

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
Person for Congress

ADDRESS (number and street) 1035 Summit Ave
Check if different than previously reported. (ACC) South Saint Paul MN 55075

2. FEC IDENTIFICATION NUMBER C C00523738
3. IS THIS REPORT NEW (N) OR AMENDED (A)
CITY STATE ZIP CODE STATE DISTRICT MN 02

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
[ ] April 15 Quarterly Report (Q1)
[ ] July 15 Quarterly Report (Q2)
[ ] October 15 Quarterly Report (Q3)
[X] 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 10 / 01 / 2013 through M M / D D / Y Y Y Y 12 / 31 / 2013

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 Benjamin Dally

Signature of Treasurer Benjamin Dally [Electronically Filed] Date M M / D D / Y Y Y Y 01 / 30 / 2014

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

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Gerson for Congress**

Report Covering the Period: From:   /   /  2013 To:   /   /  2013

	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))....	8984.03	13569.03
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	8984.03	13569.03
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	44854.05	92297.15
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	44854.05	92297.15
8. Cash on Hand at Close of Reporting Period (from Line 27).....	4357.60	
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).....	129176.41	

**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

Gerson 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).....	4890.28	5190.28
(ii) Unitemized.....	3367.95	3497.95
(iii) TOTAL of contributions from individuals ▶	8258.23	8688.23
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	725.80	4880.80
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	8984.03	13569.03
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	38000.00	80610.45
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	38000.00	80610.45
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	350.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	46984.03	94529.48

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	44854.05	92297.15
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	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	44854.05	92297.15

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	2227.62
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	46984.03
25. SUBTOTAL (add Line 23 and Line 24).....	49211.65
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	44854.05
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	4357.60

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3N  
Transaction ID :

Form/Schedule:  
Transaction ID:

**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 84
	<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)  
**Gerson for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ni Hee Kim**

Mailing Address 13935 Aquila Ave

City State Zip Code  
Savage MN 55378-2154

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

Name of Employer Occupation  
Target Administration

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  
12 / 01 / 2013

**Transaction ID : A181A4662E67D4B23891**

Amount of Each Receipt this Period  
2600.00

**B.** Full Name (Last, First, Middle Initial)  
**Mary Kay Hollenkamp**

Mailing Address 240 5th Ave S

City State Zip Code  
South Saint Paul MN 55075-2334

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

Name of Employer Occupation  
Homemaker Na

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
440.28

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

**Transaction ID : A4EC219A72CD14C468CE**

Amount of Each Receipt this Period  
20.14

**C.** Full Name (Last, First, Middle Initial)  
**Steven Luke Demitrius**

Mailing Address 13727 Fordham Ave

City State Zip Code  
Saint Paul MN 55124-7952

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

Name of Employer Occupation  
N/a Student

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 / 26 / 2013

**Transaction ID : A4F10800D80CC45CAA8E**

Amount of Each Receipt this Period  
400.00

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

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

3020.14

**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 84
	<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)  
**Gerson for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Bobby Chung**

Mailing Address 2264 East Lake Rd NE

City Atlanta State GA Zip Code 30307-1838

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

Name of Employer Meggitt Training Systems Occupation Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : AC38888BA13E34C93AAC**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Charles Edwin Devaney**

Mailing Address 16700 Pueblo Blvd

City Jordan State MN Zip Code 55352-9373

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 / 22 / 2013

**Transaction ID : A5F2238B624D84829AB3**

Amount of Each Receipt this Period  
 800.00

**C.** Full Name (Last, First, Middle Initial)  
**Mary Kay Hollenkamp**

Mailing Address 240 5th Ave S

City South Saint Paul State MN Zip Code 55075-2334

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

Name of Employer Homemaker Occupation Na

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 27 / 2013

**Transaction ID : AA46F1D6181E74410899**

Amount of Each Receipt this Period  
 100.00

**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 8 OF 84
	<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)  
**Gerson for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jodell Gustafson**

Mailing Address 3070 Independence Rd

City State Zip Code  
Maple Plain MN 55359-9758

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

Name of Employer Occupation  
N/a Dental Hygienist

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 / 27 / 2013

**Transaction ID : AAE293094001C45E09AC**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Mark Wegscheid**

Mailing Address 2465 Lost Lake Road

City State Zip Code  
Mound MN 55364-1661

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

Name of Employer Occupation  
Broadband America Corp 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 Y  
12 / 30 / 2013

**Transaction ID : A547C270C23F948D9927**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Mary Kay Hollenkamp**

Mailing Address 240 5th Ave S

City State Zip Code  
South Saint Paul MN 55075-2334

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

Name of Employer Occupation  
Homemaker Na

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
420.14

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 21 / 2013

**Transaction ID : AF18334DC410A45F6BA5**

Amount of Each Receipt this Period  
20.14

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

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

770.14

4890.28



**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 84
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gerson for Congress**

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

Mailing Address 1035 Summit Ave.

City South Saint Paul      State MN      Zip Code 55075-1225

FEC ID number of contributing federal political committee. **C H2MN02130**

Name of Employer Occupation  
Meggitt Engineer

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**71491.25**

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

**Transaction ID : A996E89FF5C4E4BB3905**

Amount of Each Receipt this Period  
**400.00**

In-kind: Plane ticket for Sarah

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

Mailing Address 1035 Summit Ave.

City South Saint Paul      State MN      Zip Code 55075-1225

FEC ID number of contributing federal political committee. **C H2MN02130**

Name of Employer Occupation  
Meggitt Engineer

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**52091.25**

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

**Transaction ID : A5FE32BD633CB4A24A79**

Amount of Each Receipt this Period  
**325.80**

In-kind:

**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).....

**725.80**

**725.80**

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

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

FOR LINE NUMBER: PAGE 10 OF 84  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Gerson for Congress**

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

Mailing Address 1035 Summit Ave.

City South Saint Paul State MN Zip Code 55075-1225

FEC ID number of contributing federal political committee. **C H2MN02130**

Name of Employer Occupation  
Meggitt Engineer

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**71091.25**

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

**Transaction ID : ADFBE68259F634F8FB17**

Amount of Each Receipt this Period  
**4000.00**

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

Mailing Address 1035 Summit Ave.

City South Saint Paul State MN Zip Code 55075-1225

FEC ID number of contributing federal political committee. **C H2MN02130**

Name of Employer Occupation  
Meggitt Engineer

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**74491.25**

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

**Transaction ID : AFB47D2CFA5E3430A852**

Amount of Each Receipt this Period  
**3000.00**

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

Mailing Address 1035 Summit Ave.

