Fls

City San Antonio State TX Zip Code 78259-3649

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

Name of Employer Canta Support Services Occupation Registered Nurse

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 08 / 2013

Transaction ID : VN8A3BNT111

Amount of Each Receipt this Period
100.00

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

Mailing Address 1707 Stevens Ave
Apt 106

City Minneapolis State MN Zip Code 55403-3857

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

Name of Employer Hennepin County Occupation Lawyer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2100.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 30 / 2013

Transaction ID : VN8A3BD87V1

Amount of Each Receipt this Period
100.00

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

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

300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Patrice Eddy

Mailing Address 1707 Stevens Ave
Apt 106

City Minneapolis State MN Zip Code 55403-3857

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

Name of Employer Hennepin County Occupation Lawyer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2200.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 30 / 2013

Transaction ID : VN8A3BK9749

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Patrice Eddy

Mailing Address 1707 Stevens Ave
Apt 106

City Minneapolis State MN Zip Code 55403-3857

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

Name of Employer Hennepin County Occupation Lawyer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2300.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 30 / 2013

Transaction ID : VN8A3BTN586

Amount of Each Receipt this Period
100.00

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

Mailing Address 1073 Cedar View Dr

City Minneapolis State MN Zip Code 55405-2108

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

Name of Employer Henson & Efron P.A. Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 31 / 2013

Transaction ID : VN8A3BW0B93

Amount of Each Receipt this Period
100.00

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

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

300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Louise M Eichelberger

Mailing Address 1800 Emerald Trl SE

City Willmar State MN Zip Code 56201-4696

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 01 / 2013

Transaction ID : VN8A3BNT137

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Lamia EIMahdawy

Mailing Address 8461 SW 11th Rd

City Gainesville State FL Zip Code 32607-7017

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

Name of Employer EHR Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 16 / 2013

Transaction ID : VN8A3BFSE64

Amount of Each Receipt this Period
2600.00

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

Mailing Address 4985 SW 40th Pl

City Ocala State FL Zip Code 34474-9586

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

Name of Employer Ocala Eye Occupation Ophthalmologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1050.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 25 / 2013

Transaction ID : VN8A3BJD8P2

Amount of Each Receipt this Period
1000.00

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

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

3700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Mohamed Elyazgi

Mailing Address 1701 Oakhurst Ave

City Norman State OK Zip Code 73071-1632

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

Name of Employer State of Oklahoma Occupation Civil Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 12 / 2013

Transaction ID : VN8A3BF13B4

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Mitra T Ershaghi

Mailing Address PO Box 3779

City Rolling Hills Estates State CA Zip Code 90274-9528

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

Name of Employer Seven Seas Investment Inc Occupation Real Estate Agent

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 19 / 2013

Transaction ID : VN8A3BNT152

Amount of Each Receipt this Period
 250.00

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

Mailing Address 10511 Cedar Lake Rd Apt 418

City Minnetonka State MN Zip Code 55305-3340

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 05 / 2013

Transaction ID : VN8A3BNT145

Amount of Each Receipt this Period
 35.00

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

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

535.00

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

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

FOR LINE NUMBER: PAGE 31 OF 168
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Paul Estrin

Mailing Address 10511 Cedar Lake Rd
Apt 418

City State Zip Code
Minnetonka MN 55305-3340

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
245.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 20 / 2013

Transaction ID : VN8A3BSN9T4

Amount of Each Receipt this Period
35.00

B. Full Name (Last, First, Middle Initial)
Nancy Eustis

Mailing Address 825 Summit Ave
Apt 601

City State Zip Code
Minneapolis MN 55403-3185

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 20 / 2013

Transaction ID : VN8A3BSNXX0

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Virgil F Fairbanks

Mailing Address 620 Columbia Ct NE

City State Zip Code
Rochester MN 55906-4257

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

Name of Employer Occupation
Mayo Clinic Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 20 / 2013

Transaction ID : VN8A3BSP581

Amount of Each Receipt this Period
100.00

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

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

235.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Manal Fakhoury

Mailing Address PO Box 4428

City Ocala State FL Zip Code 34478-4428

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

Name of Employer Ocala Rregional Medical Center Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3100.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 16 / 2013

Transaction ID : VN8A3BF5FS7

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Manal Fakhoury

Mailing Address PO Box 4428

City Ocala State FL Zip Code 34478-4428

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

Name of Employer Ocala Rregional Medical Center Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3100.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 16 / 2013

Transaction ID : VN8A3BFZAF5

Amount of Each Receipt this Period
500.00

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

Mailing Address PO Box 4428

City Ocala State FL Zip Code 34478-4428

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

Name of Employer Ocala Rregional Medical Center Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 02 / 2013

Transaction ID : VN8A3BKCJP7

Amount of Each Receipt this Period
200.00

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

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

3300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Charlie Farah

Mailing Address 4436 Glen Kernan Pkwy E

City	State	Zip Code
Jacksonville	FL	32224-5626

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

Name of Employer	Occupation
Farah and Farah	Lawyer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 15 / 2013

Transaction ID : VN8A3BFEN72

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
Eddie Farah

Mailing Address 4409 Catheys Club Ln

City	State	Zip Code
Jacksonville	FL	32224-5670

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

Name of Employer	Occupation
Farah and Farah	Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 14 / 2013

Transaction ID : VN8A3BF84A3

Amount of Each Receipt this Period

500.00

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

Mailing Address 11608 Moraga Ln

City	State	Zip Code
Los Angeles	CA	90049-1644

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

Name of Employer	Occupation
Netsol, Inc.	Corporate Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2013

Transaction ID : VN8A3BD6AT2

Amount of Each Receipt this Period

250.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Jalal Farzaneh

Mailing Address 497 Manor Hill Dr

City State Zip Code
Norman OK 73072-3978

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

Name of Employer Occupation
Home Creations Home Builder

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 21 / 2013

Transaction ID : VN8A3BJ0TX2

Amount of Each Receipt this Period
2400.00

B. Full Name (Last, First, Middle Initial)
Jalal Farzaneh

Mailing Address 497 Manor Hill Dr

City State Zip Code
Norman OK 73072-3978

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

Name of Employer Occupation
Home Creations Home Builder

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 21 / 2013

Transaction ID : VN8A3BJ0TY0

Amount of Each Receipt this Period
2600.00

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

Mailing Address 3400 Crystal Spring Dr

City State Zip Code
Norman OK 73072-1318

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

Name of Employer Occupation
Home Creations Inc Architect

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 21 / 2013

Transaction ID : VN8A3BJ0TQ4

Amount of Each Receipt this Period
2400.00

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

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

7400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Mohammad Farzaneh

Mailing Address 3400 Crystal Spring Dr

City	State	Zip Code
Norman	OK	73072-1318

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

Name of Employer	Occupation
Home Creations Inc	Architect

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 21 / 2013

Transaction ID : VN8A3BJ0TV6

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Kevin P Filter

Mailing Address 1665 Hillcrest Ave

City	State	Zip Code
Saint Paul	MN	55116-2150

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

Name of Employer	Occupation
Mma Financial	Senior Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 26 / 2013

Transaction ID : VN8A3BJWZG0

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
Sara A Ghafoor

Mailing Address 10214 Huntington View Dr

City	State	Zip Code
Houston	TX	77099-3037

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

Name of Employer	Occupation
Retired	Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : VN8A3BW4J82

Amount of Each Receipt this Period
200.00

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

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

5400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Eli Glatstein

Mailing Address 220 W Rittenhouse Sq

City Philadelphia State PA Zip Code 19103-5737

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **185.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 29 / 2013

Transaction ID : VN8A3BD5FG6

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Eli Glatstein

Mailing Address 220 W Rittenhouse Sq

City Philadelphia State PA Zip Code 19103-5737

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **235.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : VN8A3BW0855

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Clifton W. Gray

Mailing Address 3032 43rd Ave S Apt 605

City Minneapolis State MN Zip Code 55406-2247

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 17 / 2013

Transaction ID : VN8A3BS5Y56

Amount of Each Receipt this Period
100.00

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

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

200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Ronald Greene

Mailing Address 1210 19th Ave NE

City Minneapolis State MN Zip Code 55418-4604

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

Name of Employer University Of Mn Occupation Professor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **265.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 20 / 2013

Transaction ID : VN8A3BX3RK8

Amount of Each Receipt this Period
60.00

B. Full Name (Last, First, Middle Initial)
Marcia Greenfield

Mailing Address 2308 32nd Ave S

City Minneapolis State MN Zip Code 55406-1458

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

Name of Employer Hennepin County Occupation Health Policy Advisor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : VN8A3BW0A19

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Abdul Hafeez M.D

Mailing Address 42275 Chatterton Ct

City Northville State MI Zip Code 48168-2095

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

Name of Employer Lincoln Behavioral Health Inc. Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 24 / 2013

Transaction ID : VN8A3B8H104

Amount of Each Receipt this Period
500.00

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

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

810.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Mahmood A Hai

Mailing Address 8102 Hyannis Ct

City Canton State MI Zip Code 48187-8208

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

Name of Employer Affiliates in Urology Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2013

Transaction ID : VN8A3B8H426

Amount of Each Receipt this Period
 300.00

B. Full Name (Last, First, Middle Initial)
Amer Haider

Mailing Address 12621 Paseo Cerro

City Saratoga State CA Zip Code 95070-6609

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

Name of Employer Cavium Networks Occupation VP Corp Dev

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 18 / 2013

Transaction ID : VN8A3BF1QW0

Amount of Each Receipt this Period
 50.00

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

Mailing Address 12621 Paseo Cerro

City Saratoga State CA Zip Code 95070-6609

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

Name of Employer Cavium Networks Occupation VP Corp Dev

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 22 / 2013

Transaction ID : VN8A3BNT1S0

Amount of Each Receipt this Period
 50.00

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

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

400.00

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

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

FOR LINE NUMBER: (check only one)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 39 OF 168

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Amer Haider

Mailing Address 12621 Paseo Cerro

City State Zip Code
 Saratoga CA 95070-6609

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

Name of Employer Occupation
 Cavium Networks VP Corp Dev

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 14 / 2013

Transaction ID : VN8A3BX3TG7

Amount of Each Receipt this Period
 50.00

B. Full Name (Last, First, Middle Initial)
Amer Haider

Mailing Address 12621 Paseo Cerro

City State Zip Code
 Saratoga CA 95070-6609

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

Name of Employer Occupation
 Cavium Networks VP Corp Dev

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 550.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 20 / 2013

Transaction ID : VN8A3BX3TK1

Amount of Each Receipt this Period
 50.00

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

Mailing Address 4904 Lyford Cay Rd

City State Zip Code
 Tampa FL 33629-4829

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

Name of Employer Occupation
 Self-Employed Cardiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 25 / 2013

Transaction ID : VN8A3BJD7T1

Amount of Each Receipt this Period
 500.00

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
M. Nazir Hamoui M.D.

Mailing Address 12900 Cortez Blvd

City State Zip Code
Brooksville FL 34613-6828

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

Name of Employer Occupation
Florida Medical Center Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 25 / 2013

Transaction ID : VN8A3BJD7F4

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Iltefat Hamzavi

Mailing Address 46638 Inverness Rd

City State Zip Code
Canton MI 48188-3050

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

Name of Employer Occupation
Self-Employed Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 24 / 2013

Transaction ID : VN8A3B8H3Q9

Amount of Each Receipt this Period
500.00

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

Mailing Address 2551 38th Ave NE
Unit 113

City State Zip Code
Minneapolis MN 55421-5006

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

Name of Employer Occupation
Signature Consultants Account Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 25 / 2013

Transaction ID : VN8A3BF1PB4

Amount of Each Receipt this Period
25.00

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

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

775.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Robert Harrington

Mailing Address 2551 38th Ave NE
Unit 113

City Minneapolis State MN Zip Code 55421-5006

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

Name of Employer Signature Consultants Occupation Account Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 22 / 2013

Transaction ID : VN8A3BNT1Y0

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Robert Harrington

Mailing Address 2551 38th Ave NE
Unit 113

City Minneapolis State MN Zip Code 55421-5006

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

Name of Employer Signature Consultants Occupation Account Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 27 / 2013

Transaction ID : VN8A3BX3RV1

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Peter A Heegaard

Mailing Address 184 Bank St SE

City Minneapolis State MN Zip Code 55414

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 25 / 2013

Transaction ID : VN8A3BJD4H3

Amount of Each Receipt this Period
200.00

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Peter A Heegaard

Mailing Address 184 Bank St SE

City Minneapolis State MN Zip Code 55414

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 20 / 2013

Transaction ID : VN8A3BSNBK2

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Elayne R Hengler

Mailing Address PO Box 97

City Hanover State MN Zip Code 55341-0097

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **325.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 07 / 2013

Transaction ID : VN8A3B1GJG4

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Elayne R Hengler

Mailing Address PO Box 97

City Hanover State MN Zip Code 55341-0097

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 01 / 2013

Transaction ID : VN8A3BDKE31

Amount of Each Receipt this Period
75.00

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

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

325.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Nomaan Husain

Mailing Address 2700 Post Oak Blvd
Ste 1220

City Houston State TX Zip Code 77056-5711

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

Name of Employer Self Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 17 / 2013

Transaction ID : VN8A3BRVJQ4

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Omar Shamshad Hussain

Mailing Address 15732 Shire Dr

City Orland Park State IL Zip Code 60467-9418

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

Name of Employer Pluminary Med Assoc. Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
360.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 22 / 2013

Transaction ID : VN8A3BNT2E6

Amount of Each Receipt this Period
90.00

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

Mailing Address 3611 Acorn Wood Way

City Houston State TX Zip Code 77059-3741

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

Name of Employer All About Home Care Occupation Physical Therapist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : VN8A3BW4HY3

Amount of Each Receipt this Period
1000.00

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

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

1340.00

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

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

FOR LINE NUMBER: PAGE 44 OF 168
(check only one)
 11a 12
 11b 13a
 11c 13b
 11d 14
 15

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Omer A Ilahi

Mailing Address 3671 Delmonte Ave

City Houston State TX Zip Code 77019

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

Name of Employer Southwest Orthopedic Group Occupation Founder

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : VN8A3BW4JE9

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Abul F. Islam

Mailing Address 7495 Cypress Pointe

City Bay City State MI Zip Code 48706-9306

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

Name of Employer Self-Employed Occupation Gastroenterologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : VN8A3BW45Q3

Amount of Each Receipt this Period
500.00

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

Mailing Address 3128 Harrison St

City Glenview State IL Zip Code 60025-4554

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 21 / 2013

Transaction ID : VN8A3B7JG27

Amount of Each Receipt this Period
25.00

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

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

1025.00

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

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

FOR LINE NUMBER: (check only one)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 45 OF 168

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Syed Jafer

Mailing Address 3128 Harrison St

City State Zip Code
 Glenview IL 60025-4554

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

Name of Employer Occupation
 Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 575.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 07 / 2013

