

# 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

PARRY FOR CONGRESS

ADDRESS (number and street)

PO BOX 188

Check if different than previously reported. (ACC)

WASECA

MN

56093

2. FEC IDENTIFICATION NUMBER ▼

C C00503706

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

MN

01

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

08

14

2012

in the State of

MN

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

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

07

01

2012

through

07

25

2012

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 Dale DeRaad

Signature of Treasurer Dale DeRaad

[Electronically Filed]

Date

08

02

2012

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  
**PARRY 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))....	8890.00	111195.10
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	900.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	8890.00	110295.10
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	11701.30	82498.13
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.19
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	11701.30	82497.94
8. Cash on Hand at Close of Reporting Period (from Line 27).....	27797.16	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> 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

**PARRY FOR CONGRESS**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	7500.00	90819.44
(ii) Unitemized.....	1390.00	19525.66
(iii) TOTAL of contributions from individuals ▶	8890.00	110345.10
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	850.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	8890.00	111195.10
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(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
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.19
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	8890.00	111195.29

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	11701.30	82498.13
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	900.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	900.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	11701.30	83398.13

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	30608.46
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	8890.00
25. SUBTOTAL (add Line 23 and Line 24).....	39498.46
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	11701.30
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	27797.16

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 23
	<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)  
**PARRY FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mitchell Davis**

Mailing Address PO Box 14

City St Peter State MN Zip Code 56082

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

Name of Employer Davisco Foods International Occupation Food Processor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 25 / 2012

**Transaction ID : SA11AI.5621**

Amount of Each Receipt this Period  
 5000.00

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

Mailing Address PO Box 14

City St Peter State MN Zip Code 56082

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

Name of Employer Davisco Foods International Occupation Food Processor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 25 / 2012

**Transaction ID : SA11AI.5624**

Amount of Each Receipt this Period  
 -2500.00

Redesignate:  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Mitchell Davis**

Mailing Address PO Box 14

City St Peter State MN Zip Code 56082

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

Name of Employer Davisco Foods International Occupation Food Processor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 25 / 2012

**Transaction ID : SA11AI.5625**

Amount of Each Receipt this Period  
 2500.00

Redesignate: General  
**[MEMO ITEM]**

**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 6 OF 23
	<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)  
**PARRY FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Douglas Johnson**

Mailing Address 55000 Sunrise Ln

City Mankato State MN Zip Code 56001

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

Name of Employer None Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 03 / 2012

**Transaction ID : SA11AI.5493**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Tom Johnson**

Mailing Address 4219 Cass Ave

City Webster State MN Zip Code 55088

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

Name of Employer Midstate Reclamation Occupation Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 13 / 2012

**Transaction ID : SA11AI.5520**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address PO Box 978

City Winona State MN Zip Code 55987

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

Name of Employer Fastenal Occupation CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 02 / 2012

**Transaction ID : SA11AI.5491**

Amount of Each Receipt this Period  
 1000.00

**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 7 OF 23
	<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)  
**PARRY FOR CONGRESS**

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

Mailing Address **PO Box 978**

City **Winona** State **MN** Zip Code **55987**

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

Name of Employer **Fastenal** Occupation **CEO**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**07 / 02 / 2012**

**Transaction ID : SA11AI.5643**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **-500.00**

Redesignate:  
**[MEMO ITEM]**

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

Mailing Address **PO Box 978**

City **Winona** State **MN** Zip Code **55987**

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

Name of Employer **Fastenal** Occupation **CEO**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**07 / 02 / 2012**

**Transaction ID : SA11AI.5644**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **500.00**

Redesignate: **General**  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Richard Lundin**

Mailing Address **4460 Washington Blvd**

City **Madison Lake** State **MN** Zip Code **56063**

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

Name of Employer **None** Occupation **Retired**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**07 / 17 / 2012**

**Transaction ID : SA11AI.5522**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **250.00**

**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 8 OF 23			
	<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)  
**PARRY FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Bill Rowekamp**

Mailing Address 19374 County Road 14

City Lewiston State MN Zip Code 55952

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

Name of Employer Self Employed Occupation Dairy Farmer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 17 / 2012