City South Saint Paul State MN Zip Code 55075-1225

FEC ID number of contributing federal political committee. **C H2MN02130**

Name of Employer Occupation  
Meggitt Engineer

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**51765.45**

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 04 / 2013

**Transaction ID : A3C3C120484CD45AEB A5**

Amount of Each Receipt this Period  
**5000.00**

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

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

**12000.00**

**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 84
	<input type="checkbox"/> 11a 12 <input checked="" 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)  
**Gerson for Congress**

Full Name (Last, First, Middle Initial) <b>David Gerson</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 23 / 2013
Mailing Address 1035 Summit Ave.		<b>Transaction ID : A8C6F94F9155F4F208E4</b>
City South Saint Paul	State MN	
FEC ID number of contributing federal political committee. C H2MN02130		Amount of Each Receipt this Period 5000.00
Name of Employer Meggitt	Occupation Engineer	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 62091.25	

Full Name (Last, First, Middle Initial) <b>David Gerson</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 16 / 2013
Mailing Address 1035 Summit Ave.		<b>Transaction ID : AC7210372F33248EA953</b>
City South Saint Paul	State MN	
FEC ID number of contributing federal political committee. C H2MN02130		Amount of Each Receipt this Period 3000.00
Name of Employer Meggitt	Occupation Engineer	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 85491.25	

Full Name (Last, First, Middle Initial) <b>David Gerson</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 29 / 2013
Mailing Address 1035 Summit Ave.		<b>Transaction ID : A38335C64048A4CAD9CA</b>
City South Saint Paul	State MN	
FEC ID number of contributing federal political committee. C H2MN02130		Amount of Each Receipt this Period 4000.00
Name of Employer Meggitt	Occupation Engineer	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 78491.25	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	12000.00
<b>TOTAL</b> 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 12 OF 84
	<input type="checkbox"/> 11a 12 <input checked="" 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)  
**Gerson for Congress**

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

Mailing Address 1035 Summit Ave.

City South Saint Paul      State MN      Zip Code 55075-1225

FEC ID number of contributing federal political committee. **C H2MN02130**

Name of Employer Occupation  
Meggitt Engineer

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**57091.25**

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

**Transaction ID : A73AEC387623D4CF18C5**

Amount of Each Receipt this Period  
**5000.00**

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

Mailing Address 1035 Summit Ave.

City South Saint Paul      State MN      Zip Code 55075-1225

FEC ID number of contributing federal political committee. **C H2MN02130**

Name of Employer Occupation  
Meggitt Engineer

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**82491.25**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 09 / 2013

**Transaction ID : ABC884A2776D8495494E**

Amount of Each Receipt this Period  
**4000.00**

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

Mailing Address 1035 Summit Ave.

City South Saint Paul      State MN      Zip Code 55075-1225

FEC ID number of contributing federal political committee. **C H2MN02130**

Name of Employer Occupation  
Meggitt Engineer

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**67091.25**

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

**Transaction ID : A233F73A44B02435C9FF**

Amount of Each Receipt this Period  
**5000.00**

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

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

**14000.00**

**38000.00**

**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 13 OF 84			
	<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)  
**Gerson for Congress**

Full Name (Last, First, Middle Initial) <b>A. David Gerson</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2013
Mailing Address 1035 Summit Ave.		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : B996E89FF5C4E4BB3905</b>
City South Saint Paul	State MN	
Zip Code 55075-1225	Purpose of Disbursement In-kind: Plane ticket for Sarah	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>B. David Gerson</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2013
Mailing Address 1035 Summit Ave.		Amount of Each Disbursement this Period 325.80 <b>Transaction ID : B5FE32BD633CB4A24A79</b>
City South Saint Paul	State MN	
Zip Code 55075-1225	Purpose of Disbursement In-kind:	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>C. Matthew Erickson</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address 7705 Jasmine Ave S		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : B175127D9EE1D41678F8</b>
City Cottage Grove	State MN	
Zip Code 55016-2221	Purpose of Disbursement	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1125.80
<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 14 OF 84			
	<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)  
**Gerson for Congress**

Full Name (Last, First, Middle Initial) <b>A. Amazon</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address 3680 Langley Dr		Amount of Each Disbursement this Period 101.92 <b>Transaction ID : B2FCCE3E953034B789E4</b>
City Hebron	State KY	
Zip Code 41048-9135	Purpose of Disbursement	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>B. Lions Roar Studios</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address 23710 State Highway 55		Amount of Each Disbursement this Period 1316.25 <b>Transaction ID : B2EA1738FEA3448D6857</b>
City Loretto	State MN	
Zip Code 55357-9587	Purpose of Disbursement	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>C. Amazon</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2013
Mailing Address 3680 Langley Dr		Amount of Each Disbursement this Period 71.29 <b>Transaction ID : B56ECFA3C635F4504BFD</b>
City Hebron	State KY	
Zip Code 41048-9135	Purpose of Disbursement	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1489.46
<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 15 OF 84			
	<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)  
**Gerson for Congress**

Full Name (Last, First, Middle Initial) <b>A. Matthew Erickson</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2013	
Mailing Address 7705 Jasmine Ave S			Amount of Each Disbursement this Period 400.00	
City Cottage Grove	State MN	Zip Code 55016-2221	Transaction ID : <b>B7A020F2601FB41BAA54</b>	
Purpose of Disbursement		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>B. Paul Gary Tuschy</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2013	
Mailing Address 2865 Upper 79th Ct E			Amount of Each Disbursement this Period 550.00	
City Inver Grove Heights	State MN	Zip Code 55076-2923	Transaction ID : <b>BF31AA8FCB72D49AB9FB</b>	
Purpose of Disbursement		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>c. Benjamin Francis Dally</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2013	
Mailing Address 329 3rd Ave S			Amount of Each Disbursement this Period 150.00	
City South Saint Paul	State MN	Zip Code 55075-2613	Transaction ID : <b>B0B2E62A9F0684ED18D4</b>	
Purpose of Disbursement		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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1100.00
<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 84			
	<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)  
**Gerson for Congress**