Transaction ID : VN8A3BEEEF9

Amount of Each Receipt this Period
 25.00

B. Full Name (Last, First, Middle Initial)
Syed Jafer

Mailing Address 3128 Harrison St

City State Zip Code
 Glenview IL 60025-4554

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

Name of Employer Occupation
 Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 625.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 20 / 2013

Transaction ID : VN8A3BSNCQ6

Amount of Each Receipt this Period
 25.00

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

Mailing Address 3128 Harrison St

City State Zip Code
 Glenview IL 60025-4554

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

Name of Employer Occupation
 Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 625.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 20 / 2013

Transaction ID : VN8A3BSNCS2

Amount of Each Receipt this Period
 25.00

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

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

75.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Samar Jarrah

Mailing Address 1105 Yorkshire St

City State Zip Code
Port Charlotte FL 33952-1432

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

Name of Employer Occupation
USF Professor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 21 / 2013

Transaction ID : VN8A3BH2RF9

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Harry P. Kamen

Mailing Address 910 Park Ave

City State Zip Code
New York NY 10075-0255

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
900.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 01 / 2013

Transaction ID : VN8A3BF1KX8

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Harry P. Kamen

Mailing Address 910 Park Ave

City State Zip Code
New York NY 10075-0255

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 14 / 2013

Transaction ID : VN8A3BF7ZY9

Amount of Each Receipt this Period
400.00

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

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

850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Imad Kamran

Mailing Address 6 Perry Ave

City Menlo Park State CA Zip Code 94025-6172

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

Name of Employer Evercore Occupation Finance

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **650.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 06 / 2013

Transaction ID : VN8A3B05HD8

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Imad Kamran

Mailing Address 6 Perry Ave

City Menlo Park State CA Zip Code 94025-6172

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

Name of Employer Evercore Occupation Finance

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 08 / 2013

Transaction ID : VN8A3B1GRQ2

Amount of Each Receipt this Period
50.00

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

Mailing Address 6 Perry Ave

City Menlo Park State CA Zip Code 94025-6172

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

Name of Employer Evercore Occupation Finance

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **800.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2013

Transaction ID : VN8A3B8EZR3

Amount of Each Receipt this Period
100.00

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

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

200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Imad Kamran

Mailing Address 6 Perry Ave

City Menlo Park State CA Zip Code 94025-6172

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

Name of Employer Evercore Occupation Finance

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **850.00**

Date of Receipt
 M M / D D / Y Y Y Y
11 / 06 / 2013

Transaction ID : VN8A3BE44E2

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Imad Kamran

Mailing Address 6 Perry Ave

City Menlo Park State CA Zip Code 94025-6172

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

Name of Employer Evercore Occupation Finance

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **900.00**

Date of Receipt
 M M / D D / Y Y Y Y
11 / 08 / 2013

Transaction ID : VN8A3BEPV44

Amount of Each Receipt this Period
50.00

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

Mailing Address 6 Perry Ave

City Menlo Park State CA Zip Code 94025-6172

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

Name of Employer Evercore Occupation Finance

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
11 / 24 / 2013

Transaction ID : VN8A3BJAMG6

Amount of Each Receipt this Period
100.00

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

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

200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) Imad Kamran		Date of Receipt M M / D D / Y Y Y Y 12 / 06 / 2013
Mailing Address 6 Perry Ave		Transaction ID : VN8A3BNDJM5
City Menlo Park	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Evercore	Occupation Finance	Election Cycle-to-Date 1050.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) Imad Kamran		Date of Receipt M M / D D / Y Y Y Y 12 / 08 / 2013
Mailing Address 6 Perry Ave		Transaction ID : VN8A3BNGCP2
City Menlo Park	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Evercore	Occupation Finance	Election Cycle-to-Date 1100.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) Imad Kamran		Date of Receipt M M / D D / Y Y Y Y 12 / 24 / 2013
Mailing Address 6 Perry Ave		Transaction ID : VN8A3BT71Q3
City Menlo Park	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Evercore	Occupation Finance	Election Cycle-to-Date 1200.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Catherine A Kane

Mailing Address 12 Maplewood Ct
Apt B

City Gaithersburg State MD Zip Code 20877-3092

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 01 / 2013

Transaction ID : VN8A3BDKFX9

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Abdalmajid Katranji

Mailing Address 7860 Ashbrook Dr

City Haslett State MI Zip Code 48840-8854

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

Name of Employer Self-Employed Occupation Surgeon

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 24 / 2013

Transaction ID : VN8A3B8H630

Amount of Each Receipt this Period
500.00

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

Mailing Address 7860 Ashbrook Dr

City Haslett State MI Zip Code 48840-8854

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

Name of Employer Self-Employed Occupation Surgeon

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 25 / 2013

Transaction ID : VN8A3BJD6D7

Amount of Each Receipt this Period
500.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Thomas C Kayser

Mailing Address 460 Mississippi River Blvd S

City Saint Paul State MN Zip Code 55105-1324

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

Name of Employer Robins Kaplan Miller & Ciresi Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 25 / 2013

Transaction ID : VN8A3BJCZY7

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Jack Roberta Kettlewell

Mailing Address 7048 Drew Ave N

City Brooklyn Center State MN Zip Code 55429-1436

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 02 / 2013

Transaction ID : VN8A3BKECY2

Amount of Each Receipt this Period
 250.00

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

Mailing Address 12817 Sutton Hill Rd

City Oklahoma City State OK Zip Code 73142-6062

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

Name of Employer University of Oklahoma Occupation Professor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 21 / 2013

Transaction ID : VN8A3BJON60

Amount of Each Receipt this Period
 750.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Azhar U Khan

Mailing Address 3916 Red Deer Xing

City Edmond State OK Zip Code 73034-6972

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

Name of Employer Self-Employed Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 21 / 2013

Transaction ID : VN8A3BJ0RS7

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Faraz Khan

Mailing Address 5405 Huckleberry Ln

City Houston State TX Zip Code 77056-2715

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

Name of Employer Synergy Radiology Associates Occupation Physician-Radiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 07 / 2013

Transaction ID : VN8A3BNF944

Amount of Each Receipt this Period
 900.00

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

Mailing Address 5405 Huckleberry Ln

City Houston State TX Zip Code 77056-2715

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

Name of Employer Synergy Radiology Associates Occupation Physician-Radiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 07 / 2013

Transaction ID : VN8A3BXQ9W5

Amount of Each Receipt this Period
 100.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Salman Ali Khan

Mailing Address 4913 Spruce St

City	State	Zip Code
Bellaire	TX	77401-4034

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

Name of Employer	Occupation
Renal Specialists of Houston	MD

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : VN8A3BW4JP3

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Haleh Khatami

Mailing Address 2524 Wavecrest Dr

City	State	Zip Code
Corona Del Mar	CA	92625-1323

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

Name of Employer	Occupation
Sinuscience Network	Clinical Pharmacist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : VN8A3BW4JP6

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mohammed A Khila

Mailing Address PO Box 4361

City	State	Zip Code
Ocala	FL	34478-4361

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

Name of Employer	Occupation
Ocala Golf Cart Supercenter Inc.	Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 03 / 2013

Transaction ID : VN8A3BKHBN2

Amount of Each Receipt this Period
500.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Sarah Kiani

Mailing Address 1 Point Catalina

City Laguna Niguel State CA Zip Code 92677-9207

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 13 / 2013

Transaction ID : VN8A3BPA547

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Sarah Kiani

Mailing Address 1 Point Catalina

City Laguna Niguel State CA Zip Code 92677-9207

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 13 / 2013

Transaction ID : VN8A3BXQ929

Amount of Each Receipt this Period
2400.00

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

Mailing Address PO Box 223

City Waddell State AZ Zip Code 85355-0223

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

Name of Employer Nuclear Plant Occupation Chem Tech

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 25 / 2013

Transaction ID : VN8A3BF1QH3

Amount of Each Receipt this Period
25.00

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

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

5025.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Randall Kidd

Mailing Address **PO Box 223**

City **Waddell** State **AZ** Zip Code **85355-0223**

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

Name of Employer **Nuclear Plant** Occupation **Chem Tech**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
11 / 29 / 2013

Transaction ID : VN8A3BX3T76

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Carla Kjellberg

Mailing Address **5001 3rd Ave S**

City **Minneapolis** State **MN** Zip Code **55419-1413**

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

Name of Employer **Self-Employed** Occupation **Lawyer**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
10 / 18 / 2013

Transaction ID : VN8A3B6XA37

Amount of Each Receipt this Period
50.00

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

Mailing Address **5001 3rd Ave S**

City **Minneapolis** State **MN** Zip Code **55419-1413**

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

Name of Employer **Self-Employed** Occupation **Lawyer**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
11 / 18 / 2013

Transaction ID : VN8A3BFX8R6

Amount of Each Receipt this Period
50.00

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

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

125.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Carla Kjellberg

Mailing Address 5001 3rd Ave S

City Minneapolis State MN Zip Code 55419-1413

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

Name of Employer Self-Employed Occupation Lawyer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 18 / 2013

Transaction ID : VN8A3BS8JF2

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Donald Kraybill

Mailing Address 3738 County Road 54 NE

City Longville State MN Zip Code 56655-3355

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 20 / 2013

Transaction ID : VN8A3BSQRR6

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Donna Taylor Krislov

Mailing Address 1718 Oliver Ave S

City Minneapolis State MN Zip Code 55405-2207

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

Name of Employer Self-Employed Occupation Piano Teacher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **220.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 03 / 2013

Transaction ID : VN8A3BX3Q89

Amount of Each Receipt this Period
50.00

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

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

300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Melvin Levy

Mailing Address 11157 Regatta Ln

City Wellington State FL Zip Code 33449-7416

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2013

Transaction ID : VN8A3BDX617

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Melvin Levy

Mailing Address 11157 Regatta Ln

City Wellington State FL Zip Code 33449-7416

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : VN8A3BW40C6

Amount of Each Receipt this Period
25.00

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

Mailing Address 300 Wall St
Unit 705

City Saint Paul State MN Zip Code 55101-2480

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 13 / 2013

Transaction ID : VN8A3BXQAJ9

Amount of Each Receipt this Period
250.00

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

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

300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Steve R Lewis Jr.

Mailing Address 300 Wall St
Unit 705

City Saint Paul State MN Zip Code 55101-2480

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

Name of Employer Self-Employed Occupation Economist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 13 / 2013

Transaction ID : VN8A3C2EAN9

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
James E Lindell

Mailing Address 53 4th Ave N
Apt 102

City Minneapolis State MN Zip Code 55401-3348

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

Name of Employer Self-Employed Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 01 / 2013

Transaction ID : VN8A3BNT2Z1

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Martha F Lofstrom

Mailing Address 3841 Joppa Ave S

City St Louis Park State MN Zip Code 55416-4941

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

Name of Employer United Health Group Occupation Reporting Specialist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2013

Transaction ID : VN8A3BD4ZQ8

Amount of Each Receipt this Period
1000.00

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

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

1300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Katherine Austin Mahle

Mailing Address 1410 Spring Valley Rd

City Golden Valley State MN Zip Code 55422-4748

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 18 / 2013

Transaction ID : VN8A3BVMC44

Amount of Each Receipt this Period
 25.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

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

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **7161.90**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 24 / 2013

Transaction ID : VN8A3BVMC44E

Amount of Each Receipt this Period
 25.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

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

Mailing Address 2828 Glenhaven Dr

City Midwest City State OK Zip Code 73110-4002

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

Name of Employer Self-Employed Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 21 / 2013

Transaction ID : VN8A3BJ0P47

Amount of Each Receipt this Period
 500.00

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

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

525.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Junaid S. Malik

Mailing Address 6442 Cedar Creek Ct

City Mason State OH Zip Code 45040-7649

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

Name of Employer Pulmonary, Critical Care and Sleep med Occupation Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : VN8A3BW4CF5

Amount of Each Receipt this Period
250.00

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

Mailing Address 463 Mount Curve Blvd

City Saint Paul State MN Zip Code 55105-1325

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

Name of Employer Robins, Kaplan, Miller & Ciresi Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 25 / 2013

Transaction ID : VN8A3BJCXP0

Amount of Each Receipt this Period
500.00

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

Mailing Address PO Box 721383

City Norman State OK Zip Code 73070-8065

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

Name of Employer Midwest Engineering and Testing Occupation Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 21 / 2013

Transaction ID : VN8A3BJ0P97

Amount of Each Receipt this Period
1000.00

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

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

1750.00

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

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

FOR LINE NUMBER: PAGE 61 OF 168
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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

NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Erwin Marquit

Mailing Address 3512 W 22nd St

City Minneapolis State MN Zip Code 55416-3635

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 20 / 2013

Transaction ID : VN8A3BSNE91

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Harold Adams Massey

Mailing Address 11641 Tanglewood Dr

City Eden Prairie State MN Zip Code 55347-4725

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

Name of Employer Self-Employed Occupation Ovations

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 15 / 2013

Transaction ID : VN8A3B4A4Q9

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Jana L Maxwell

Mailing Address 9225 Medicine Lake Rd
Apt 104

City Golden Valley State MN Zip Code 55427-3166

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 05 / 2013

Transaction ID : VN8A3BE25H2

Amount of Each Receipt this Period
100.00

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Jana L Maxwell

Mailing Address 9225 Medicine Lake Rd
Apt 104

City State Zip Code
Golden Valley MN 55427-3166

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 20 / 2013

Transaction ID : VN8A3BSNA76

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Carol T McCarthy

Mailing Address 1201 N Harrison St
Apt 1006

City State Zip Code
Wilmington DE 19806-3527

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 20 / 2013

Transaction ID : VN8A3BSNG60

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Richard D McFarland

Mailing Address 6341 Murray Hill Rd

City State Zip Code
Excelsior MN 55331-8832

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 29 / 2013

Transaction ID : VN8A3BD50A8

Amount of Each Receipt this Period
500.00

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

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

650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
John S McKillop

Mailing Address 10442 SE Eastmont Dr

City Damascus	State OR	Zip Code 97089-6350
------------------	-------------	------------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		01		2013

Transaction ID : VN8A3BDKFW2

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
John S McKillop

Mailing Address 10442 SE Eastmont Dr

City Damascus	State OR	Zip Code 97089-6350
------------------	-------------	------------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		20		2013

Transaction ID : VN8A3BSQRP0

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Sara M Meyer

Mailing Address 5128 Russell Ave S

City Minneapolis	State MN	Zip Code 55410-2235
---------------------	-------------	------------------------

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

Name of Employer The Nature Conservatory	Occupation Director of HR
---	------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		13		2013

Transaction ID : VN8A3BX3QY2

Amount of Each Receipt this Period
200.00

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

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

300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Kenan Mossa Basha

Mailing Address 22445 Trillium Dr

City State Zip Code
Novi MI 48375-4670

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

Name of Employer Occupation
Oxbridge Growth Equity Financial Analyst

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 21 / 2013

Transaction ID : VN8A3B7HSH6

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
M. Reda Mossa-Basha

Mailing Address 5518 Salem Dr S

City State Zip Code
Carmel IN 46033-8585

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

Name of Employer Occupation
Self Radiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 24 / 2013