**Transaction ID : SA11AI.5513**

Amount of Each Receipt this Period  
 250.00

**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).....

250.00

7500.00



**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 9 OF 23	
	<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)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Tim Burke</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2012
Mailing Address 20087 Heathrow Way		Amount of Each Disbursement this Period 498.08 <b>Transaction ID : SB17.5554</b>
City Farmington State MN Zip Code 55024	Purpose of Disbursement Expense Reimbursement for Volunteer	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Best Buy</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2012
Mailing Address 4050 Hwy 52 N		Amount of Each Disbursement this Period 498.08 <b>Transaction ID : SB17.5554.0</b> <b>[MEMO ITEM]</b>
City Rochester State MN Zip Code 55901	Purpose of Disbursement Campaign Video Equipment	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. By the Way</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2012
Mailing Address 123 E Elm Ave		Amount of Each Disbursement this Period 110.50 <b>Transaction ID : SB17.5605</b>
City Waseca State MN Zip Code 56058	Purpose of Disbursement Transportation: Fuel	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	608.58
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 23		
	<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)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Casey's</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2012
Mailing Address 521 Woodkey St W		Amount of Each Disbursement this Period 125.00 <b>Transaction ID : SB17.5606</b>
City Northfield	State MN	
Zip Code 55057	Purpose of Disbursement Transportation: Fuel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Clear Lake Signs</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2012
Mailing Address 300 16th Ave Se		Amount of Each Disbursement this Period 283.22 <b>Transaction ID : SB17.5599</b>
City Waseca	State MN	
Zip Code 56093	Purpose of Disbursement Printing Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Clear Lake Signs</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2012
Mailing Address 300 16th Ave Se		Amount of Each Disbursement this Period 205.57 <b>Transaction ID : SB17.5600</b>
City Waseca	State MN	
Zip Code 56093	Purpose of Disbursement Printing Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	613.79
<b>TOTAL</b> 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 11 OF 23			
	<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)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Susan Clossmore</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2012		
Mailing Address 9420 140th St N			Amount of Each Disbursement this Period 484.33		
City Hugo	State MN	Zip Code 55038	Transaction ID : SB17.5552		
Purpose of Disbursement Expense Reimbursement		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Constant Contact</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2012		
Mailing Address 122 Hudson St			Amount of Each Disbursement this Period 390.83		
City New York	State NY	Zip Code 10013	Transaction ID : SB17.5552.0		
Purpose of Disbursement Online Marketing		Category/ Type			
Candidate Name			[MEMO ITEM]		
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>c. Constant Contact</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2012		
Mailing Address 122 Hudson St			Amount of Each Disbursement this Period 55.00		
City New York	State NY	Zip Code 10013	Transaction ID : SB17.5580		
Purpose of Disbursement Online Marketing		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	539.33
<b>TOTAL</b> 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 12 OF 23		
	<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)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial)		Date of Disbursement										
<b>A. Donation Pages</b>		<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>07</td> <td></td> <td>25</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	07		25		2012
M M	/	D D	/	Y Y Y Y								
07		25		2012								
Mailing Address 1101 Pennsylvania Ave NW		Amount of Each Disbursement this Period										
City Washington	State DC											
Zip Code 20004	Purpose of Disbursement Credit Card Fees	<table border="1"> <tr> <td>99</td> <td>.</td> <td>99</td> <td>.</td> <td>99</td> </tr> <tr> <td>56</td> <td>.</td> <td>23</td> <td>.</td> <td></td> </tr> </table>	99	.	99	.	99	56	.	23	.	
99	.	99	.	99								
56	.	23	.									
Candidate Name	Category/Type	<b>Transaction ID : SB17.5651</b>										
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
<b>B. Downtowner</b>		<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>07</td> <td></td> <td>23</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	07		23		2012
M M	/	D D	/	Y Y Y Y								
07		23		2012								
Mailing Address 253 7th St W		Amount of Each Disbursement this Period										
City SAINT PAUL	State MN											
Zip Code 55102	Purpose of Disbursement Food and Beverage	<table border="1"> <tr> <td>99</td> <td>.</td> <td>99</td> <td>.</td> <td>99</td> </tr> <tr> <td>30</td> <td>.</td> <td>39</td> <td>.</td> <td></td> </tr> </table>	99	.	99	.	99	30	.	39	.	
99	.	99	.	99								
30	.	39	.									
Candidate Name	Category/Type	<b>Transaction ID : SB17.5561</b>										
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
<b>c. Ford Credit</b>		<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>07</td> <td></td> <td>09</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	07		09		2012
M M	/	D D	/	Y Y Y Y								
07		09		2012								
Mailing Address 1001 Hoffman Dr		Amount of Each Disbursement this Period										
City Owatonna	State MN											
Zip Code 55060	Purpose of Disbursement Bank Charges	<table border="1"> <tr> <td>99</td> <td>.</td> <td>99</td> <td>.</td> <td>99</td> </tr> <tr> <td>7</td> <td>.</td> <td>00</td> <td>.</td> <td></td> </tr> </table>	99	.	99	.	99	7	.	00	.	
99	.	99	.	99								
7	.	00	.									
Candidate Name	Category/Type	<b>Transaction ID : SB17.5545</b>										
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<table border="1"> <tr> <td>99</td> <td>.</td> <td>99</td> <td>.</td> <td>99</td> </tr> <tr> <td>93</td> <td>.</td> <td>60</td> <td>.</td> <td></td> </tr> </table>	99	.	99	.	99	93	.	60	.	
99	.	99	.	99							
93	.	60	.								
<b>TOTAL</b> This Period (last page this line number only).....	<table border="1"> <tr> <td>99</td> <td>.</td> <td>99</td> <td>.</td> <td>99</td> </tr> <tr> <td></td> <td>.</td> <td></td> <td>.</td> <td></td> </tr> </table>	99	.	99	.	99		.		.	
99	.	99	.	99							
	.		.								