Full Name (Last, First, Middle Initial) <b>A. Andrew Edmier</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2013
Mailing Address 3460 Walden Alcove		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : B7527EE33436148BE81A</b>
City Saint Paul	State MN	
Zip Code 55129-7740	Purpose of Disbursement	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>B. Paul Gary Tuschy</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2013
Mailing Address 2865 Upper 79th Ct E		Amount of Each Disbursement this Period 550.00 <b>Transaction ID : BC8813E8ECD234DA081D</b>
City Inver Grove Heights	State MN	
Zip Code 55076-2923	Purpose of Disbursement	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>c. Paul Gary Tuschy</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2013
Mailing Address 2865 Upper 79th Ct E		Amount of Each Disbursement this Period 1100.00 <b>Transaction ID : BDF78E89B495F4955A66</b>
City Inver Grove Heights	State MN	
Zip Code 55076-2923	Purpose of Disbursement	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1850.00
<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 84			
	<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)  
**Gerson for Congress**

Full Name (Last, First, Middle Initial) <b>A. Paul Gary Tuschy</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2013
Mailing Address 2865 Upper 79th Ct E		Amount of Each Disbursement this Period 550.00 <b>Transaction ID : B6470988FB934449F99D</b>
City Inver Grove Heights	State MN	
Zip Code 55076-2923	Purpose of Disbursement	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>B. Andrew Edmier</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2013
Mailing Address 3460 Walden Alcove		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : BB0ED9243E29E4AB2848</b>
City Saint Paul	State MN	
Zip Code 55129-7740	Purpose of Disbursement	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>c. Aristotle International, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2013
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 700.00 <b>Transaction ID : BA2CF0441C2DE4E27B40</b>
City Washington	State DC	
Zip Code 20003-1164	Purpose of Disbursement	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1450.00
<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 84			
	<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)  
**Gerson for Congress**

Full Name (Last, First, Middle Initial) <b>A. Benjamin Francis Dally</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 08 / 2013</b>
Mailing Address <b>329 3rd Ave S</b>		Amount of Each Disbursement this Period <b>150.00</b> Transaction ID : <b>BF8700EC98495418A815</b>
City <b>South Saint Paul</b>	State <b>MN</b>	
Zip Code <b>55075-2613</b>	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2014</b>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Amazon</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 09 / 2013</b>
Mailing Address <b>3680 Langley Dr</b>		Amount of Each Disbursement this Period <b>16.80</b> Transaction ID : <b>B70013DAE4A074EBBB00</b>
City <b>Hebron</b>	State <b>KY</b>	
Zip Code <b>41048-9135</b>	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2014</b>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Got Print</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 10 / 2013</b>
Mailing Address <b>7651 N San Fernando Rd</b>		Amount of Each Disbursement this Period <b>149.89</b> Transaction ID : <b>B13ED693B01AD4B7998D</b>
City <b>Burbank</b>	State <b>CA</b>	
Zip Code <b>91505-1073</b>	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2014</b>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>316.69</b>
<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 84			
	<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)  
**Gerson for Congress**

Full Name (Last, First, Middle Initial) <b>A. Andrew Edmier</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2013
Mailing Address 3460 Walden Alcove		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : B4514D24722624CC6AF1</b>
City Saint Paul	State MN	
Zip Code 55129-7740	Purpose of Disbursement	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>B. Miss Kari Lei Byboth</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2013
Mailing Address 6424 Emerson Ave. S.		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : BD9371D29D9BB4FC4937</b>
City Minneapolis	State MN	
Zip Code 55423-1315	Purpose of Disbursement	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>c. Paul Gary Tuschy</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2013
Mailing Address 2865 Upper 79th Ct E		Amount of Each Disbursement this Period 750.00 <b>Transaction ID : BC4248E43217B4521820</b>
City Inver Grove Heights	State MN	
Zip Code 55076-2923	Purpose of Disbursement	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1250.00
<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 84	
	<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)  
**Gerson for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ryan Matthew Cahill</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 11 / 2013</b>
Mailing Address <b>2751 Selkirk Dr Apt 314</b>		Amount of Each Disbursement this Period <b>400.00</b> Transaction ID : <b>B80B9D50316704235B4D</b>
City <b>Burnsville</b>	State <b>MN</b>	
Zip Code <b>55337-5670</b>	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2014</b>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) <b>B. Matthew Erickson</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 11 / 2013</b>
Mailing Address <b>7705 Jasmine Ave S</b>		Amount of Each Disbursement this Period <b>400.00</b> Transaction ID : <b>B7B8F0ED000CD4C6796F</b>
City <b>Cottage Grove</b>	State <b>MN</b>	
Zip Code <b>55016-2221</b>	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2014</b>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) <b>c. Benjamin Francis Dally</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 11 / 2013</b>
Mailing Address <b>329 3rd Ave S</b>		Amount of Each Disbursement this Period <b>150.00</b> Transaction ID : <b>BAC78D022AE9142DCA32</b>
City <b>South Saint Paul</b>	State <b>MN</b>	
Zip Code <b>55075-2613</b>	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2014</b>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>950.00</b>
<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 84			
	<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)  
**Gerson for Congress**

Full Name (Last, First, Middle Initial) <b>A. Got Print</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 11 / 2013</b>
Mailing Address <b>7651 N San Fernando Rd</b>		Amount of Each Disbursement this Period <b>126.08</b> Transaction ID : <b>B3AEF4CE31DE3424DB4C</b>
City <b>Burbank</b> State <b>CA</b> Zip Code <b>91505-1073</b>	Purpose of Disbursement 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>B. Amazon</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 12 / 2013</b>
Mailing Address <b>3680 Langley Dr</b>		Amount of Each Disbursement this Period <b>13.04</b> Transaction ID : <b>B96813115BFDC4CBBAE4</b>
City <b>Hebron</b> State <b>KY</b> Zip Code <b>41048-9135</b>	Purpose of Disbursement 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>C. Amazon</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 16 / 2013</b>
Mailing Address <b>3680 Langley Dr</b>		Amount of Each Disbursement this Period <b>60.45</b> Transaction ID : <b>B308A96BECD6C4094892</b>
City <b>Hebron</b> State <b>KY</b> Zip Code <b>41048-9135</b>	Purpose of Disbursement 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>199.57</b>
<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 84	
	<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)  
**Gerson for Congress**