Transaction ID : VN8A3B8H5G0

Amount of Each Receipt this Period
300.00

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

Mailing Address 3940 SE 39th Cir

City State Zip Code
Ocala FL 34480-4951

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

Name of Employer Occupation
Christie Dental Ocala Southwest Dentist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 21 / 2013

Transaction ID : VN8A3BHZQF8

Amount of Each Receipt this Period
500.00

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

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

1300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Hashem Mubarak

Mailing Address 3317 Harbour PI

City Panama City	State FL	Zip Code 32405-1638
---------------------	-------------	------------------------

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

Name of Employer Cadiology Associates	Occupation Physician
--	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 01 / 2013

Transaction ID : VN8A3BF1M51

Amount of Each Receipt this Period
 _____ 100.00

B. Full Name (Last, First, Middle Initial)
Hashem Mubarak

Mailing Address 3317 Harbour PI

City Panama City	State FL	Zip Code 32405-1638
---------------------	-------------	------------------------

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

Name of Employer Cadiology Associates	Occupation Physician
--	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 27 / 2013

Transaction ID : VN8A3BX3ND4

Amount of Each Receipt this Period
 _____ 250.00

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

Mailing Address 2301 Outabounds Way

City Edmond	State OK	Zip Code 73034-3074
----------------	-------------	------------------------

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

Name of Employer Home Creations	Occupation Lawyer
------------------------------------	----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 21 / 2013

Transaction ID : VN8A3BJ0KA8

Amount of Each Receipt this Period
 _____ 500.00

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

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

_____ 850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Syed A Naeem

Mailing Address 4 Camden Ct

City State Zip Code
Sugar Land TX 77479-4136

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

Name of Employer Occupation
Insurance Agent

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 31 2013

Transaction ID : VN8A3BW4J66

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Atefeh Naeemi

Mailing Address 1700 Hidden Springs Path
Apt 1054

City State Zip Code
Round Rock TX 78665-5022

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

Name of Employer Occupation
N/A Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
275.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 30 2013

Transaction ID : VN8A3BDAX75

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Abdul S. Nakadar

Mailing Address 29004 W 8 Mile Rd

City State Zip Code
Farmington Hills MI 48336-5910

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 24 2013

Transaction ID : VN8A3B8H3X7

Amount of Each Receipt this Period
250.00

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Ayaz I Nasser

Mailing Address 10703 Memorial Cv

City Houston State TX Zip Code 77024-6839

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

Name of Employer Zenith Real Estate Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : VN8A3BW4JA8

Amount of Each Receipt this Period
 1500.00

B. Full Name (Last, First, Middle Initial)
Kimberly A Nelson

Mailing Address 555 Far Hill Rd

City Wayzata State MN Zip Code 55391-1002

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

Name of Employer General Mills Occupation SVP, External Relations

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 06 / 2013

Transaction ID : VN8A3BE6GK4

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Kimberly A Nelson

Mailing Address 555 Far Hill Rd

City Wayzata State MN Zip Code 55391-1002

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

Name of Employer General Mills Occupation SVP, External Relations

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 03 / 2013

Transaction ID : VN8A3BKGSB6

Amount of Each Receipt this Period
 500.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Patricia Norwood

Mailing Address 521 Argo Ave

City San Antonio State TX Zip Code 78209-4403

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

Name of Employer self Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 03 / 2013

Transaction ID : VN8A3BVMDE6

Amount of Each Receipt this Period
50.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

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

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7161.90

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 06 / 2013

Transaction ID : VN8A3BVMDE6E

Amount of Each Receipt this Period
50.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

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

Mailing Address 521 Argo Ave

City San Antonio State TX Zip Code 78209-4403

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

Name of Employer self Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2013

Transaction ID : VN8A3BVMDF4

Amount of Each Receipt this Period
50.00

* Earmarked Contribution: See Below

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

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

100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7161.90

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2013

Transaction ID : VN8A3BVMD4E

Amount of Each Receipt this Period
50.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Patricia Norwood

Mailing Address 521 Argo Ave

City San Antonio State TX Zip Code 78209-4403

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

Name of Employer Occupation
self Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 03 / 2013

Transaction ID : VN8A3BVMDG2

Amount of Each Receipt this Period
50.00

* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7161.90

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 08 / 2013

Transaction ID : VN8A3BVMDG2E

Amount of Each Receipt this Period
50.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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

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

50.00

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

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

FOR LINE NUMBER: PAGE 70 OF 168
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Molly Oberbillig

Mailing Address 1907 Parkwood Dr SE

City Olympia State WA Zip Code 98501-3059

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **217.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 18 / 2013

Transaction ID : VN8A3BF1QY5

Amount of Each Receipt this Period
20.00

B. Full Name (Last, First, Middle Initial)
Molly Oberbillig

Mailing Address 1907 Parkwood Dr SE

City Olympia State WA Zip Code 98501-3059

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **262.00**

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 01 / 2013

Transaction ID : VN8A3BDKDY2

Amount of Each Receipt this Period
45.00

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

Mailing Address 1907 Parkwood Dr SE

City Olympia State WA Zip Code 98501-3059

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **282.00**

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 22 / 2013

Transaction ID : VN8A3BNT3G3

Amount of Each Receipt this Period
20.00

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

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

85.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Molly Oberbillig

Mailing Address 1907 Parkwood Dr SE

City Olympia	State WA	Zip Code 98501-3059
-----------------	-------------	------------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
302.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 20 / 2013

Transaction ID : VN8A3BX3TH5

Amount of Each Receipt this Period
20.00

B. Full Name (Last, First, Middle Initial)
Molly Oberbillig

Mailing Address 1907 Parkwood Dr SE

City Olympia	State WA	Zip Code 98501-3059
-----------------	-------------	------------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
322.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 27 / 2013

Transaction ID : VN8A3BX3TN7

Amount of Each Receipt this Period
20.00

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

Mailing Address 8905 W 34th St

City St Louis Park	State MN	Zip Code 55426-3701
-----------------------	-------------	------------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 30 / 2013

Transaction ID : VN8A3BX3S50

Amount of Each Receipt this Period
100.00

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

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

140.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Esam Omeish

Mailing Address 3133 Barkley Dr

City State Zip Code
Fairfax VA 22031-2720

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

Name of Employer Occupation
Self-Employed Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 10 / 2013

Transaction ID : VN8A3B3PKE2

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Diane W Parker

Mailing Address 105 Watson St

City State Zip Code
Thomasville GA 31792-7443

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

Name of Employer Occupation
Self-Employed Retail

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 20 / 2013

Transaction ID : VN8A3BSP6R0

Amount of Each Receipt this Period
500.00

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

Mailing Address 11800 Bemis Rd

City State Zip Code
Manchester MI 48158

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

Name of Employer Occupation
Grace Home Care Physical Therapist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 31 / 2013

Transaction ID : VN8A3BVMDV8

Amount of Each Receipt this Period
250.00

* Earmarked Contribution: See Below

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Ellison for Congress

A. ActBlue
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 382110
 City Cambridge State MA Zip Code 02238-2110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation Conduit total listed in Agg. field
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 7161.90

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2013
Transaction ID : VN8A3BVMDV8E
 Amount of Each Receipt this Period
 250.00
[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

B. Antoinette Perkins
 Full Name (Last, First, Middle Initial)
 Mailing Address 38 Uncle Bobs Way Apt 202
 City South Dennis State MA Zip Code 02660-2610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation Retired Retired
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 180.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 25 / 2013
Transaction ID : VN8A3BF1KN5
 Amount of Each Receipt this Period
 20.00

C. Antoinette Perkins
 Full Name (Last, First, Middle Initial)
 Mailing Address 38 Uncle Bobs Way Apt 202
 City South Dennis State MA Zip Code 02660-2610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation Retired Retired
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 200.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 29 / 2013
Transaction ID : VN8A3BX3TM9
 Amount of Each Receipt this Period
 20.00

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

40.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Antoinette Perkins

Mailing Address 38 Uncle Bobs Way
Apt 202

City South Dennis State MA Zip Code 02660-2610

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
220.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 27 / 2013

Transaction ID : VN8A3BX3TQ2

Amount of Each Receipt this Period
20.00

B. Full Name (Last, First, Middle Initial)
Norman Perrill

Mailing Address 840 Hillcrest Rd NE

City Hutchinson State MN Zip Code 55350-1312

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 20 / 2013

Transaction ID : VN8A3BSNGQ4

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Kathleen F Peterson

Mailing Address 222 2nd St SE
Apt 901

City Minneapolis State MN Zip Code 55414-5140

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

Name of Employer Robins, Kaplan, Ciresi, & Miller Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 25 / 2013

Transaction ID : VN8A3BJCZF8

Amount of Each Receipt this Period
500.00

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

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

620.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Hormoz Tony Pezeshkian

Mailing Address 1617 Mission Rd

City Edmond State OK Zip Code 73034-6570

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

Name of Employer Summit Business Systems Occupation Office Equipment Dealer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 21 / 2013

Transaction ID : VN8A3BJ0Q72

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
James Pochert

Mailing Address 5861 Penny Farm Dr SE

City Kentwood State MI Zip Code 49508-6495

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

Name of Employer Spectrum Health Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 08 / 2013

Transaction ID : VN8A3BNT3Q8

Amount of Each Receipt this Period
200.00

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

Mailing Address 6245 S Langston Rd

City Seattle State WA Zip Code 98178-3563

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

Name of Employer WA ST Senate Occupation State Senator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
460.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 15 / 2013

Transaction ID : VN8A3BVMEJ6

Amount of Each Receipt this Period
100.00

* Earmarked Contribution: See Below

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7161.90

Date of Receipt
 M M / D D / Y Y Y Y
10 / 20 / 2013

Transaction ID : VN8A3BVMEJ6E

Amount of Each Receipt this Period
100.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Farid Qazi

Mailing Address 5853 Kentucky Downs Dr

City Macon State GA Zip Code 31210-5308

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

Name of Employer Occupation
Self-Employed Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
12 / 27 / 2013

Transaction ID : VN8A3BX3NA1

Amount of Each Receipt this Period
100.00

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

Mailing Address 2508 SW 35th Pl
Unit R107

City Gainesville State FL Zip Code 32608-3252

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

Name of Employer Occupation
University of Florida Neurosurgeon

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
11 / 25 / 2013

Transaction ID : VN8A3BJD763

Amount of Each Receipt this Period
1000.00

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

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

1100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Alice O Ritter

Mailing Address 2121 S Timberline Ave

City State Zip Code
Tucson AZ 85710-6026

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 06 / 2013

Transaction ID : VN8A3BE5YQ8

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Alice O Ritter

Mailing Address 2121 S Timberline Ave

City State Zip Code
Tucson AZ 85710-6026

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
275.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : VN8A3BW08F4

Amount of Each Receipt this Period
25.00

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

Mailing Address 910 Cannon Valley Dr
Apt 2226

City State Zip Code
Northfield MN 55057-3349

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
230.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 13 / 2013

Transaction ID : VN8A3BP9Z95

Amount of Each Receipt this Period
50.00

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

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

125.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Brynhild Rowberg

Mailing Address 910 Cannon Valley Dr
Apt 2226

City Northfield State MN Zip Code 55057-3349

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **280.00**

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 20 / 2013

Transaction ID : VN8A3BSN9X7

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Marilyn Ruttan

Mailing Address 1666 Coffman St
Apt 112

City Saint Paul State MN Zip Code 55108-1326

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 06 / 2013

Transaction ID : VN8A3BX3P96

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Ibrahim A Salman

Mailing Address 4236 SW 32nd St

City Ocala State FL Zip Code 34474-9823

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

Name of Employer Salman Consulting Occupation Principal

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 30 / 2013

Transaction ID : VN8A3BK9WP5

Amount of Each Receipt this Period
250.00

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Ibrahim A Salman

Mailing Address 4236 SW 32nd St

City Ocala State FL Zip Code 34474-9823

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

Name of Employer: Salman Consulting Occupation: Principal

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **500.00**

Date of Receipt: **12 / 30 / 2013**

Transaction ID : VN8A3BTN1F2

Amount of Each Receipt this Period: **250.00**

B. Full Name (Last, First, Middle Initial)
Waseem A. Salous

Mailing Address 10509 Waterside Dr

City Oklahoma City State OK Zip Code 73170-2529

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

Name of Employer: IHOP Occupation: Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **250.00**

Date of Receipt: **11 / 21 / 2013**

Transaction ID : VN8A3BJ0M75

Amount of Each Receipt this Period: **250.00**

C. Full Name (Last, First, Middle Initial)
Joyce E Schlager

Mailing Address 701 3rd Ave E

City Ada State MN Zip Code 56510-1118

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

Name of Employer: Retired Occupation: Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **175.00**

Date of Receipt: **11 / 01 / 2013**

Transaction ID : VN8A3BDKFZ5

Amount of Each Receipt this Period: **30.00**

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

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

530.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Joyce E Schlagel

Mailing Address 701 3rd Ave E

City: Ada State: MN Zip Code: 56510-1118

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

Name of Employer: Retired Occupation: Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 205.00

Date of Receipt: 11 / 08 / 2013

Transaction ID : VN8A3BNT4E0

Amount of Each Receipt this Period: 30.00

B. Full Name (Last, First, Middle Initial)
Joyce E Schlagel

Mailing Address 701 3rd Ave E

City: Ada State: MN Zip Code: 56510-1118

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

Name of Employer: Retired Occupation: Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 235.00

Date of Receipt: 12 / 06 / 2013

Transaction ID : VN8A3BX3SW9

Amount of Each Receipt this Period: 30.00

C. Full Name (Last, First, Middle Initial)
Joyce E Schlagel

Mailing Address 701 3rd Ave E

City: Ada State: MN Zip Code: 56510-1118

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

Name of Employer: Retired Occupation: Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 265.00

Date of Receipt: 12 / 16 / 2013

Transaction ID : VN8A3BRSR42

Amount of Each Receipt this Period: 30.00

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

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

90.00

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

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

FOR LINE NUMBER: PAGE 81 OF 168
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Farrukh Shamsi

Mailing Address 3 Falling Leaf Ln

City Houston State TX Zip Code 77024-4513

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

Name of Employer Texas Clinic Fulton Occupation President/CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 31 / 2013

Transaction ID : VN8A3BW4JH3

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Dean J Shea

Mailing Address 110 Bank St SE Apt 1703

City Minneapolis State MN Zip Code 55414-3900

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

Name of Employer Cadence Design Systems, Inc Occupation Programmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 31 / 2013