**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 13 OF 23			
	<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)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Ford Credit</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2012
Mailing Address 1001 Hoffman Dr		Amount of Each Disbursement this Period 525.95
City Owatonna	State MN	
Zip Code 55060	Purpose of Disbursement Vehicle Lease	Transaction ID : SB17.5618
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Doug Gardner</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address 5500 Nathan Lane N #3		Amount of Each Disbursement this Period 2000.00
City Plymouth	State MN	
Zip Code 55442	Purpose of Disbursement Management Consulting	Transaction ID : SB17.5570
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Doug Gardner</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2012
Mailing Address 5500 Nathan Lane N #3		Amount of Each Disbursement this Period 535.16
City Plymouth	State MN	
Zip Code 55442	Purpose of Disbursement Expense Reimbursement	Transaction ID : SB17.5551
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3061.11
<b>TOTAL</b> 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 14 OF 23	
	<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)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Holiday</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2012
Mailing Address 420 N Main St		Amount of Each Disbursement this Period 256.03
City Le Sueur	State MN	
Zip Code 56058	Category/ Type	<b>Transaction ID : SB17.5551.0</b>
Purpose of Disbursement Transportation: Fuel	[MEMO ITEM]	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Fed Ex</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2012
Mailing Address 2700 Annapolis Circle N		Amount of Each Disbursement this Period 115.05
City Plymouth	State MN	
Zip Code 55441	Category/ Type	<b>Transaction ID : SB17.5551.2</b>
Purpose of Disbursement Printing Fees	[MEMO ITEM]	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Kwik Trip</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2012
Mailing Address 501 Elm Ave W		Amount of Each Disbursement this Period 113.80
City Waseca	State MN	
Zip Code 56093	Category/ Type	<b>Transaction ID : SB17.5607</b>
Purpose of Disbursement Transportation: Fuel		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	113.80
<b>TOTAL</b> 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 15 OF 23	
	<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)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Kwik Trip</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2012
Mailing Address 501 Elm Ave W		Amount of Each Disbursement this Period 122.60
City Waseca	State MN	
Zip Code 56093	Purpose of Disbursement Transportation: Fuel	<b>Transaction ID : SB17.5616</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Kwik Trip</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2012
Mailing Address 501 Elm Ave W		Amount of Each Disbursement this Period 10.00
City Waseca	State MN	
Zip Code 56093	Purpose of Disbursement Transportation: Fuel	<b>Transaction ID : SB17.5608</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Kwik Trip</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2012
Mailing Address 501 Elm Ave W		Amount of Each Disbursement this Period 106.01
City Waseca	State MN	
Zip Code 56093	Purpose of Disbursement Transportation: Fuel	<b>Transaction ID : SB17.5609</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	238.61
<b>TOTAL</b> 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 16 OF 23	
	<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)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Kwik Trip</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2012
Mailing Address 501 Elm Ave W		Amount of Each Disbursement this Period 10.00
City Waseca	State MN	
Zip Code 56093	Purpose of Disbursement Transportation: Fuel	<b>Transaction ID : SB17.5610</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Kwik Trip</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2012
Mailing Address 501 Elm Ave W		Amount of Each Disbursement this Period 119.50
City Waseca	State MN	
Zip Code 56093	Purpose of Disbursement Transportation: Fuel	<b>Transaction ID : SB17.5611</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Kwik Trip</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2012
Mailing Address 501 Elm Ave W		Amount of Each Disbursement this Period 89.49
City Waseca	State MN	
Zip Code 56093	Purpose of Disbursement Transportation: Fuel	<b>Transaction ID : SB17.5612</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	218.99
<b>TOTAL</b> 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 17 OF 23			
	<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)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Kwik Trip</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2012
Mailing Address 501 Elm Ave W		Amount of Each Disbursement this Period 10.00 <b>Transaction ID : SB17.5613</b>
City Waseca	State MN	
Purpose of Disbursement Transportation: Fuel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. Kwik Trip</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2012
Mailing Address 501 Elm Ave W		Amount of Each Disbursement this Period 145.93 <b>Transaction ID : SB17.5614</b>
City Waseca	State MN	
Purpose of Disbursement Transportation: Fuel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>C. Kwik Trip</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2012
Mailing Address 501 Elm Ave W		Amount of Each Disbursement this Period 10.00 <b>Transaction ID : SB17.5615</b>
City Waseca	State MN	
Purpose of Disbursement Transportation: Fuel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	165.93
<b>TOTAL</b> 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 18 OF 23	
	<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)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Office Max</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2012
Mailing Address 1201 S Broadway		Amount of Each Disbursement this Period 296.00 <b>Transaction ID : SB17.5576</b>
City Rochester	State MN Zip Code 55904	