Full Name (Last, First, Middle Initial) <b>A. Amazon</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 16 / 2013</b>
Mailing Address <b>3680 Langley Dr</b>		Amount of Each Disbursement this Period <b>169.00</b> Transaction ID : <b>B30B475A2147441089D0</b>
City <b>Hebron</b> State <b>KY</b> Zip Code <b>41048-9135</b>	Purpose of Disbursement 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>B. Benjamin Francis Dally</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 18 / 2013</b>
Mailing Address <b>329 3rd Ave S</b>		Amount of Each Disbursement this Period <b>150.00</b> Transaction ID : <b>B63C3747A8BE3443A9D8</b>
City <b>South Saint Paul</b> State <b>MN</b> Zip Code <b>55075-2613</b>	Purpose of Disbursement 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>C. Matthew Erickson</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 18 / 2013</b>
Mailing Address <b>7705 Jasmine Ave S</b>		Amount of Each Disbursement this Period <b>400.00</b> Transaction ID : <b>B909E058D0A4044128C9</b>
City <b>Cottage Grove</b> State <b>MN</b> Zip Code <b>55016-2221</b>	Purpose of Disbursement 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>719.00</b>
<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 84	
	<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)  
**Gerson for Congress**

Full Name (Last, First, Middle Initial) <b>A. Joe McKinney</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 18 / 2013</b>
Mailing Address <b>928 5th St SE</b>		Amount of Each Disbursement this Period <b>200.00</b> Transaction ID : <b>BCF7F92AAE5DF4C069BB</b>
City <b>Minneapolis</b> State <b>MN</b> Zip Code <b>55414-1916</b>	Purpose of Disbursement 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>B. Paul Gary Tuschy</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 18 / 2013</b>
Mailing Address <b>2865 Upper 79th Ct E</b>		Amount of Each Disbursement this Period <b>750.00</b> Transaction ID : <b>BF40101A83D1E46FB926</b>
City <b>Inver Grove Heights</b> State <b>MN</b> Zip Code <b>55076-2923</b>	Purpose of Disbursement 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>c. Miss Kari Lei Byboth</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 18 / 2013</b>
Mailing Address <b>6424 Emerson Ave. S.</b>		Amount of Each Disbursement this Period <b>300.00</b> Transaction ID : <b>BCFBC38B8DDCE4A81BDB</b>
City <b>Minneapolis</b> State <b>MN</b> Zip Code <b>55423-1315</b>	Purpose of Disbursement 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1250.00</b>
<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 24 OF 84	
	<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)  
**Gerson for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ryan Matthew Cahill</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 18 / 2013</b>
Mailing Address <b>2751 Selkirk Dr Apt 314</b>		Amount of Each Disbursement this Period <b>400.00</b> Transaction ID : <b>B752224FEB8C04193A25</b>
City <b>Burnsville</b>	State <b>MN</b>	
Zip Code <b>55337-5670</b>	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2014</b>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) <b>B. Andrew Edmier</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 18 / 2013</b>
Mailing Address <b>3460 Walden Alcove</b>		Amount of Each Disbursement this Period <b>200.00</b> Transaction ID : <b>B9AE405F563974F0BB60</b>
City <b>Saint Paul</b>	State <b>MN</b>	
Zip Code <b>55129-7740</b>	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2014</b>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) <b>C. Amazon</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 21 / 2013</b>
Mailing Address <b>3680 Langley Dr</b>		Amount of Each Disbursement this Period <b>7.68</b> Transaction ID : <b>B2841C8F78A62474B91F</b>
City <b>Hebron</b>	State <b>KY</b>	
Zip Code <b>41048-9135</b>	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2014</b>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>607.68</b>
<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 25 OF 84			
	<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)  
**Gerson for Congress**

Full Name (Last, First, Middle Initial) <b>A. Paul Gary Tuschy</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2013
Mailing Address 2865 Upper 79th Ct E		Amount of Each Disbursement this Period 550.00 <b>Transaction ID : B628804269F09455DB69</b>
City Inver Grove Heights	State MN	
Zip Code 55076-2923	Purpose of Disbursement	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>B. Amazon</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2013
Mailing Address 3680 Langley Dr		Amount of Each Disbursement this Period 12.88 <b>Transaction ID : B17A0ECFEAB664D61978</b>
City Hebron	State KY	
Zip Code 41048-9135	Purpose of Disbursement	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>c. Benjamin Francis Dally</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2013
Mailing Address 329 3rd Ave S		Amount of Each Disbursement this Period 150.00 <b>Transaction ID : B29515E87337149C4800</b>
City South Saint Paul	State MN	
Zip Code 55075-2613	Purpose of Disbursement	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	712.88
<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 26 OF 84			
	<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)  
**Gerson for Congress**

Full Name (Last, First, Middle Initial) <b>A. Joe McKinney</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2013
Mailing Address 928 5th St SE		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : B5473F8028BC14CDAA89</b>
City Minneapolis	State MN	
Zip Code 55414-1916	Purpose of Disbursement	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>B. Miss Kari Lei Byboth</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2013
Mailing Address 6424 Emerson Ave. S.		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : B7D1B30D0869A4FC1933</b>
City Minneapolis	State MN	
Zip Code 55423-1315	Purpose of Disbursement	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>C. Andrew Edmier</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2013
Mailing Address 3460 Walden Alcove		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : B6C2F1362189644A9933</b>
City Saint Paul	State MN	
Zip Code 55129-7740	Purpose of Disbursement	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	700.00
<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 27 OF 84	
	<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)  
**Gerson for Congress**

Full Name (Last, First, Middle Initial) <b>A. Paul Gary Tuschy</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 25 / 2013</b>
Mailing Address <b>2865 Upper 79th Ct E</b>		Amount of Each Disbursement this Period <b>750.00</b> Transaction ID : <b>B050F2EA6E36D48FB957</b>
City <b>Inver Grove Heights</b>	State <b>MN</b>	
Zip Code <b>55076-2923</b>	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2014</b>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Ryan Matthew Cahill</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 25 / 2013</b>
Mailing Address <b>2751 Selkirk Dr Apt 314</b>		Amount of Each Disbursement this Period <b>800.00</b> Transaction ID : <b>B6F7E86F699F94F2F92B</b>
City <b>Burnsville</b>	State <b>MN</b>	
Zip Code <b>55337-5670</b>	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2014</b>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. The UPS Store</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 25 / 2013</b>
Mailing Address <b>2009 W. Broadway Suite 400</b>		Amount of Each Disbursement this Period <b>485.00</b> Transaction ID : <b>B6D1A7E80BD05471C973</b>
City <b>Forest Lake</b>	State <b>MN</b>	
Zip Code <b>55025-4501</b>	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2014</b>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2035.00</b>
<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 28 OF 84	
	<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)  
**Gerson for Congress**