Transaction ID : VN8A3BW0AX0

Amount of Each Receipt this Period
 500.00

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

Mailing Address 2109 Alaqua Lakes Blvd

City Longwood State FL Zip Code 32779-3206

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

Name of Employer Apple Occupation Software Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 15 / 2013

Transaction ID : VN8A3BFFS60

Amount of Each Receipt this Period
 2600.00

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

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

3350.00

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

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

FOR LINE NUMBER: PAGE 82 OF 168
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Haroon Sheikh

Mailing Address 2109 Alaqua Lakes Blvd

City State Zip Code
Longwood FL 32779-3206

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

Name of Employer Occupation
Apple Software Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4950.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 15 2013

Transaction ID : VN8A3BFZAE8

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Elizabeth Sherry

Mailing Address 6960 Hyde Park Dr
Unit 18

City State Zip Code
San Diego CA 92119-2276

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

Name of Employer Occupation
retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 22 2013

Transaction ID : VN8A3BNT4H4

Amount of Each Receipt this Period
50.00

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

Mailing Address 1317 Wagner Road

City State Zip Code
Glenview IL 60025

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

Name of Employer Occupation
Mazik Global President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 06 2013

Transaction ID : VN8A3B05HH9

Amount of Each Receipt this Period
500.00

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

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

3150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Jerry W. Snider

Mailing Address 6270 Ridge Rd

City Chanhassen State MN Zip Code 55317-9438

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

Name of Employer Faegre & Benson LLP Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2013

Transaction ID : VN8A3BF1N70

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Peggy Stubs

Mailing Address 208 Saint Mark Way

City Westminster State MD Zip Code 21158-4164

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 14 / 2013

Transaction ID : VN8A3B442V9

Amount of Each Receipt this Period
 50.00

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

Mailing Address 208 Saint Mark Way

City Westminster State MD Zip Code 21158-4164

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2013

Transaction ID : VN8A3BDX455

Amount of Each Receipt this Period
 50.00

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Peggy Stubs

Mailing Address 208 Saint Mark Way

City State Zip Code
Westminster MD 21158-4164

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
475.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 14 / 2013

Transaction ID : VN8A3BF8555

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Peggy Stubs

Mailing Address 208 Saint Mark Way

City State Zip Code
Westminster MD 21158-4164

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
525.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 14 / 2013

Transaction ID : VN8A3BPB7T3

Amount of Each Receipt this Period
50.00

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

Mailing Address 5425 Centerbrook Dr

City State Zip Code
West Bloomfield MI 48322-3814

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

Name of Employer Occupation
Wayne State Medical School Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 24 / 2013

Transaction ID : VN8A3B8H4N6

Amount of Each Receipt this Period
250.00

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

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

350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Joan Surprenant

Mailing Address 1612 Roe Crest Dr
Apt 8

City North Mankato State MN Zip Code 56003-2654

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **240.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 18 / 2013

Transaction ID : VN8A3BF1Q82

Amount of Each Receipt this Period
30.00

B. Full Name (Last, First, Middle Initial)
Joan Surprenant

Mailing Address 1612 Roe Crest Dr
Apt 8

City North Mankato State MN Zip Code 56003-2654

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **270.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 15 / 2013

Transaction ID : VN8A3BNT4S7

Amount of Each Receipt this Period
30.00

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

Mailing Address 995 106th Ln NW
Apt 48

City Coon Rapids State MN Zip Code 55433-4325

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

Name of Employer Anoka-Hamilton School District Occupation Teacher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 01 / 2013

Transaction ID : VN8A3BF1PW7

Amount of Each Receipt this Period
50.00

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

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

110.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Kathleen Thompson

Mailing Address 995 106th Ln NW
Apt 48

City Coon Rapids State MN Zip Code 55433-4325

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

Name of Employer Anoka-Hamilton School District Occupation Teacher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 01 / 2013

Transaction ID : VN8A3BNT4R9

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Kathleen Thompson

Mailing Address 995 106th Ln NW
Apt 48

City Coon Rapids State MN Zip Code 55433-4325

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

Name of Employer Anoka-Hamilton School District Occupation Teacher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 06 / 2013

Transaction ID : VN8A3BX3SB8

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
William L. Tilton Esq

Mailing Address 936 Lincoln Ave

City Saint Paul State MN Zip Code 55105-3148

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

Name of Employer Tilton & Dunn PLLP Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 13 / 2013

Transaction ID : VN8A3B40RN7

Amount of Each Receipt this Period
50.00

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

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

150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
William L. Tilton Esq

Mailing Address 936 Lincoln Ave

City Saint Paul State MN Zip Code 55105-3148

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

Name of Employer Tilton & Dunn PLLP Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 13 / 2013

Transaction ID : VN8A3BF45F1

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
William L. Tilton Esq

Mailing Address 936 Lincoln Ave

City Saint Paul State MN Zip Code 55105-3148

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

Name of Employer Tilton & Dunn PLLP Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **800.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 13 / 2013

Transaction ID : VN8A3BP9B67

Amount of Each Receipt this Period
50.00

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

Mailing Address 4229 Creed Ave

City Los Angeles State CA Zip Code 90008-4501

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **320.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 20 / 2013

Transaction ID : VN8A3BHWRX6

Amount of Each Receipt this Period
50.00

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

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

150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Elaine Towns

Mailing Address 4229 Creed Ave

City Los Angeles State CA Zip Code 90008-4501

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **420.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 02 / 2013

Transaction ID : VN8A3BKE3Q9

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Hamid Valadkhani

Mailing Address 911 W Elmira St

City Broken Arrow State OK Zip Code 74012-0869

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

Name of Employer Home Creations Occupation Home Builder

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 21 / 2013

Transaction ID : VN8A3BJ0QF5

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Mary W. Vaughan

Mailing Address 510 Groveland Ave # 404

City Minneapolis State MN Zip Code 55403-3220

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2013

Transaction ID : VN8A3BD8V69

Amount of Each Receipt this Period
1000.00

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

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

1300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
David Walters

Mailing Address 6219 Riviera Dr

City State Zip Code
Oklahoma City OK 73112-7359

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

Name of Employer Occupation
Walters Power President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 21 / 2013

Transaction ID : VN8A3BJ0JW8

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Thomas Williams

Mailing Address 514 19th St S

City State Zip Code
Moorhead MN 56560-3138

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
210.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 01 / 2013

Transaction ID : VN8A3BNT4Z4

Amount of Each Receipt this Period
60.00

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

Mailing Address 4300 W River Pkwy
Apt 363

City State Zip Code
Minneapolis MN 55406-3680

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
265.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 13 / 2013

Transaction ID : VN8A3B40RM9

Amount of Each Receipt this Period
10.00

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

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

320.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Jean Wylie

Mailing Address 4300 W River Pkwy
Apt 363

City Minneapolis State MN Zip Code 55406-3680

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **375.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 13 / 2013

Transaction ID : VN8A3BF4WT8

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Jean Wylie

Mailing Address 4300 W River Pkwy
Apt 363

City Minneapolis State MN Zip Code 55406-3680

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **375.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 13 / 2013

Transaction ID : VN8A3BF7TE3

Amount of Each Receipt this Period
10.00

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

Mailing Address 4300 W River Pkwy
Apt 363

City Minneapolis State MN Zip Code 55406-3680

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **475.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 21 / 2013

Transaction ID : VN8A3BJ0JP0

Amount of Each Receipt this Period
100.00

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

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

210.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Jean Wylie

Mailing Address 4300 W River Pkwy
Apt 363

City Minneapolis State MN Zip Code 55406-3680

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **535.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 13 / 2013

Transaction ID : VN8A3BP9BY7

Amount of Each Receipt this Period
 10.00

B. Full Name (Last, First, Middle Initial)
Jean Wylie

Mailing Address 4300 W River Pkwy
Apt 363

City Minneapolis State MN Zip Code 55406-3680

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **535.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 13 / 2013

Transaction ID : VN8A3BX3QD8

Amount of Each Receipt this Period
 50.00

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

Mailing Address 66 Pine St

City Princeton State NJ Zip Code 08542-3810

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **280.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 01 / 2013

Transaction ID : VN8A3BNT593

Amount of Each Receipt this Period
 80.00

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

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

140.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Ann Yasuhara

Mailing Address 66 Pine St

City State Zip Code
Princeton NJ 08542-3810

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
330.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 13 / 2013

Transaction ID : VN8A3BX3TV4

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Ellen Zablow

Mailing Address 305 W 28th St
Apt 18H

City State Zip Code
New York NY 10001-7935

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
195.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 03 / 2013

Transaction ID : VN8A3BKK762

Amount of Each Receipt this Period
35.00

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

Mailing Address 305 W 28th St
Apt 18H

City State Zip Code
New York NY 10001-7935

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
230.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : VN8A3BW07D7

Amount of Each Receipt this Period
35.00

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

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

120.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 168
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Khawaja A. Zaheer

Mailing Address 3 Sheffield Ln

City State Zip Code
Oak Brook IL 60523-2347

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

Name of Employer Self Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1200.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 29 / 2013

Transaction ID : VN8A3BX3T42

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Shaukat Zakaria

Mailing Address 15502 Truslow Point Ln
Ste 1000

City State Zip Code
Sugar Land TX 77478-5500

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

Name of Employer Lone Star Petroleum Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 17 / 2013

Transaction ID : VN8A3BRVKB2

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Yousuf M Zakaria

Mailing Address 2007 Richland Ct

City State Zip Code
Sugar Land TX 77478-4414

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

Name of Employer US Petroleum Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 31 / 2013

Transaction ID : VN8A3BW4JK9

Amount of Each Receipt this Period
1000.00

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

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

1800.00

92713.34

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 168
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
3M Company PAC

Mailing Address 3M Center

City State Zip Code
Saint Paul MN 55144-1000

FEC ID number of contributing federal political committee. **C C00084475**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 31 2013

Transaction ID : VN8A3BW4K43

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
AMALGAMATED TRANSIT UNION - COPE

Mailing Address 5025 Wisconsin Ave NW

City State Zip Code
Washington DC 20016-4113

FEC ID number of contributing federal political committee. **C C00032995**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 31 2013

Transaction ID : VN8A3BXM069

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
American Federation of Government Employees PAC

Mailing Address 80 F St NW

City State Zip Code
Washington DC 20001-1528

FEC ID number of contributing federal political committee. **C C00009936**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 29 2013

Transaction ID : VN8A3BD6A09

Amount of Each Receipt this Period
1500.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 168
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Committee on Letter Carriers Political Education Political Action Fund

Mailing Address 100 Indiana Ave NW

City Washington State DC Zip Code 20001-2144

FEC ID number of contributing federal political committee. **C** C00023580

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 21 / 2013

Transaction ID : VN8A3BJ0JR6

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
D.R.I.V.E. (Democrat Republican Independent Voter Education)

Mailing Address 25 Louisiana Ave NW

City Washington State DC Zip Code 20001-2130

FEC ID number of contributing federal political committee. **C** C00032979

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 20 / 2013

Transaction ID : VN8A3BHX155

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
Faegre & Benson LLP Political Committee Fund

Mailing Address 90 S 7th St

City Minneapolis State MN Zip Code 55402-3903

FEC ID number of contributing federal political committee. **C** C00215491

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 06 / 2013

Transaction ID : VN8A3BE5WT6

Amount of Each Receipt this Period
1000.00

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 168
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Human Rights Campaign PAC

Mailing Address 1640 Rhode Island Ave NW

City Washington State DC Zip Code 20036-3200

FEC ID number of contributing federal political committee. **C** C00235853

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 06 / 2013

Transaction ID : VN8A3BE5WX0

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
International Brotherhood of Electrical Workers Council

Mailing Address 900 7th St NW
Bsmt 1

City Washington State DC Zip Code 20001-4089

FEC ID number of contributing federal political committee. **C** C00027342

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 14 / 2013

Transaction ID : VN8A3BF82K9

Amount of Each Receipt this Period
 2500.00

C. Full Name (Last, First, Middle Initial)
International Brotherhood of Electrical Workers Council

Mailing Address 900 7th St NW
Bsmt 1

City Washington State DC Zip Code 20001-4089

FEC ID number of contributing federal political committee. **C** C00027342

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 18 / 2013

Transaction ID : VN8A3BSAPY4

Amount of Each Receipt this Period
 2500.00

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 168
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
INTERNATIONAL COUNCIL OF SHOPPING CENTERS PAC (ICSC PAC)

Mailing Address 665 5th Ave

City State Zip Code
New York NY 10022-5305

FEC ID number of contributing federal political committee. **C C00217638**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : VN8A3BXKZW0

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
JStreetPAC

Mailing Address PO Box 33106

City State Zip Code
Washington DC 20033-0106

FEC ID number of contributing federal political committee. **C C00441949**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : VN8A3BXKZM6

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Lockridge Grindal Nauen Political Fund

Mailing Address 100 Washington Ave S

City State Zip Code
Minneapolis MN 55401-2110

FEC ID number of contributing federal political committee. **C C00167916**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5194.25

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 06 / 2013

Transaction ID : VN8A3BE5WW2

Amount of Each Receipt this Period
805.75

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

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

2805.75

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 168
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Lockridge Grindal Nauen Political Fund

Mailing Address 100 Washington Ave S

City State Zip Code
Minneapolis MN 55401-2110

FEC ID number of contributing federal political committee. **C C00167916**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5194.25

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		06		2013

Transaction ID : VN8A3C2DSC3

Amount of Each Receipt this Period
194.25

B. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF INDEPENDENT LAND TITLE AGENTS LLC PAC AKA NAILTA PAC

Mailing Address 1204 Baltimore Pike
Ste 200

City State Zip Code
Chadds Ford PA 19317-7373

FEC ID number of contributing federal political committee. **C C00510644**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		03		2013

Transaction ID : VN8A3BKHBY3

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
National Association of Letter Carriers of United States of America Branch 9 P.A.L.