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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. One Little Shirt Shop</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2012
Mailing Address 119 3rd St S		Amount of Each Disbursement this Period 72.68 <b>Transaction ID : SB17.5544</b>
City Waterville	State MN Zip Code 56096	
Purpose of Disbursement Advertising: T-Shirts		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Owatonna Country Club</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2012
Mailing Address 1991 Lemond Rd		Amount of Each Disbursement this Period 1259.84 <b>Transaction ID : SB17.5550</b>
City Owatonna	State MN Zip Code 55060	
Purpose of Disbursement Campaign Event: Food and Beverage		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1628.52
<b>TOTAL</b> 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 19 OF 23			
	<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)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Stephen B Productions</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2012	
Mailing Address 338 S Sunnyside Dr			Amount of Each Disbursement this Period 2190.93	
City Caledonia	State MN	Zip Code 55921	Transaction ID : SB17.5602	
Purpose of Disbursement Radio Advertising		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. Sweet Sounds</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2012	
Mailing Address 1418 North Riverfront Dr			Amount of Each Disbursement this Period 380.09	
City Mankato	State MN	Zip Code 56001	Transaction ID : SB17.5620	
Purpose of Disbursement Campaign Vehicle Services		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>C. USPS</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2012	
Mailing Address 114 2nd St NE			Amount of Each Disbursement this Period 180.00	
City Waseca	State MN	Zip Code 56093	Transaction ID : SB17.5597	
Purpose of Disbursement Postage		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2751.02
<b>TOTAL</b> 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 20 OF 23		
	<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)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Verizon</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2012
Mailing Address 1800 North State St		Amount of Each Disbursement this Period 427.01 <b>Transaction ID : SB17.5603</b>
City Waseca State MN Zip Code 56093	Purpose of Disbursement Telephone Services	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Verizon</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2012
Mailing Address 1800 North State St		Amount of Each Disbursement this Period 252.84 <b>Transaction ID : SB17.5604</b>
City Waseca State MN Zip Code 56093	Purpose of Disbursement Telephone Services	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Walmart</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address 2103 North State St		Amount of Each Disbursement this Period 28.85 <b>Transaction ID : SB17.5587</b>
City Waseca State MN Zip Code 56093	Purpose of Disbursement Parade Supplies	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	427.01
<b>TOTAL</b> 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 21 OF 23	
	<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)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Walmart</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address 2103 North State St		Amount of Each Disbursement this Period 164.83
City Waseca	State MN	
Zip Code 56093	Purpose of Disbursement Parade Supplies	<b>Transaction ID : SB17.5588</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Walmart</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2012
Mailing Address 2103 North State St		Amount of Each Disbursement this Period 30.18
City Waseca	State MN	
Zip Code 56093	Purpose of Disbursement Parade Supplies	<b>Transaction ID : SB17.5589</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Walmart</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2012
Mailing Address 2103 North State St		Amount of Each Disbursement this Period 88.45
City Waseca	State MN	
Zip Code 56093	Purpose of Disbursement Parade Supplies	<b>Transaction ID : SB17.5590</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	283.46
<b>TOTAL</b> 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 22 OF 23	
	<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)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Walmart</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2012
Mailing Address 2103 North State St		Amount of Each Disbursement this Period 41.22
City Waseca	State MN	
Zip Code 56093	Purpose of Disbursement Parade Supplies	Transaction ID : SB17.5591
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Walmart</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2012
Mailing Address 2103 North State St		Amount of Each Disbursement this Period 36.81
City Waseca	State MN	
Zip Code 56093	Purpose of Disbursement Transportation: Fuel	Transaction ID : SB17.5617
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Walmart</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address 2103 North State St		Amount of Each Disbursement this Period 46.17
City Waseca	State MN	
Zip Code 56093	Purpose of Disbursement Parade Supplies	Transaction ID : SB17.5592
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	124.20
<b>TOTAL</b> 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 23 OF 23	
	<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)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Walmart</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2012	
Mailing Address 2103 North State St			Amount of Each Disbursement this Period 46.00	
City Waseca	State MN	Zip Code 56093	Transaction ID : SB17.5593	
Purpose of Disbursement Parade Supplies		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. Walmart</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2012	
Mailing Address 2103 North State St			Amount of Each Disbursement this Period 43.24	
City Waseca	State MN	Zip Code 56093	Transaction ID : SB17.5594	
Purpose of Disbursement Parade Supplies		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	89.24
<b>TOTAL</b> This Period (last page this line number only).....	10957.21