**A. Holiday Station Store**

Full Name (Last, First, Middle Initial)  
Mailing Address 2322 Washington Ave N

City Minneapolis State MN Zip Code 55411-2223

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement: 10 / 26 / 2013

Amount of Each Disbursement this Period: 60.24

Transaction ID : B9F1BC69E9EE9420DA8B

**B. Matthew Erickson**

Full Name (Last, First, Middle Initial)  
Mailing Address 7705 Jasmine Ave S

City Cottage Grove State MN Zip Code 55016-2221

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement: 10 / 26 / 2013

Amount of Each Disbursement this Period: 400.00

Transaction ID : B6070E7FADB1D4C31932

**c. Carly Schowalter**

Full Name (Last, First, Middle Initial)  
Mailing Address 205 County Rd B2 E, Apt 122

City Saint Paul State MN Zip Code 55117-1704

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement: 10 / 28 / 2013

Amount of Each Disbursement this Period: 125.00

Transaction ID : B3C7C25ACE51641BB977

**SUBTOTAL** of Disbursements This Page (optional) ..... 585.24

**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 29 OF 84			
	<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)  
**Gerson for Congress**

Full Name (Last, First, Middle Initial) <b>A. Orbitz Worldwide, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2013
Mailing Address 500 W. Madison Suite 1000		Amount of Each Disbursement this Period 131.46 <b>Transaction ID : BD5C1AB3CAD05498B936</b>
City Chicago	State IL Zip Code 60661-2559	
Purpose of Disbursement	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>B. Holiday Station Store</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2013
Mailing Address 2322 Washington Ave N		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : BA13F8295B4D94292B04</b>
City Minneapolis	State MN Zip Code 55411-2223	
Purpose of Disbursement	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>C. Andrew Edmier</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2013
Mailing Address 3460 Walden Alcove		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : B4E6C927BBB564025B4E</b>
City Saint Paul	State MN Zip Code 55129-7740	
Purpose of Disbursement	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	831.46
<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 30 OF 84			
	<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)  
**Gerson for Congress**

Full Name (Last, First, Middle Initial) <b>A. Got Print</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2013
Mailing Address 7651 N San Fernando Rd		Amount of Each Disbursement this Period 302.51 <b>Transaction ID : B16F850693FBD4186BEA</b>
City Burbank	State CA	
Zip Code 91505-1073	Purpose of Disbursement	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>B. Paul Gary Tuschy</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2013
Mailing Address 2865 Upper 79th Ct E		Amount of Each Disbursement this Period 750.00 <b>Transaction ID : B023552D1EDAD4557BBD</b>
City Inver Grove Heights	State MN	
Zip Code 55076-2923	Purpose of Disbursement	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>c. Miss Kari Lei Byboth</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2013
Mailing Address 6424 Emerson Ave. S.		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : BAA3EA57CFD6440A9AA8</b>
City Minneapolis	State MN	
Zip Code 55423-1315	Purpose of Disbursement	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1352.51
<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 31 OF 84			
	<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)  
**Gerson for Congress**

Full Name (Last, First, Middle Initial) <b>A. Matthew Erickson</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2013
Mailing Address 7705 Jasmine Ave S		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : B15AA5BE445DF447DA0A</b>
City Cottage Grove	State MN	
Zip Code 55016-2221	Purpose of Disbursement	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>B. Carly Schowalter</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2013
Mailing Address 205 County Rd B2 E, Apt 122		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : BCA4566A46CDB4D4D8D4</b>
City Saint Paul	State MN	
Zip Code 55117-1704	Purpose of Disbursement	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>c. Joe McKinney</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2013
Mailing Address 928 5th St SE		Amount of Each Disbursement this Period 110.00 <b>Transaction ID : BEF05F5E18ECA4A9FA52</b>
City Minneapolis	State MN	
Zip Code 55414-1916	Purpose of Disbursement	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	760.00
<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 32 OF 84	
	<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)  
**Gerson for Congress**

**A. The UPS Store**

Full Name (Last, First, Middle Initial)

Mailing Address 209 W. Broadway  
Suite 400

City Forest Lake State MN Zip Code 55025-4501

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement: 11 / 01 / 2013

Amount of Each Disbursement this Period: 580.00

Transaction ID : B4C1379C2C62C40F7B10

**B. Lions Roar Studios**

Full Name (Last, First, Middle Initial)

Mailing Address 23710 State Highway 55

City Loretto State MN Zip Code 55357-9587

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement: 11 / 01 / 2013

Amount of Each Disbursement this Period: 2000.00

Transaction ID : BD548011F24F5445DB49

**c. Benjamin Francis Dally**

Full Name (Last, First, Middle Initial)

Mailing Address 329 3rd Ave S

City South Saint Paul State MN Zip Code 55075-2613

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement: 11 / 02 / 2013

Amount of Each Disbursement this Period: 150.00

Transaction ID : B061A14ED94D9431DB4D

**SUBTOTAL** of Disbursements This Page (optional) ..... 2730.00

**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 33 OF 84			
	<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)  
**Gerson for Congress**

Full Name (Last, First, Middle Initial) <b>A. Tinucci's</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2013
Mailing Address 396 21st St		Amount of Each Disbursement this Period 224.96 <b>Transaction ID : B380AA9E24CE640548ED</b>
City Newport	State MN	
Zip Code 55055-1008	Purpose of Disbursement	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>B. Istockphoto</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2013
Mailing Address 1240 20th Ave SE Suite 200		Amount of Each Disbursement this Period 94.99 <b>Transaction ID : BB46C416D68B74FB7A69</b>
City Calgary	State ZZ	
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: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Istockphoto</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address 1240 20th Ave SE Suite 200		Amount of Each Disbursement this Period 62.77 <b>Transaction ID : BE2FBBD6F5FC54C919B0</b>
City Calgary	State ZZ	
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: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	382.77
<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 34 OF 84			
	<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)  
**Gerson for Congress**