Mailing Address 11581 Ilex St NW

City State Zip Code
Minneapolis MN 55448-2316

FEC ID number of contributing federal political committee. **C C00114314**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		18		2013

Transaction ID : VN8A3BSAVD2

Amount of Each Receipt this Period
1000.00

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

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

2194.25

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 168
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Robins Kaplan PAC

Mailing Address 800 Lasalle Ave

City Minneapolis State MN Zip Code 55402-2006

FEC ID number of contributing federal political committee. **C** C00275909

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 25 / 2013

Transaction ID : VN8A3BJCX72

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Robins Kaplan PAC

Mailing Address 800 Lasalle Ave

City Minneapolis State MN Zip Code 55402-2006

FEC ID number of contributing federal political committee. **C** C00275909

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 25 / 2013

Transaction ID : VN8A3BJCXN2

Amount of Each Receipt this Period
 1500.00

C. Full Name (Last, First, Middle Initial)
UA Political Education Committee

Mailing Address 3 Park Pl

City Annapolis State MD Zip Code 21401-3687

FEC ID number of contributing federal political committee. **C** C00012476

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 07 / 2013

Transaction ID : VN8A3BEE917

Amount of Each Receipt this Period
 2500.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 168
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
United Transportation Union PAC

Mailing Address 14600 Detroit Ave
Ste 200

City Lakewood State OH Zip Code 44107-4207

FEC ID number of contributing federal political committee. **C** C00001636

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : VN8A3BW4K02

Amount of Each Receipt this Period
 2500.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

2500.00

29500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 101 OF 168	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. 1-800-Flowers.com		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2013
Mailing Address 1 Old Country Rd Ste 500		Amount of Each Disbursement this Period 53.98
City Carle Place	State NY Zip Code 11514-1847	
Purpose of Disbursement Event Expense	Category/Type	Transaction ID : VN7AV9ND5R2
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. 1-800-Flowers.com		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2013
Mailing Address 1 Old Country Rd Ste 500		Amount of Each Disbursement this Period 53.98
City Carle Place	State NY Zip Code 11514-1847	
Purpose of Disbursement Event Expense	Category/Type	Transaction ID : VN7AV9ND5T8
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. 1-800-Flowers.com		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address 1 Old Country Rd Ste 500		Amount of Each Disbursement this Period 58.43
City Carle Place	State NY Zip Code 11514-1847	
Purpose of Disbursement Event Expense	Category/Type	Transaction ID : VN7AV9P4697
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	166.39
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 102 OF 168	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. 1-800-Flowers.com		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address 1 Old Country Rd Ste 500		Amount of Each Disbursement this Period 58.43
City Carle Place	State NY Zip Code 11514-1847	
Purpose of Disbursement Event Expense	Candidate Name	Transaction ID : VN7AV9P46A5
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. 1-800-Flowers.com		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013
Mailing Address 1 Old Country Rd Ste 500		Amount of Each Disbursement this Period 57.76
City Carle Place	State NY Zip Code 11514-1847	
Purpose of Disbursement Event Expense	Candidate Name	Transaction ID : VN7AV9P46B3
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. 1-800-Flowers.com		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013
Mailing Address 1 Old Country Rd Ste 500		Amount of Each Disbursement this Period 57.22
City Carle Place	State NY Zip Code 11514-1847	
Purpose of Disbursement Event Expense	Candidate Name	Transaction ID : VN7AV9P46C1
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	173.41
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 103 OF 168	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. 1-800-Flowers.com		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2013
Mailing Address 1 Old Country Rd Ste 500		Amount of Each Disbursement this Period 58.43
City Carle Place	State NY Zip Code 11514-1847	
Purpose of Disbursement Event Expense	Candidate Name	Transaction ID : VN7AV9PP1W7
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. 1-800-Flowers.com		Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2013
Mailing Address 1 Old Country Rd Ste 500		Amount of Each Disbursement this Period 74.97
City Carle Place	State NY Zip Code 11514-1847	
Purpose of Disbursement Event Expense	Candidate Name	Transaction ID : VN7AV9PP1X5
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Acorn Mini Storage		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2013
Mailing Address 4652 Lyndale Ave N		Amount of Each Disbursement this Period 120.75
City Minneapolis	State MN Zip Code 55412-1441	
Purpose of Disbursement Storage Rent	Candidate Name	Transaction ID : VN7AV9PV123
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	254.15
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 168			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. Acorn Mini Storage		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2013
Mailing Address 4652 Lyndale Ave N		Amount of Each Disbursement this Period 105.00 Transaction ID : VN7AV9P4715
City Minneapolis	State MN	
Purpose of Disbursement Storage Rent		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Acorn Mini Storage		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address 4652 Lyndale Ave N		Amount of Each Disbursement this Period 105.00 Transaction ID : VN7AV9PP225
City Minneapolis	State MN	
Purpose of Disbursement Storage Rent		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) c. Actblue Technical		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2013
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 5.94 Transaction ID : VN7AV9ND7H2
City Cambridge	State MA	
Purpose of Disbursement Credit Card Processing Fees		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....	215.94
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 105 OF 168	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. Actblue Technical		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2013
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 16.96 Transaction ID : VN7AV9ND7F7
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Credit Card Processing Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Actblue Technical		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2013
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 14.41 Transaction ID : VN7AV9ND7G5
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Credit Card Processing Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Actblue Technical		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2013
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 1.40 Transaction ID : VN7AV9ND7J0
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Credit Card Processing Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	32.77
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 106 OF 168	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. Actblue Technical		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2013
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 8.58
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : VN7AV9P4CB5
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Actblue Technical		Date of Disbursement M M / D D / Y Y Y Y 11 / 11 / 2013
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 0.60
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : VN7AV9P4CC3
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Actblue Technical		Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2013
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 0.20
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : VN7AV9P4CD1
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	9.38
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 168			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. Actblue Technical		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2013
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 3.06
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : VN7AV9P4CE9
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Actblue Technical		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2013
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 20.99
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : VN7AV9PV226
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Actblue Technical		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2013
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 86.00
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : VN7AV9PV233
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	110.05
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 108 OF 168	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. Actblue Technical		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2013
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 26.76 Transaction ID : VN7AV9PV241
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Credit Card Processing Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Actblue Technical		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2013
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 1.99 Transaction ID : VN7AV9PV259
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Credit Card Processing Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Actblue Technical		Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2013
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 47.52 Transaction ID : VN7AV9PV267
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Credit Card Processing Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	76.27
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 109 OF 168	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. Actblue Technical		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 50.10
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : VN7AV9PV275
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ADP Payroll		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2013
Mailing Address 8100 Old Cedar Ave S		Amount of Each Disbursement this Period 2018.44
City Minneapolis	State MN	
Zip Code 55425-1802	Purpose of Disbursement Payroll - See Memos	Transaction ID : VN7AV9NBQM4
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. ADP Payroll		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2013
Mailing Address 8100 Old Cedar Ave S		Amount of Each Disbursement this Period 572.65
City Minneapolis	State MN	
Zip Code 55425-1802	Purpose of Disbursement Payroll Taxes	Transaction ID : VN7AV9NBQN2
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2068.54
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 110 OF 168	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. David A Leonard		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2013
Mailing Address 7425 Oak Park Village Dr Apt 3		Amount of Each Disbursement this Period 1445.79
City Saint Louis Park	State MN Zip Code 55426-4142	
Purpose of Disbursement Payroll	Candidate Name	Transaction ID : VN7AV9NBQP0
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	[MEMO ITEM] *

Full Name (Last, First, Middle Initial) B. ADP Payroll		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2013
Mailing Address 8100 Old Cedar Ave S		Amount of Each Disbursement this Period 60.60
City Minneapolis	State MN Zip Code 55425-1802	
Purpose of Disbursement Payroll Service Fees	Candidate Name	Transaction ID : VN7AV9ND7B5
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. ADP Payroll		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2013
Mailing Address 8100 Old Cedar Ave S		Amount of Each Disbursement this Period 2018.44
City Minneapolis	State MN Zip Code 55425-1802	
Purpose of Disbursement Payroll - See Memos	Candidate Name	Transaction ID : VN7AV9NBQQ7
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	2079.04
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 111 OF 168	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
Ellison for Congress

Full Name (Last, First, Middle Initial)
A. ADP Payroll

Mailing Address 8100 Old Cedar Ave S

City Minneapolis State MN Zip Code 55425-1802

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 18 / 2013

Amount of Each Disbursement this Period: 572.66

Transaction ID : VN7AV9NBQR5

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)
B. David A Leonard

Mailing Address 7425 Oak Park Village Dr Apt 3

City Saint Louis Park State MN Zip Code 55426-4142

Purpose of Disbursement Payroll

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 18 / 2013

Amount of Each Disbursement this Period: 1445.78

Transaction ID : VN7AV9NBQS3

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)
c. ADP Payroll

Mailing Address 8100 Old Cedar Ave S

City Minneapolis State MN Zip Code 55425-1802

Purpose of Disbursement Payroll Service Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 25 / 2013

Amount of Each Disbursement this Period: 60.60

Transaction ID : VN7AV9ND7C3

SUBTOTAL of Disbursements This Page (optional) 60.60

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 112 OF 168	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. ADP Payroll

Full Name (Last, First, Middle Initial)

Mailing Address 8100 Old Cedar Ave S

City Minneapolis State MN Zip Code 55425-1802

Purpose of Disbursement Payroll - See Memos

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 05 / 2013

Amount of Each Disbursement this Period: 4918.02

Transaction ID : VN7AV9NK7F2

B. ADP Payroll

Full Name (Last, First, Middle Initial)

Mailing Address 8100 Old Cedar Ave S

City Minneapolis State MN Zip Code 55425-1802

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 05 / 2013

Amount of Each Disbursement this Period: 1544.85

Transaction ID : VN7AV9NK7G0

[MEMO ITEM]

*

c. Dinah Dale

Full Name (Last, First, Middle Initial)

Mailing Address 5610 Laurel Ave 321

City Golden Valley State MN Zip Code 55416-1048

Purpose of Disbursement Payroll

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 05 / 2013

Amount of Each Disbursement this Period: 1927.39

Transaction ID : VN7AV9NK7H8

[MEMO ITEM]

*

SUBTOTAL of Disbursements This Page (optional)..... 4918.02

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 113 OF 168	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. David A Leonard		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2013
Mailing Address 7425 Oak Park Village Dr Apt 3		Amount of Each Disbursement this Period 1445.78
City Saint Louis Park	State MN	
Zip Code 55426-4142	Purpose of Disbursement Payroll	Transaction ID : VN7AV9NK7J6
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. ADP Payroll		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address 8100 Old Cedar Ave S		Amount of Each Disbursement this Period 60.60
City Minneapolis	State MN	
Zip Code 55425-1802	Purpose of Disbursement Payroll Service Fees	Transaction ID : VN7AV9P4C40
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. ADP Payroll		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2013
Mailing Address 8100 Old Cedar Ave S		Amount of Each Disbursement this Period 5508.68
City Minneapolis	State MN	
Zip Code 55425-1802	Purpose of Disbursement Payroll - See Memos	Transaction ID : VN7AV9NK7K4
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5569.28
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 114 OF 168	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. ADP Payroll		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2013
Mailing Address 8100 Old Cedar Ave S		Amount of Each Disbursement this Period 1829.37
City Minneapolis	State MN	
Zip Code 55425-1802	Purpose of Disbursement Payroll Taxes	Transaction ID : VN7AV9NK7M2
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. Dinah Dale		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2013
Mailing Address 5610 Laurel Ave 321		Amount of Each Disbursement this Period 2233.53
City Golden Valley	State MN	
Zip Code 55416-1048	Purpose of Disbursement Payroll	Transaction ID : VN7AV9NK7N0
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) c. David A Leonard		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2013
Mailing Address 7425 Oak Park Village Dr Apt 3		Amount of Each Disbursement this Period 1445.78
City Saint Louis Park	State MN	
Zip Code 55426-4142	Purpose of Disbursement Payroll	Transaction ID : VN7AV9NK7P8
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 115 OF 168	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. ADP Payroll

Full Name (Last, First, Middle Initial)
Mailing Address 8100 Old Cedar Ave S

City Minneapolis State MN Zip Code 55425-1802

Purpose of Disbursement Payroll Service Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 29 / 2013

Amount of Each Disbursement this Period: 60.60

Transaction ID : VN7AV9P4C57

B. ADP Payroll

Full Name (Last, First, Middle Initial)
Mailing Address 8100 Old Cedar Ave S

City Minneapolis State MN Zip Code 55425-1802

Purpose of Disbursement Payroll - See Memos

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 12 / 05 / 2013

Amount of Each Disbursement this Period: 5499.73

Transaction ID : VN7AV9NYF72

c. ADP Payroll

Full Name (Last, First, Middle Initial)
Mailing Address 8100 Old Cedar Ave S

City Minneapolis State MN Zip Code 55425-1802

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 12 / 05 / 2013

Amount of Each Disbursement this Period: 1820.41

Transaction ID : VN7AV9NYF80

[MEMO ITEM]
*

SUBTOTAL of Disbursements This Page (optional) 5560.33

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 OF 168			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. Dinah Dale		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2013
Mailing Address 5610 Laurel Ave 321		Amount of Each Disbursement this Period 2233.53
City Golden Valley	State MN	
Zip Code 55416-1048		[MEMO ITEM] *
Purpose of Disbursement Payroll		
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. David A Leonard		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2013
Mailing Address 7425 Oak Park Village Dr Apt 3		Amount of Each Disbursement this Period 1445.79
City Saint Louis Park	State MN	
Zip Code 55426-4142		[MEMO ITEM] *
Purpose of Disbursement Payroll		
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. ADP Payroll		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2013
Mailing Address 8100 Old Cedar Ave S		Amount of Each Disbursement this Period 60.60
City Minneapolis	State MN	
Zip Code 55425-1802		
Purpose of Disbursement Payroll Service Fees		
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	60.60
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 117 OF 168	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. ADP Payroll		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address 8100 Old Cedar Ave S		Amount of Each Disbursement this Period 5490.68
City Minneapolis	State MN	
Zip Code 55425-1802		
Purpose of Disbursement Payroll - See Memos		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. ADP Payroll		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address 8100 Old Cedar Ave S		Amount of Each Disbursement this Period 1811.37
City Minneapolis	State MN	
Zip Code 55425-1802		
Purpose of Disbursement Payroll Taxes		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: _____	District: _____	