Full Name (Last, First, Middle Initial) <b>A. Paul Gary Tuschy</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address 2865 Upper 79th Ct E		Amount of Each Disbursement this Period 550.00 <b>Transaction ID : BFB266099528B429FA86</b>
City Inver Grove Heights	State MN	
Purpose of Disbursement	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>B. Paul Gary Tuschy</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address 2865 Upper 79th Ct E		Amount of Each Disbursement this Period 550.00 <b>Transaction ID : B3CD1D27500024BC19E5</b>
City Inver Grove Heights	State MN	
Purpose of Disbursement	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>c. Holiday Station Store</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address 2322 Washington Ave N		Amount of Each Disbursement this Period 59.56 <b>Transaction ID : B7507E30BC8654F138CB</b>
City Minneapolis	State MN	
Purpose of Disbursement	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1159.56
<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 35 OF 84			
	<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)  
**Gerson for Congress**

Full Name (Last, First, Middle Initial) <b>A. Got Print</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2013
Mailing Address 7651 N San Fernando Rd		Amount of Each Disbursement this Period 173.26 <b>Transaction ID : BEF4405A0CEDA4D5E909</b>
City Burbank	State CA	
Purpose of Disbursement	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>B. Dirt Cheap Signs</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2013
Mailing Address 7301 Bar K Ranch Rd		Amount of Each Disbursement this Period 311.86 <b>Transaction ID : B28E052582AE443FDBC0</b>
City Lago Vista	State TX	
Purpose of Disbursement	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>c. SuperAmerica</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2013
Mailing Address 1115 Minnesota 3		Amount of Each Disbursement this Period 150.00 <b>Transaction ID : B9C433F263FEC4114A68</b>
City Northfield	State MN	
Purpose of Disbursement	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	635.12
<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 36 OF 84			
	<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)  
**Gerson for Congress**

Full Name (Last, First, Middle Initial) <b>A. SuperAmerica</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2013
Mailing Address 1115 Minnesota 3		Amount of Each Disbursement this Period 150.00 <b>Transaction ID : B2DFC41FF97EB42B08D5</b>
City Northfield	State MN Zip Code 55057	
Purpose of Disbursement	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>B. Sign Minds</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2013
Mailing Address 1400 Quincy St NE		Amount of Each Disbursement this Period 295.00 <b>Transaction ID : B2E3FADF0DA74230BE9</b>
City Minneapolis	State MN Zip Code 55413-1565	
Purpose of Disbursement	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>c. Ryan Matthew Cahill</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2013
Mailing Address 2751 Selkirk Dr Apt 314		Amount of Each Disbursement this Period 800.00 <b>Transaction ID : BB6392F9C09DA4A1FA10</b>
City Burnsville	State MN Zip Code 55337-5670	
Purpose of Disbursement	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1245.00
<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 37 OF 84			
	<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)  
**Gerson for Congress**

Full Name (Last, First, Middle Initial) <b>A. Matthew Erickson</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2013
Mailing Address 7705 Jasmine Ave S		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : BAD18D3CE3F0A47F3B4B</b>
City Cottage Grove	State MN	
Zip Code 55016-2221	Purpose of Disbursement	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>B. Carly Schowalter</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2013
Mailing Address 205 County Rd B2 E, Apt 122		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : B2350CE8639EB4C499E4</b>
City Saint Paul	State MN	
Zip Code 55117-1704	Purpose of Disbursement	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>c. Miss Kari Lei Byboth</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2013
Mailing Address 6424 Emerson Ave. S.		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : B307AC3CA3183480FB7C</b>
City Minneapolis	State MN	
Zip Code 55423-1315	Purpose of Disbursement	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	950.00
<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 38 OF 84			
	<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)  
**Gerson for Congress**

Full Name (Last, First, Middle Initial) <b>A. Joe McKinney</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2013
Mailing Address 928 5th St SE		Amount of Each Disbursement this Period 928 5th St SE 150.00 <b>Transaction ID : B5EC25BB0A0DD453397F</b>
City Minneapolis	State MN	
Purpose of Disbursement	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>B. SuperAmerica</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2013
Mailing Address 1285 S Robert St		Amount of Each Disbursement this Period 1285 S Robert St 58.06 <b>Transaction ID : B18EDDF53164D41BB9CF</b>
City West Saint Paul	State MN	
Purpose of Disbursement	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>C. Aristotle International, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 205 Pennsylvania Avenue SE 700.00 <b>Transaction ID : B3883264881854EBB808</b>
City Washington	State DC	
Purpose of Disbursement	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	908.06
<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 39 OF 84			
	<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)  
**Gerson for Congress**

Full Name (Last, First, Middle Initial) <b>A. Joseph Leach</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 13 / 2013</b>
Mailing Address <b>806 12th ave se</b>		Amount of Each Disbursement this Period <b>100.00</b> Transaction ID : <b>BF2DCAE6FEA28417C92E</b>
City <b>Minneapolis</b> State <b>MN</b> Zip Code <b>55414-1436</b>	Purpose of Disbursement 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>B. Vision Van Gogh</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 14 / 2013</b>
Mailing Address <b>11521 Eagle Street</b>		Amount of Each Disbursement this Period <b>484.15</b> Transaction ID : <b>B382AC0CEB19C4DEDA34</b>
City <b>Minneapolis</b> State <b>MN</b> Zip Code <b>55448-3003</b>	Purpose of Disbursement 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>c. Ryan Matthew Cahill</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 15 / 2013</b>
Mailing Address <b>2751 Selkirk Dr Apt 314</b>		Amount of Each Disbursement this Period <b>400.00</b> Transaction ID : <b>B95ADB64E573642BDB4C</b>
City <b>Burnsville</b> State <b>MN</b> Zip Code <b>55337-5670</b>	Purpose of Disbursement 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>984.15</b>
<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 40 OF 84			
	<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)  
**Gerson for Congress**

Full Name (Last, First, Middle Initial) <b>A. Joe McKinney</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address 928 5th St SE			Amount of Each Disbursement this Period 150.00 <b>Transaction ID : B975CB91CD4104EA99D3</b>
City Minneapolis	State MN	Zip Code 55414-1916	
Purpose of Disbursement		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>B. Matthew Erickson</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address 7705 Jasmine Ave S			Amount of Each Disbursement this Period 400.00 <b>Transaction ID : B59229C8E59054103B28</b>
City Cottage Grove	State MN	Zip Code 55016-2221	
Purpose of Disbursement		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>c. Carly Schowalter</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address 205 County Rd B2 E, Apt 122			Amount of Each Disbursement this Period 275.00 <b>Transaction ID : BE7348E488F944652887</b>
City Saint Paul	State MN	Zip Code 55117-1704	
Purpose of Disbursement		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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	825.00
<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 41 OF 84			
	<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)  
**Gerson for Congress**

Full Name (Last, First, Middle Initial) <b>A. Benjamin Francis Dally</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address 329 3rd Ave S		Amount of Each Disbursement this Period 150.00 <b>Transaction ID : BF781101E1B6A4EC48A6</b>
City South Saint Paul	State MN	
Zip Code 55075-2613	Purpose of Disbursement	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>B. Lions Roar Studios</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2013
Mailing Address 23710 State Highway 55		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : B865E38D7C85244FFA88</b>
City Loretto	State MN	
Zip Code 55357-9587	Purpose of Disbursement	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>c. OfficeMax</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2013
Mailing Address 1271 Promenade Place		Amount of Each Disbursement this Period 79.26 <b>Transaction ID : B20EB7D214B384DBFB06</b>
City Eagan	State MN	
Zip Code 55121-2293	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2229.26
<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 42 OF 84			
	<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)  
**Gerson for Congress**

Full Name (Last, First, Middle Initial) <b>A. Joe McKinney</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2013	
Mailing Address 928 5th St SE			Amount of Each Disbursement this Period 250.00	
City Minneapolis	State MN	Zip Code 55414-1916	Transaction ID : <b>B45136EB8E8094953AFF</b>	
Purpose of Disbursement		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>B. Carly Schowalter</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013	
Mailing Address 205 County Rd B2 E, Apt 122			Amount of Each Disbursement this Period 245.00	
City Saint Paul	State MN	Zip Code 55117-1704	Transaction ID : <b>BCEE93428D2CF4E74991</b>	
Purpose of Disbursement		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>C. Matthew Erickson</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013	
Mailing Address 7705 Jasmine Ave S			Amount of Each Disbursement this Period 400.00	
City Cottage Grove	State MN	Zip Code 55016-2221	Transaction ID : <b>B01825B9A949145A3B23</b>	
Purpose of Disbursement		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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	895.00
<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 43 OF 84			
	<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)  
**Gerson for Congress**

Full Name (Last, First, Middle Initial) <b>A. Joseph Leach</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013
Mailing Address 806 12th ave se			Amount of Each Disbursement this Period 100.00 <b>Transaction ID : BB57EF49D303A4C1EAAE</b>
City Minneapolis	State MN	Zip Code 55414-1436	
Purpose of Disbursement		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>B. Ryan Matthew Cahill</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013
Mailing Address 2751 Selkirk Dr Apt 314			Amount of Each Disbursement this Period 400.00 <b>Transaction ID : B71B02E82A2474813937</b>
City Burnsville	State MN	Zip Code 55337-5670	
Purpose of Disbursement		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>C. Matthew Erickson</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2013
Mailing Address 7705 Jasmine Ave S			Amount of Each Disbursement this Period 100.00 <b>Transaction ID : B9B07415ACCA849DC9BC</b>
City Cottage Grove	State MN	Zip Code 55016-2221	
Purpose of Disbursement Canvassing		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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	600.00
<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 44 OF 84			
	<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)  
**Gerson for Congress**

Full Name (Last, First, Middle Initial) <b>A. Matthew Erickson</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2013
Mailing Address 7705 Jasmine Ave S		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : BC39D66AB1C98493E97E</b>
City Cottage Grove	State MN	
Zip Code 55016-2221	Purpose of Disbursement	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>B. Ryan Matthew Cahill</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2013
Mailing Address 2751 Selkirk Dr Apt 314		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : B1EF068D18C5D4229965</b>
City Burnsville	State MN	
Zip Code 55337-5670	Purpose of Disbursement	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>c. Benjamin Francis Dally</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2013
Mailing Address 329 3rd Ave S		Amount of Each Disbursement this Period 150.00 <b>Transaction ID : B1ADFBB9C4E07412BB39</b>
City South Saint Paul	State MN	
Zip Code 55075-2613	Purpose of Disbursement	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	750.00
<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 45 OF 84			
	<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)  
**Gerson for Congress**

Full Name (Last, First, Middle Initial) <b>A. Benjamin Francis Dally</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2013
Mailing Address 329 3rd Ave S		Amount of Each Disbursement this Period 150.00 <b>Transaction ID : B15749D2E1B564A0A94D</b>
City South Saint Paul	State MN	
Zip Code 55075-2613	Purpose of Disbursement	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>B. Joseph Leach</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2013
Mailing Address 806 12th ave se		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : BF933DB2C4DD549A680E</b>
City Minneapolis	State MN	
Zip Code 55414-1436	Purpose of Disbursement	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>c. Aristotle International, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2013
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 700.00 <b>Transaction ID : BDEBEB88B8C0542EA9D7</b>
City Washington	State DC	
Zip Code 20003-1164	Purpose of Disbursement	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1050.00
<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 46 OF 84	
	<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)  
**Gerson for Congress**

**A. Got Print**

Full Name (Last, First, Middle Initial)  
Mailing Address 7651 N San Fernando Rd

City Burbank State CA Zip Code 91505-1073

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement: 12 / 03 / 2013

Amount of Each Disbursement this Period: 57.18

Transaction ID : BD0F2C7A228B24614976

**B. CallFire**

Full Name (Last, First, Middle Initial)  
Mailing Address 1335 4th St., Suite 200

City Santa Monica State CA Zip Code 90401-1363

Purpose of Disbursement

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: 200.00

Transaction ID : B172B9BE429554509899

**c. Joseph Leach**

Full Name (Last, First, Middle Initial)  
Mailing Address 806 12th ave se

City Minneapolis State MN Zip Code 55414-1436

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement: 12 / 06 / 2013

Amount of Each Disbursement this Period: 200.00

Transaction ID : B6B6A41D31E4043E1AFF

**SUBTOTAL** of Disbursements This Page (optional) ..... 457.18

**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 47 OF 84	
	<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)  
**Gerson for Congress**