Full Name (Last, First, Middle Initial) c. Dinah Dale		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address 5610 Laurel Ave 321		Amount of Each Disbursement this Period 2233.53
City Golden Valley	State MN	
Zip Code 55416-1048		
Purpose of Disbursement Payroll		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional)	5490.68
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 118 OF 168	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. David A Leonard		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address 7425 Oak Park Village Dr Apt 3		Amount of Each Disbursement this Period 1445.78
City Saint Louis Park	State MN	
Zip Code 55426-4142	Purpose of Disbursement Payroll	Transaction ID : VN7AV9PD0Q4
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. ADP Payroll		Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2013
Mailing Address 8100 Old Cedar Ave S		Amount of Each Disbursement this Period 60.60
City Minneapolis	State MN	
Zip Code 55425-1802	Purpose of Disbursement Payroll Service Fees	Transaction ID : VN7AV9PP2C4
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. American Express		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 7.95
City Phoenix	State AZ	
Zip Code 85072-3852	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : VN7AV9ND5Y0
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	68.55
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 119 OF 168	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 7.95
City Phoenix	State AZ	
Zip Code 85072-3852	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : VN7AV9ND5Z7
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. American Express		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2013
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 328.80
City Phoenix	State AZ	
Zip Code 85072-3852	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : VN7AV9ND5W4
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. American Express		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2013
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 53.57
City Phoenix	State AZ	
Zip Code 85072-3852	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : VN7AV9ND5X2
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	390.32
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 120 OF 168	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2013
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 7.95
City Phoenix	State AZ	
Zip Code 85072-3852	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : VN7AV9P46D9
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. American Express		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 7.95
City Phoenix	State AZ	
Zip Code 85072-3852	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : VN7AV9P46N2
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. American Express		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2013
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 26.86
City Phoenix	State AZ	
Zip Code 85072-3852	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : VN7AV9P46H0
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	42.76
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 OF 168			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2013
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 21.32
City Phoenix	State AZ	
Zip Code 85072-3852	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : VN7AV9P46Q8
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. American Express		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2013
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 7.95
City Phoenix	State AZ	
Zip Code 85072-3852	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : VN7AV9PP2F7
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. American Express		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2013
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 7.95
City Phoenix	State AZ	
Zip Code 85072-3852	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : VN7AV9PP2J1
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	37.22
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 122 OF 168	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2013
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 356.22
City Phoenix	State AZ	
Zip Code 85072-3852	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : VN7AV9PP2G5
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. American Express		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2013
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 12.05
City Phoenix	State AZ	
Zip Code 85072-3852	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : VN7AV9PP2K9
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. American Jewish Media LLC		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address 4509 Minnetonka Blvd		Amount of Each Disbursement this Period 126.00
City Minneapolis	State MN	
Zip Code 55416-4436	Purpose of Disbursement Advertising	Transaction ID : VN7AV9PP4H7
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	494.27
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 123 OF 168	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. Amtrak		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address 2955 Market St		Amount of Each Disbursement this Period 145.00 Transaction ID : VN7AV9P4BY2
City Philadelphia	State PA Zip Code 19104-2898	
Purpose of Disbursement Travel	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Atomic		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2013
Mailing Address 615 N 3rd St		Amount of Each Disbursement this Period 321.56 Transaction ID : VN7AV9P46X5
City Minneapolis	State MN Zip Code 55401-1210	
Purpose of Disbursement Computer Expense	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Atomic		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address 615 N 3rd St		Amount of Each Disbursement this Period 160.78 Transaction ID : VN7AV9PP2M7
City Minneapolis	State MN Zip Code 55401-1210	
Purpose of Disbursement Computer Expense	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	627.34
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 124 OF 168	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. Bankcard Assoc		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2013
Mailing Address 2221 W Broadway St		Amount of Each Disbursement this Period 223.08 Transaction ID : VN7AV9ND605
City Fort Worth	State TX	
Zip Code 76102-4311	Purpose of Disbursement Credit Card Processing Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Bankcard Assoc		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2013
Mailing Address 2221 W Broadway St		Amount of Each Disbursement this Period 12.95 Transaction ID : VN7AV9ND613
City Fort Worth	State TX	
Zip Code 76102-4311	Purpose of Disbursement Credit Card Processing Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Bankcard Assoc		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address 2221 W Broadway St		Amount of Each Disbursement this Period 12.95 Transaction ID : VN7AV9P46E7
City Fort Worth	State TX	
Zip Code 76102-4311	Purpose of Disbursement Credit Card Processing Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	248.98
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 125 OF 168			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial)
A. Bankcard Assoc

Mailing Address 2221 W Broadway St

City Fort Worth State TX Zip Code 76102-4311

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 04 / 2013

Amount of Each Disbursement this Period: 157.37

Transaction ID : VN7AV9P46P0

Full Name (Last, First, Middle Initial)
B. Bankcard Assoc

Mailing Address 2221 W Broadway St

City Fort Worth State TX Zip Code 76102-4311

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 12 / 02 / 2013

Amount of Each Disbursement this Period: 12.95

Transaction ID : VN7AV9PP391

Full Name (Last, First, Middle Initial)
c. Bankcard Assoc

Mailing Address 2221 W Broadway St

City Fort Worth State TX Zip Code 76102-4311

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 12 / 02 / 2013

Amount of Each Disbursement this Period: 353.61

Transaction ID : VN7AV9PP3F8

SUBTOTAL of Disbursements This Page (optional) 523.93

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 126 OF 168	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. Beth Foster Consultants LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2013
Mailing Address 2102 W 49th St		Amount of Each Disbursement this Period 3200.00
City Minneapolis	State MN	
Zip Code 55419-5230	Purpose of Disbursement Consulting - Direct Mail	Transaction ID : VN7AV9P4C99
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Beth Foster Consultants LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2013
Mailing Address 2102 W 49th St		Amount of Each Disbursement this Period 1600.00
City Minneapolis	State MN	
Zip Code 55419-5230	Purpose of Disbursement Consulting - Direct Mail	Transaction ID : VN7AV9P4664
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Beth Foster Consultants LLC		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address 2102 W 49th St		Amount of Each Disbursement this Period 1600.00
City Minneapolis	State MN	
Zip Code 55419-5230	Purpose of Disbursement Consulting - Direct Mail	Transaction ID : VN7AV9PP3J2
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6400.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 127 OF 168			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. Big Sky Copywriting		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2013
Mailing Address 6710 Linda Vista Blvd		Amount of Each Disbursement this Period 1000.00
City Missoula	State MT	
Zip Code 59803-2769	Purpose of Disbursement Consulting - Direct Mail	Transaction ID : VN7AV9P4656
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Big Sky Copywriting		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address 6710 Linda Vista Blvd		Amount of Each Disbursement this Period 2000.00
City Missoula	State MT	
Zip Code 59803-2769	Purpose of Disbursement Consulting - Direct Mail	Transaction ID : VN7AV9PP3K0
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Capital Accounting Services		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2013
Mailing Address 620 Wesley Commons Dr Ste 28		Amount of Each Disbursement this Period 1000.00
City Golden Valley	State MN	
Zip Code 55427-4079	Purpose of Disbursement Accounting and Compliance Services	Transaction ID : VN7AV9P4C65
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 128 OF 168	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Capital Accounting Services

Full Name (Last, First, Middle Initial)
Mailing Address 620 Wesley Commons Dr
Ste 28

City Golden Valley State MN Zip Code 55427-4079

Purpose of Disbursement Accounting and Compliance Services

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
12 / 20 / 2013

Amount of Each Disbursement this Period
2000.00

Transaction ID : VN7AV9PP3N5

Category/Type

B. Michael Casca

Full Name (Last, First, Middle Initial)
Mailing Address 1300 N St NW
Apt 611

City Washington State DC Zip Code 20005-3692

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
11 / 06 / 2013

Amount of Each Disbursement this Period
138.10

Transaction ID : VN7AV9P4BN1

Category/Type

c. CHS Mailing

Full Name (Last, First, Middle Initial)
Mailing Address 12006 Old Baltimore Pike

City Beltsville State MD Zip Code 20705-1412

Purpose of Disbursement Direct Mailing

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
12 / 02 / 2013

Amount of Each Disbursement this Period
2891.99

Transaction ID : VN7AV9PP3R9

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 5030.09

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 129 OF 168	
	<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. Clean Water Works LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2013
Mailing Address 920 E Lake St Ste 110		Amount of Each Disbursement this Period 250.00 Transaction ID : VN7AV9P47D0
City Minneapolis	State MN Zip Code 55407-4099	
Purpose of Disbursement Event Expense - Table Fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Comcast		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2013
Mailing Address PO Box 34227		Amount of Each Disbursement this Period 140.61 Transaction ID : VN7AV9ND6K5
City Seattle	State WA Zip Code 98124-1227	
Purpose of Disbursement Internet Service		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Comcast		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2013
Mailing Address PO Box 34227		Amount of Each Disbursement this Period 140.61 Transaction ID : VN7AV9P4723
City Seattle	State WA Zip Code 98124-1227	
Purpose of Disbursement Internet Service		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	531.22
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 130 OF 168	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. Comcast		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address PO Box 34227		Amount of Each Disbursement this Period 140.61 Transaction ID : VN7AV9PP3V3
City Seattle	State WA	
Zip Code 98124-1227	Purpose of Disbursement Internet Service	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Culligan Water		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2013
Mailing Address 7165 Boone Ave N		Amount of Each Disbursement this Period 21.58 Transaction ID : VN7AV9P4772
City Brooklyn Park	State MN	
Zip Code 55428-1512	Purpose of Disbursement Office Supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Culligan Water		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2013
Mailing Address 7165 Boone Ave N		Amount of Each Disbursement this Period 21.58 Transaction ID : VN7AV9P4780
City Brooklyn Park	State MN	
Zip Code 55428-1512	Purpose of Disbursement Office Supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	183.77
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 131 OF 168			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. Delta Air		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2013
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 1261.80
City Atlanta	State GA Zip Code 30320-6001	
Purpose of Disbursement Travel	Candidate Name	Transaction ID : VN7AV9ND766
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Delta Air		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2013
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 737.80
City Atlanta	State GA Zip Code 30320-6001	
Purpose of Disbursement Travel	Candidate Name	Transaction ID : VN7AV9ND773
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Delta Air		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2013
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 659.80
City Atlanta	State GA Zip Code 30320-6001	
Purpose of Disbursement Travel	Candidate Name	Transaction ID : VN7AV9ND781
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	2659.40
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 132 OF 168			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. Delta Air		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2013
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 314.90 Transaction ID : VN7AV9P4BP9
City Atlanta	State GA	
Zip Code 30320-6001	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Delta Air		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2013
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 594.90 Transaction ID : VN7AV9P4BQ7
City Atlanta	State GA	
Zip Code 30320-6001	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Delta Air		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2013
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 689.90 Transaction ID : VN7AV9P4C16
City Atlanta	State GA	
Zip Code 30320-6001	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1599.70
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 133 OF 168	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Embassy Suites

Full Name (Last, First, Middle Initial)
Mailing Address 2501 Conference Dr

City Norman State OK Zip Code 73069-6396

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 12 / 2013

Amount of Each Disbursement this Period: 205.22

Transaction ID : VN7AV9P4BT1

B. Embassy Suites

Full Name (Last, First, Middle Initial)
Mailing Address 2501 Conference Dr

City Norman State OK Zip Code 73069-6396

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 12 / 2013

Amount of Each Disbursement this Period: 202.72

Transaction ID : VN7AV9P4BV8

C. Embassy Suites

Full Name (Last, First, Middle Initial)
Mailing Address 513 S Florida Ave

City Tampa State FL Zip Code 33602-5419

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 12 / 16 / 2013

Amount of Each Disbursement this Period: 278.46

Transaction ID : VN7AV9PP3Y7

SUBTOTAL of Disbursements This Page (optional) 686.40

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 134 OF 168			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. Embassy Suites		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 513 S Florida Ave		Amount of Each Disbursement this Period 417.69 Transaction ID : VN7AV9PP3Z4
City Tampa	State FL Zip Code 33602-5419	
Purpose of Disbursement Travel	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. First National Bank of the Lakes		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2013
Mailing Address 3100 Hennepin Ave		Amount of Each Disbursement this Period 80.92 Transaction ID : VN7AV9ND621
City Minneapolis	State MN Zip Code 55408-2619	
Purpose of Disbursement Bank Fee	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. First National Bank of the Lakes		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2013
Mailing Address 3100 Hennepin Ave		Amount of Each Disbursement this Period 64.20 Transaction ID : VN7AV9P46M4
City Minneapolis	State MN Zip Code 55408-2619	
Purpose of Disbursement Bank Fee	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	562.81
TOTAL This Period (last page this line number only).....	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. First National Bank of the Lakes		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2013
Mailing Address 3100 Hennepin Ave		Amount of Each Disbursement this Period 40.00
City Minneapolis	State MN	
Zip Code 55408-2619	Purpose of Disbursement Bank Fee	Transaction ID : VN7AV9PP402
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. First National Bank of the Lakes		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2013
Mailing Address 3100 Hennepin Ave		Amount of Each Disbursement this Period 25.00
City Minneapolis	State MN	
Zip Code 55408-2619	Purpose of Disbursement Bank Fee	Transaction ID : VN7AV9PP410
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. First National Bank of the Lakes		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2013
Mailing Address 3100 Hennepin Ave		Amount of Each Disbursement this Period 61.12
City Minneapolis	State MN	
Zip Code 55408-2619	Purpose of Disbursement Bank Fee	Transaction ID : VN7AV9PP428
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	126.12
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 136 OF 168			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. Health Partners		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address PO Box 1289		Amount of Each Disbursement this Period 1164.13
City Minneapolis	State MN	
Zip Code 55440-1289	Purpose of Disbursement Health Insurance	Transaction ID : VN7AV9P4C73
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Health Partners		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2013
Mailing Address PO Box 1289		Amount of Each Disbursement this Period 1468.06
City Minneapolis	State MN	
Zip Code 55440-1289	Purpose of Disbursement Health Insurance	Transaction ID : VN7AV9P4C81
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Health Partners		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address PO Box 1289		Amount of Each Disbursement this Period 363.73
City Minneapolis	State MN	
Zip Code 55440-1289	Purpose of Disbursement Health Insurance	Transaction ID : VN7AV9PP436
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2995.92
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 137 OF 168			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. Hilton Hotels		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address 3600 SW 36th Ave		Amount of Each Disbursement this Period 14.78
City Ocala State FL Zip Code 34474-4474	Purpose of Disbursement Travel	
Candidate Name	Category/Type	Transaction ID : VN7AV9P4BF4
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Hilton Hotels		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address 3600 SW 36th Ave		Amount of Each Disbursement this Period 139.32
City Ocala State FL Zip Code 34474-4474	Purpose of Disbursement Travel	
Candidate Name	Category/Type	Transaction ID : VN7AV9P4BG2
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Hilton Hotels		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address 3600 SW 36th Ave		Amount of Each Disbursement this Period 154.10
City Ocala State FL Zip Code 34474-4474	Purpose of Disbursement Travel	
Candidate Name	Category/Type	Transaction ID : VN7AV9P4BJ7
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	308.20
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 138 OF 168	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. Hotel Belleclair		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2013
Mailing Address 250 W 77th St		Amount of Each Disbursement this Period 274.25 Transaction ID : VN7AV9ND716
City New York State NY Zip Code 10024-6810	Purpose of Disbursement Travel	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Hotel Belleclair		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2013
Mailing Address 250 W 77th St		Amount of Each Disbursement this Period 3.50 Transaction ID : VN7AV9ND724
City New York State NY Zip Code 10024-6810	Purpose of Disbursement Travel	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Hotel Belleclair		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address 250 W 77th St		Amount of Each Disbursement this Period 323.65 Transaction ID : VN7AV9P4BH9
City New York State NY Zip Code 10024-6810	Purpose of Disbursement Travel	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	601.40
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 139 OF 168	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. Hotel Newton		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 2528 Broadway		Amount of Each Disbursement this Period 214.64 Transaction ID : VN7AV9P4BE6
City New York	State NY	
Zip Code 10025-6946	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Hudson Bay Co. of Illinois		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address 11032 Vera Cruz Ave N		Amount of Each Disbursement this Period 3926.03 Transaction ID : VN7AV9P4671
City Champlin	State MN	
Zip Code 55316-3549	Purpose of Disbursement Fundraising Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Hudson Bay Co. of Illinois		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2013
Mailing Address 11032 Vera Cruz Ave N		Amount of Each Disbursement this Period 7675.95 Transaction ID : VN7AV9P4689
City Champlin	State MN	
Zip Code 55316-3549	Purpose of Disbursement Fundraising Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	11816.62
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 140 OF 168			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Integram		M M / D D / Y Y Y Y 10 / 22 / 2013
Mailing Address 22695 Commerce Center Ct		Amount of Each Disbursement this Period
City Dulles State VA Zip Code 20166-2037		2221.58
Purpose of Disbursement Direct Mail		Transaction ID : VN7AV9ND7E9
Candidate Name		Category/Type
Office Sought:	Disbursement For: 2014	
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. Intuit		M M / D D / Y Y Y Y 10 / 09 / 2013
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period
City Mountain View State CA Zip Code 94043-1126		23.97
Purpose of Disbursement Computer Software		Transaction ID : VN7AV9ND6J8
Candidate Name		Category/Type
Office Sought:	Disbursement For: 2014	
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. Intuit		M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period
City Mountain View State CA Zip Code 94043-1126		23.97
Purpose of Disbursement Computer Software		Transaction ID : VN7AV9P4707
Candidate Name		Category/Type
Office Sought:	Disbursement For: 2014	
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2269.52
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 141 OF 168	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. Intuit		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2013
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period 23.97
City Mountain View	State CA Zip Code 94043-1126	
Purpose of Disbursement Computer Software	Candidate Name	Transaction ID : VN7AV9PP444
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. ipHouse		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2013
Mailing Address 331 2nd Ave S Ste 540		Amount of Each Disbursement this Period 85.00
City Minneapolis	State MN Zip Code 55401-2243	
Purpose of Disbursement Web Site	Candidate Name	Transaction ID : VN7AV9ND6A4
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. ipHouse		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2013
Mailing Address 331 2nd Ave S Ste 540		Amount of Each Disbursement this Period 85.00
City Minneapolis	State MN Zip Code 55401-2243	
Purpose of Disbursement Web Site	Candidate Name	Transaction ID : VN7AV9P46V9
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	193.97
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 142 OF 168	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. ipHouse		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address 331 2nd Ave S Ste 540		Amount of Each Disbursement this Period 85.00
City Minneapolis	State MN	
Zip Code 55401-2243	Purpose of Disbursement Web Site	Transaction ID : VN7AV9PP452
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Laguardia Plaza		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 10404 Ditmars Blvd		Amount of Each Disbursement this Period 32.99
City Flushing	State NY	
Zip Code 11369-1665	Purpose of Disbursement Travel	Transaction ID : VN7AV9P4B88
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Laguardia Plaza		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 10404 Ditmars Blvd		Amount of Each Disbursement this Period 16.49
City Flushing	State NY	
Zip Code 11369-1665	Purpose of Disbursement Travel	Transaction ID : VN7AV9P4B96
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	134.48
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 143 OF 168	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. Laguardia Plaza		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 10404 Ditmars Blvd		Amount of Each Disbursement this Period 4.33 Transaction ID : VN7AV9P4BD8
City Flushing	State NY	
Zip Code 11369-1665	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Laguardia Plaza		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2013
Mailing Address 10404 Ditmars Blvd		Amount of Each Disbursement this Period 5.44 Transaction ID : VN7AV9PP460
City Flushing	State NY	
Zip Code 11369-1665	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. David A Leonard		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2013
Mailing Address 7425 Oak Park Village Dr Apt 3		Amount of Each Disbursement this Period 148.69 Transaction ID : VN7AV9ND7D1
City Saint Louis Park	State MN	
Zip Code 55426-4142	Purpose of Disbursement Mileage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	158.69
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 144 OF 168			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Linemark Printing

Full Name (Last, First, Middle Initial)
Mailing Address 501 Prince Georges Blvd

City Upper Marlboro State MD Zip Code 20774-7415

Purpose of Disbursement Printing

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 08 / 2013

Amount of Each Disbursement this Period: 5117.68

Transaction ID : VN7AV9P4CA7

B. Linemark Printing

Full Name (Last, First, Middle Initial)
Mailing Address 501 Prince Georges Blvd

City Upper Marlboro State MD Zip Code 20774-7415

Purpose of Disbursement Printing

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 12 / 20 / 2013

Amount of Each Disbursement this Period: 556.50

Transaction ID : VN7AV9PP486

C. Linemark Printing

Full Name (Last, First, Middle Initial)
Mailing Address 501 Prince Georges Blvd

City Upper Marlboro State MD Zip Code 20774-7415

Purpose of Disbursement Printing

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 12 / 20 / 2013

Amount of Each Disbursement this Period: 651.90

Transaction ID : VN7AV9PP493

SUBTOTAL of Disbursements This Page (optional) 6326.08

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 145 OF 168			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial)
A. Linemark Printing

Mailing Address 501 Prince Georges Blvd

City Upper Marlboro State MD Zip Code 20774-7415

Purpose of Disbursement Printing

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 12 / 20 / 2013

Amount of Each Disbursement this Period: 673.10

Transaction ID : VN7AV9PP4A1

Full Name (Last, First, Middle Initial)
B. Linemark Printing

Mailing Address 501 Prince Georges Blvd

City Upper Marlboro State MD Zip Code 20774-7415

Purpose of Disbursement Printing

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 12 / 20 / 2013

Amount of Each Disbursement this Period: 535.30

Transaction ID : VN7AV9PP4B9

Full Name (Last, First, Middle Initial)
c. Merchant Bankcard

Mailing Address 1700 N Dixie Hwy Ste 125

City Boca Raton State FL Zip Code 33432-1808

Purpose of Disbursement Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 02 / 2013

Amount of Each Disbursement this Period: 758.23

Transaction ID : VN7AV9ND639

SUBTOTAL of Disbursements This Page (optional) 1966.63

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 146 OF 168	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Merchant Bankcard

Mailing Address 1700 N Dixie Hwy Ste 125

City Boca Raton State FL Zip Code 33432-1808

Purpose of Disbursement Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 03 / 2013

Amount of Each Disbursement this Period: 203.78

Transaction ID : VN7AV9ND647

Full Name (Last, First, Middle Initial)

B. Merchant Bankcard

Mailing Address 1700 N Dixie Hwy Ste 125

City Boca Raton State FL Zip Code 33432-1808

Purpose of Disbursement Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 03 / 2013

Amount of Each Disbursement this Period: 133.52

Transaction ID : VN7AV9ND655

Full Name (Last, First, Middle Initial)

C. Merchant Bankcard

Mailing Address 1700 N Dixie Hwy Ste 125

City Boca Raton State FL Zip Code 33432-1808

Purpose of Disbursement Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 04 / 2013

Amount of Each Disbursement this Period: 251.03

Transaction ID : VN7AV9P46F5

SUBTOTAL of Disbursements This Page (optional) 588.33

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 147 OF 168	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Merchant Bankcard

Mailing Address 1700 N Dixie Hwy
Ste 125

City Boca Raton State FL Zip Code 33432-1808

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
11 / 05 / 2013

Amount of Each Disbursement this Period
246.85

Transaction ID : VN7AV9P46G3

Category/
Type

Full Name (Last, First, Middle Initial)

B. Merchant Bankcard

Mailing Address 1700 N Dixie Hwy
Ste 125

City Boca Raton State FL Zip Code 33432-1808

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
11 / 05 / 2013

Amount of Each Disbursement this Period
0.25

Transaction ID : VN7AV9P46J8

Category/
Type

Full Name (Last, First, Middle Initial)

C. Merchant Bankcard

Mailing Address 1700 N Dixie Hwy
Ste 125

City Boca Raton State FL Zip Code 33432-1808

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
11 / 05 / 2013

Amount of Each Disbursement this Period
148.28

Transaction ID : VN7AV9P46K6

Category/
Type

SUBTOTAL of Disbursements This Page (optional)..... 395.38

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 148 OF 168			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Merchant Bankcard

Mailing Address 1700 N Dixie Hwy
Ste 125

City Boca Raton State FL Zip Code 33432-1808

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
12 / 04 / 2013

Amount of Each Disbursement this Period
355.19

Transaction ID : VN7AV9PP4C7

Full Name (Last, First, Middle Initial)

B. Merchant Bankcard

Mailing Address 1700 N Dixie Hwy
Ste 125

City Boca Raton State FL Zip Code 33432-1808

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
12 / 04 / 2013

Amount of Each Disbursement this Period
0.50

Transaction ID : VN7AV9PP4D5

Full Name (Last, First, Middle Initial)

C. Merchant Bankcard

Mailing Address 1700 N Dixie Hwy
Ste 125

City Boca Raton State FL Zip Code 33432-1808

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
12 / 05 / 2013

Amount of Each Disbursement this Period
74.46

Transaction ID : VN7AV9PP4E3

SUBTOTAL of Disbursements This Page (optional)..... 430.15

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 149 OF 168	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial)
A. Merchant Bankcard

Mailing Address 1700 N Dixie Hwy
Ste 125

City Boca Raton State FL Zip Code 33432-1808

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
12 / 05 / 2013

Amount of Each Disbursement this Period
46.55

Transaction ID : VN7AV9PP4F1

Category/Type

Full Name (Last, First, Middle Initial)
B. Minneapolis Labor Review

Mailing Address 312 Central Ave SE
Ste 542

City Minneapolis State MN Zip Code 55414-1097

Purpose of Disbursement
Advertisement

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
12 / 20 / 2013

Amount of Each Disbursement this Period
237.50

Transaction ID : VN7AV9PP4G9

Category/Type

Full Name (Last, First, Middle Initial)
c. Monkey Island

Mailing Address 2190 Como Ave
Ste 1

City Saint Paul State MN Zip Code 55108-1851

Purpose of Disbursement
Computer Expense

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
10 / 23 / 2013

Amount of Each Disbursement this Period
19.95

Transaction ID : VN7AV9ND6B2

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 304.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 150 OF 168			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Names in the News

Full Name (Last, First, Middle Initial)
Mailing Address 180 Grand Ave
Ste 1545

City Oakland State CA Zip Code 94612-3799

Purpose of Disbursement Direct Mail

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 12 / 23 / 2013

Amount of Each Disbursement this Period: 4500.00

Transaction ID : VN7AV9PP4K2

B. National Democratic Club

Full Name (Last, First, Middle Initial)
Mailing Address 30 Ivy St SE

City Washington State DC Zip Code 20003-4071

Purpose of Disbursement Event Expense

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 12 / 20 / 2013

Amount of Each Disbursement this Period: 100.00

Transaction ID : VN7AV9PP4M0

c. National Democratic Club

Full Name (Last, First, Middle Initial)
Mailing Address 30 Ivy St SE

City Washington State DC Zip Code 20003-4071

Purpose of Disbursement Event Expense

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 12 / 20 / 2013

Amount of Each Disbursement this Period: 1252.40

Transaction ID : VN7AV9PP4N8

SUBTOTAL of Disbursements This Page (optional) 5852.40

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 151 OF 168			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. New Partners Consulting

Full Name (Last, First, Middle Initial)
Mailing Address 1250 I St NW Ste 200

City Washington State DC Zip Code 20005-5977

Purpose of Disbursement Consulting - Fundraising

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 24 / 2013

Amount of Each Disbursement this Period: 18550.33

Transaction ID : VN7AV9ND5Q4

B. New Partners Consulting

Full Name (Last, First, Middle Initial)
Mailing Address 1250 I St NW Ste 200

City Washington State DC Zip Code 20005-5977

Purpose of Disbursement Consulting - Fundraising

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 25 / 2013

Amount of Each Disbursement this Period: 9040.32

Transaction ID : VN7AV9P4648

c. New Partners Consulting

Full Name (Last, First, Middle Initial)
Mailing Address 1250 I St NW Ste 200

City Washington State DC Zip Code 20005-5977

Purpose of Disbursement Consulting - Fundraising

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 12 / 20 / 2013

Amount of Each Disbursement this Period: 9000.00

Transaction ID : VN7AV9PP4P6

SUBTOTAL of Disbursements This Page (optional) 36590.65

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 152 OF 168	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. New Partners Consulting

Full Name (Last, First, Middle Initial)
Mailing Address 1250 I St NW
Ste 200

City Washington State DC Zip Code 20005-5977

Purpose of Disbursement Consulting - Fundraising

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
12 / 20 / 2013

Amount of Each Disbursement this Period
452.06

Transaction ID : VN7AV9PP4Q4

Category/Type

B. Postmaster

Full Name (Last, First, Middle Initial)
Mailing Address 3033 27th Ave S

City Minneapolis State MN Zip Code 55406-5100

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
10 / 03 / 2013

Amount of Each Disbursement this Period
138.00

Transaction ID : VN7AV9ND6V9

Category/Type

C. Postmaster

Full Name (Last, First, Middle Initial)
Mailing Address 3033 27th Ave S

City Minneapolis State MN Zip Code 55406-5100

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
10 / 09 / 2013

Amount of Each Disbursement this Period
230.00

Transaction ID : VN7AV9ND6S3

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 820.06

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 153 OF 168			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement											
A. Postmaster		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>21</td> <td></td> <td>2013</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	10		21		2013
M M	/	D D	/	Y Y Y Y									
10		21		2013									
Mailing Address 3033 27th Ave S		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Minneapolis</td> <td>MN</td> <td>55406-5100</td> </tr> </table>		City	State	Zip Code	Minneapolis	MN	55406-5100	<table border="1"> <tr> <td>184.00</td> </tr> </table>		184.00			
City	State	Zip Code											
Minneapolis	MN	55406-5100											
184.00													
Purpose of Disbursement Postage		Transaction ID : VN7AV9ND6T1											
Candidate Name		Category/Type											
Office Sought: <table border="1"> <tr><td><input type="checkbox"/></td><td>House</td></tr> <tr><td><input type="checkbox"/></td><td>Senate</td></tr> <tr><td><input type="checkbox"/></td><td>President</td></tr> </table>		<input type="checkbox"/>	House	<input type="checkbox"/>	Senate	<input type="checkbox"/>	President	Disbursement For: 2014					
<input type="checkbox"/>	House												
<input type="checkbox"/>	Senate												
<input type="checkbox"/>	President												
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
B. Postmaster		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>01</td> <td></td> <td>2013</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	11		01		2013
M M	/	D D	/	Y Y Y Y									
11		01		2013									
Mailing Address 3033 27th Ave S		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Minneapolis</td> <td>MN</td> <td>55406-5100</td> </tr> </table>		City	State	Zip Code	Minneapolis	MN	55406-5100	<table border="1"> <tr> <td>230.00</td> </tr> </table>		230.00			
City	State	Zip Code											
Minneapolis	MN	55406-5100											
230.00													
Purpose of Disbursement Postage		Transaction ID : VN7AV9P4798											
Candidate Name		Category/Type											
Office Sought: <table border="1"> <tr><td><input type="checkbox"/></td><td>House</td></tr> <tr><td><input type="checkbox"/></td><td>Senate</td></tr> <tr><td><input type="checkbox"/></td><td>President</td></tr> </table>		<input type="checkbox"/>	House	<input type="checkbox"/>	Senate	<input type="checkbox"/>	President	Disbursement For: 2014					
<input type="checkbox"/>	House												
<input type="checkbox"/>	Senate												
<input type="checkbox"/>	President												
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
C. Postmaster		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>13</td> <td></td> <td>2013</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	11		13		2013
M M	/	D D	/	Y Y Y Y									
11		13		2013									
Mailing Address 3033 27th Ave S		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Minneapolis</td> <td>MN</td> <td>55406-5100</td> </tr> </table>		City	State	Zip Code	Minneapolis	MN	55406-5100	<table border="1"> <tr> <td>138.00</td> </tr> </table>		138.00			
City	State	Zip Code											
Minneapolis	MN	55406-5100											
138.00													
Purpose of Disbursement Postage		Transaction ID : VN7AV9P47A6											
Candidate Name		Category/Type											
Office Sought: <table border="1"> <tr><td><input type="checkbox"/></td><td>House</td></tr> <tr><td><input type="checkbox"/></td><td>Senate</td></tr> <tr><td><input type="checkbox"/></td><td>President</td></tr> </table>		<input type="checkbox"/>	House	<input type="checkbox"/>	Senate	<input type="checkbox"/>	President	Disbursement For: 2014					
<input type="checkbox"/>	House												
<input type="checkbox"/>	Senate												
<input type="checkbox"/>	President												
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											

SUBTOTAL of Disbursements This Page (optional).....	552.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 154 OF 168	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. Postmaster		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2013
Mailing Address 3033 27th Ave S		Amount of Each Disbursement this Period 198.00 Transaction ID : VN7AV9P47B4
City Minneapolis	State MN	
Zip Code 55406-5100	Purpose of Disbursement Postage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Seven Corners Printing		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2013
Mailing Address 1099 Snelling Ave N		Amount of Each Disbursement this Period 1445.00 Transaction ID : VN7AV9ND5P6
City Saint Paul	State MN	
Zip Code 55108-2705	Purpose of Disbursement T-Shirts	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Sinfully Wright Catering		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2013
Mailing Address 1901 Trenton Pl SE		Amount of Each Disbursement this Period 1230.00 Transaction ID : VN7AV9ND5V6
City Washington	State DC	
Zip Code 20020-7643	Purpose of Disbursement Event Expense - Catering	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2873.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 155 OF 168	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. Sinfully Wright Catering		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2013
Mailing Address 1901 Trenton Pl SE		Amount of Each Disbursement this Period 500.00
City Washington	State DC	
Zip Code 20020-7643	Purpose of Disbursement Event Expense - Catering	Transaction ID : VN7AV9ND663
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Southwest Airlines		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2013
Mailing Address PO Box 36647-1CR		Amount of Each Disbursement this Period 513.60
City Dallas	State TX	
Zip Code 75235	Purpose of Disbursement Travel	Transaction ID : VN7AV9P4C24
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. St. Paul Development Company		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2013
Mailing Address 1818 Grand Ave		Amount of Each Disbursement this Period 1169.47
City Saint Paul	State MN	
Zip Code 55105-1818	Purpose of Disbursement Rent	Transaction ID : VN7AV9ND6W7
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2183.07
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 156 OF 168	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. St. Paul Development Company		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2013
Mailing Address 1818 Grand Ave		Amount of Each Disbursement this Period 1169.47 Transaction ID : VN7AV9P47C2
City Saint Paul	State MN	
Zip Code 55105-1818	Purpose of Disbursement Rent	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Target		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2013
Mailing Address 2500 E Lake St		Amount of Each Disbursement this Period 1.90 Transaction ID : VN7AV9ND6R5
City Minneapolis	State MN	
Zip Code 55406-1976	Purpose of Disbursement Office Supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. The Foundation		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2013
Mailing Address 311 7th Ave N		Amount of Each Disbursement this Period 88.86 Transaction ID : VN7AV9P46W7
City Minneapolis	State MN	
Zip Code 55401-1237	Purpose of Disbursement Computer Expense	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1260.23
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 157 OF 168	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial)
A. The Foundation

Mailing Address 311 7th Ave N

City Minneapolis State MN Zip Code 55401-1237

Purpose of Disbursement
Computer Expense

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
12 / 20 / 2013

Amount of Each Disbursement this Period
177.72

Transaction ID : VN7AV9PP4Y9

Category/Type

Full Name (Last, First, Middle Initial)
B. The Lowry Minneapolis

Mailing Address 2112 Hennepin Ave

City Minneapolis State MN Zip Code 55405-2743

Purpose of Disbursement
Meals

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
10 / 22 / 2013

Amount of Each Disbursement this Period
31.02

Transaction ID : VN7AV9ND6M3

Category/Type

Full Name (Last, First, Middle Initial)
c. The Lowry Minneapolis

Mailing Address 2112 Hennepin Ave

City Minneapolis State MN Zip Code 55405-2743

Purpose of Disbursement
Meals

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
11 / 20 / 2013

Amount of Each Disbursement this Period
20.86

Transaction ID : VN7AV9P4731

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 229.60

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 158 OF 168	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. The Lowry Minneapolis		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2013
Mailing Address 2112 Hennepin Ave		Amount of Each Disbursement this Period 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 31.29
City Minneapolis	State MN	
Purpose of Disbursement Meals	Candidate Name	Transaction ID : VN7AV9P4756
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2013
Mailing Address 77 W Wacker Dr Ste MEZZ		Amount of Each Disbursement this Period 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 694.70
City Chicago	State IL	
Purpose of Disbursement Travel	Candidate Name	Transaction ID : VN7AV9ND7A7
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2013
Mailing Address 77 W Wacker Dr Ste MEZZ		Amount of Each Disbursement this Period 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 688.40
City Chicago	State IL	
Purpose of Disbursement Travel	Candidate Name	Transaction ID : VN7AV9P4C08
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	1414.39
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 159 OF 168	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2013
Mailing Address 77 W Wacker Dr Ste MEZZ		Amount of Each Disbursement this Period 45.00
City Chicago	State IL Zip Code 60601-1732	
Purpose of Disbursement Travel	Candidate Name	Transaction ID : VN7AV9PP4Z7
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. US Airways		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 4000 E Sky Harbor Blvd		Amount of Each Disbursement this Period 25.00
City Phoenix	State AZ Zip Code 85034-0664	
Purpose of Disbursement Travel	Candidate Name	Transaction ID : VN7AV9P4BR5
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. US Airways		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 4000 E Sky Harbor Blvd		Amount of Each Disbursement this Period 127.90
City Phoenix	State AZ Zip Code 85034-0664	
Purpose of Disbursement Travel	Candidate Name	Transaction ID : VN7AV9P4BS3
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	197.90
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 160 OF 168	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. US Airways		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2013
Mailing Address 4000 E Sky Harbor Blvd		Amount of Each Disbursement this Period 273.90 Transaction ID : VN7AV9P4BW6
City Phoenix State AZ Zip Code 85034-0664	Purpose of Disbursement Travel	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. US Airways		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2013
Mailing Address 4000 E Sky Harbor Blvd		Amount of Each Disbursement this Period 25.00 Transaction ID : VN7AV9P4BX4
City Phoenix State AZ Zip Code 85034-0664	Purpose of Disbursement Travel	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2013
Mailing Address PO Box 25505		Amount of Each Disbursement this Period 247.87 Transaction ID : VN7AV9ND6D8
City Lehigh Valley State PA Zip Code 18002-5505	Purpose of Disbursement Telephone	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	546.77
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 161 OF 168	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2013
Mailing Address PO Box 25505		Amount of Each Disbursement this Period 246.77
City Lehigh Valley	State PA	
Zip Code 18002-5505	Purpose of Disbursement Telephone	Transaction ID : VN7AV9ND6E6
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2013
Mailing Address PO Box 25505		Amount of Each Disbursement this Period 53.89
City Lehigh Valley	State PA	
Zip Code 18002-5505	Purpose of Disbursement Telephone	Transaction ID : VN7AV9ND6F4
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2013
Mailing Address PO Box 25505		Amount of Each Disbursement this Period 247.72
City Lehigh Valley	State PA	
Zip Code 18002-5505	Purpose of Disbursement Telephone	Transaction ID : VN7AV9P46Y3
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	548.38
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 162 OF 168			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2013
Mailing Address PO Box 25505		Amount of Each Disbursement this Period 251.27
City Lehigh Valley	State PA	
Zip Code 18002-5505	Purpose of Disbursement Telephone	Transaction ID : VN7AV9PP521
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Vonage		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2013
Mailing Address 23 Main St		Amount of Each Disbursement this Period 90.18
City Holmdel	State NJ	
Zip Code 07733-2136	Purpose of Disbursement Telephone	Transaction ID : VN7AV9ND6H0
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Vonage		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2013
Mailing Address 23 Main St		Amount of Each Disbursement this Period 90.18
City Holmdel	State NJ	
Zip Code 07733-2136	Purpose of Disbursement Telephone	Transaction ID : VN7AV9PP539
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	431.63
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 163 OF 168			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial)
A. Vonage

Mailing Address 23 Main St

City Holmdel State NJ Zip Code 07733-2136

Purpose of Disbursement Telephone

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 12 / 26 / 2013

Amount of Each Disbursement this Period: 90.18

Transaction ID : VN7AV9PP547

Full Name (Last, First, Middle Initial)
B. Voter Activation

Mailing Address 48 Grove St Ste 202

City Somerville State MA Zip Code 02144-2500

Purpose of Disbursement Database Services

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 03 / 2013

Amount of Each Disbursement this Period: 75.00

Transaction ID : VN7AV9ND6C0

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

Mailing Address 48 Grove St Ste 202

City Somerville State MA Zip Code 02144-2500

Purpose of Disbursement Database Services

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 04 / 2013

Amount of Each Disbursement this Period: 75.00

Transaction ID : VN7AV9P46T2

SUBTOTAL of Disbursements This Page (optional) 240.18

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 164 OF 168			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. Wellstone Action		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address 2446 University Ave W Ste 170		Amount of Each Disbursement this Period 500.00
City Saint Paul State MN Zip Code 55114-1580	Purpose of Disbursement Training Expense	
Candidate Name	Category/Type	Transaction ID : VN7AV9P47E8
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Wellstone Action		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address 2446 University Ave W Ste 170		Amount of Each Disbursement this Period 600.00
City Saint Paul State MN Zip Code 55114-1580	Purpose of Disbursement Training Expense	
Candidate Name	Category/Type	Transaction ID : VN7AV9P47F5
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement	
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).....	1100.00
TOTAL This Period (last page this line number only).....	134387.73

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 165 OF 168			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. Kimberly A Nelson		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2013
Mailing Address 555 Far Hill Rd		Amount of Each Disbursement this Period 500.00 Transaction ID : VN7AV9P04S8
City Wayzata	State MN	
Zip Code 55391-1002	Purpose of Disbursement Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Haroon Sheikh		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2013
Mailing Address 2109 Alaqua Lakes Blvd		Amount of Each Disbursement this Period 500.00 Transaction ID : VN7AV9P4622
City Longwood	State FL	
Zip Code 32779-3206	Purpose of Disbursement Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Category/ Type
Candidate Name	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).....	1000.00
TOTAL This Period (last page this line number only).....	1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 166 OF 168	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. Democratic Congressional Campaign Committee		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013
Mailing Address 430 S Capitol St SE		Amount of Each Disbursement this Period 33000.00 Transaction ID : VN7AV9P4630
City Washington State DC Zip Code 20003-4024	Purpose of Disbursement Contribution	
Candidate Name Democratic Congressional Campaign Committee		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. Democratic Congressional Campaign Committee		Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2013
Mailing Address 430 S Capitol St SE		Amount of Each Disbursement this Period 30000.00 Transaction ID : VN7AV9PJPJ3
City Washington State DC Zip Code 20003-4024	Purpose of Disbursement Contribution	
Candidate Name Democratic Congressional Campaign Committee		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. KEEP NICK RAHALL IN CONGRESS COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2013
Mailing Address PO Box 64		Amount of Each Disbursement this Period 1000.00 Transaction ID : VN7AV9PJT83
City Beckley State WV Zip Code 25802-0064	Purpose of Disbursement Contribution	
Candidate Name NICK JOE II J RAHALL II		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WV District: 03		

SUBTOTAL of Disbursements This Page (optional)	64000.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 167 OF 168	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. Mad Dads		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2013
Mailing Address PO Box 8980		Amount of Each Disbursement this Period 450.00 Transaction ID : VN7AV9ND6X4
City Minneapolis	State MN Zip Code 55408-0980	
Purpose of Disbursement Donation	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. MINNESOTA DEMOCRATIC-FARMER-LABOR PARTY		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2013
Mailing Address 255 Plato Blvd E		Amount of Each Disbursement this Period 4455.00 Transaction ID : VN7AV9ND6Z0
City Saint Paul	State MN Zip Code 55107-1623	
Purpose of Disbursement Unlimited Transfer to State Party	Candidate Name MINNESOTA DEMOCRATIC-FARMER-LABOR PARTY	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. MINNESOTA DEMOCRATIC-FARMER-LABOR PARTY		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2013
Mailing Address 255 Plato Blvd E		Amount of Each Disbursement this Period 4320.00 Transaction ID : VN7AV9ND708
City Saint Paul	State MN Zip Code 55107-1623	
Purpose of Disbursement Unlimited Transfer to State Party	Candidate Name MINNESOTA DEMOCRATIC-FARMER-LABOR PARTY	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	9225.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 168 OF 168	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial)
A. Neighborhoods Organizing for Change

Mailing Address 911 W Broadway Ave

City Minneapolis State MN Zip Code 55411-2615

Purpose of Disbursement Donation

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 12 / 05 / 2013

Amount of Each Disbursement this Period: 1000.00

Transaction ID : VN7AV9PJPT6

Category/Type

Full Name (Last, First, Middle Initial)
B. NOLAN FOR CONGRESS VOLUNTEER COMMITTEE

Mailing Address 40138 Sawmill Rd
PO BOX 252

City Emily State MN Zip Code 56447-2031

Purpose of Disbursement Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 12 / 23 / 2013

Amount of Each Disbursement this Period: 500.00

Transaction ID : VN7AV9PJTA9

Category/Type

Full Name (Last, First, Middle Initial)
c. Take Action Minnesota

Mailing Address 705 Raymond Ave
100

City Saint Paul State MN Zip Code 55114-1734

Purpose of Disbursement Donation

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 17 / 2013

Amount of Each Disbursement this Period: 750.00

Transaction ID : VN7AV9ND6Y2

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 2250.00

TOTAL This Period (last page this line number only)..... 75475.00