Full Name (Last, First, Middle Initial) <b>A. Benjamin Francis Dally</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2013
Mailing Address 329 3rd Ave S		Amount of Each Disbursement this Period 7 4 4 . 0 0 50.00 <b>Transaction ID : B581B782B2E004B27AF4</b>
City South Saint Paul	State MN	
Zip Code 55075-2613	Purpose of Disbursement	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>B. Matthew Erickson</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2013
Mailing Address 7705 Jasmine Ave S		Amount of Each Disbursement this Period 7 0 0 . 0 0 200.00 <b>Transaction ID : BDAACF456B9FA40439BD</b>
City Cottage Grove	State MN	
Zip Code 55016-2221	Purpose of Disbursement	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>c. Vision Van Gogh</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2013
Mailing Address 11521 Eagle Street		Amount of Each Disbursement this Period 7 4 8 . 1 5 484.15 <b>Transaction ID : B9AF7E4BA95154663B31</b>
City Minneapolis	State MN	
Zip Code 55448-3003	Purpose of Disbursement	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	734.15
<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 48 OF 84			
	<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)  
**Gerson for Congress**

Full Name (Last, First, Middle Initial) <b>A. Lions Roar Studios</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2013	
Mailing Address 23710 State Highway 55			Amount of Each Disbursement this Period 2938.75	
City Loretto	State MN	Zip Code 55357-9587	Transaction ID : <b>BDBBF2F359A31433BAE8</b>	
Purpose of Disbursement		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>B. CallFire</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2013	
Mailing Address 1335 4th St., Suite 200			Amount of Each Disbursement this Period 200.00	
City Santa Monica	State CA	Zip Code 90401-1363	Transaction ID : <b>B41AE42E03C874EC295F</b>	
Purpose of Disbursement		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>c. Joseph Leach</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2013	
Mailing Address 806 12th ave se			Amount of Each Disbursement this Period 200.00	
City Minneapolis	State MN	Zip Code 55414-1436	Transaction ID : <b>BE7FA554C980243FF961</b>	
Purpose of Disbursement		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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3338.75
<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 49 OF 84			
	<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)  
**Gerson for Congress**

Full Name (Last, First, Middle Initial) <b>A. Matthew Erickson</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2013	
Mailing Address 7705 Jasmine Ave S			Amount of Each Disbursement this Period 200.00	
City Cottage Grove	State MN	Zip Code 55016-2221	Transaction ID : B2CD0AA3172F8457D992	
Purpose of Disbursement		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>B. Benjamin Francis Dally</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2013	
Mailing Address 329 3rd Ave S			Amount of Each Disbursement this Period 50.00	
City South Saint Paul	State MN	Zip Code 55075-2613	Transaction ID : BB3676BE813DC4493BA0	
Purpose of Disbursement		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>c. OfficeMax</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2013	
Mailing Address 9010 Jamaica Ave South			Amount of Each Disbursement this Period 85.79	
City Cottage Grove	State MN	Zip Code 55016-4012	Transaction ID : B984049BB3EE24D2E96D	
Purpose of Disbursement		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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	335.79
<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 50 OF 84			
	<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)  
**Gerson for Congress**

Full Name (Last, First, Middle Initial) <b>A. Matthew Erickson</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013		
Mailing Address 7705 Jasmine Ave S			Amount of Each Disbursement this Period 200.00		
City Cottage Grove	State MN	Zip Code 55016-2221	Transaction ID : <b>BBC75EF2E49764707A71</b>		
Purpose of Disbursement		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>B. Joseph Leach</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013		
Mailing Address 806 12th ave se			Amount of Each Disbursement this Period 200.00		
City Minneapolis	State MN	Zip Code 55414-1436	Transaction ID : <b>BF8AB8C5AAB154B06B11</b>		
Purpose of Disbursement		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>c. Matthew Erickson</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013		
Mailing Address 7705 Jasmine Ave S			Amount of Each Disbursement this Period 200.00		
City Cottage Grove	State MN	Zip Code 55016-2221	Transaction ID : <b>B06A58E90B8EA40B78C9</b>		
Purpose of Disbursement		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: _____				

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	600.00
<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 51 OF 84			
	<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)  
**Gerson for Congress**

Full Name (Last, First, Middle Initial) <b>A. SuperAmerica</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 25 / 2013	
Mailing Address 1285 S Robert St			Amount of Each Disbursement this Period 200.00	
City West Saint Paul	State MN	Zip Code 55118-2402	Transaction ID : <b>BAB73182A217E46CFB7</b>	
Purpose of Disbursement		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>B. Joseph Leach</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2013	
Mailing Address 806 12th ave se			Amount of Each Disbursement this Period 200.00	
City Minneapolis	State MN	Zip Code 55414-1436	Transaction ID : <b>BAE2F89C2F47D4891BF2</b>	
Purpose of Disbursement		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>c. Benjamin Francis Dally</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2013	
Mailing Address 329 3rd Ave S			Amount of Each Disbursement this Period 60.00	
City South Saint Paul	State MN	Zip Code 55075-2613	Transaction ID : <b>B2D407FA947DB490F81E</b>	
Purpose of Disbursement		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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	460.00
<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 52 OF 84			
	<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)  
**Gerson for Congress**

Full Name (Last, First, Middle Initial) <b>A. Matthew Erickson</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2013		
Mailing Address 7705 Jasmine Ave S			Amount of Each Disbursement this Period 400.00		
City Cottage Grove	State MN	Zip Code 55016-2221	Transaction ID : <b>B562D145DFFF040ACBA8</b>		
Purpose of Disbursement		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>B. SuperAmerica</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2013		
Mailing Address 1285 S Robert St			Amount of Each Disbursement this Period 59.81		
City West Saint Paul	State MN	Zip Code 55118-2402	Transaction ID : <b>B2D861196E7D943538D2</b>		
Purpose of Disbursement		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>c. CallFire</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2013		
Mailing Address 1335 4th St., Suite 200			Amount of Each Disbursement this Period 100.00		
City Santa Monica	State CA	Zip Code 90401-1363	Transaction ID : <b>B5D53AE4307194A3E8E4</b>		
Purpose of Disbursement		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: _____				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	559.81
<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 53 OF 84	
	<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)  
**Gerson for Congress**

Full Name (Last, First, Middle Initial) <b>A. Benjamin Francis Dally</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2013
Mailing Address 329 3rd Ave S		Amount of Each Disbursement this Period 50.00
City South Saint Paul	State MN	
Zip Code 55075-2613	Purpose of Disbursement	Transaction ID : BAB50D47962F0492EAFE
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>B. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 164.09
City San Francisco	State CA	
Zip Code 94105-3718	Purpose of Disbursement	Transaction ID : B17C44FD59ABB44D1892
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>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	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	214.09
<b>TOTAL</b> This Period (last page this line number only).....	41328.93

# SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
Gerson for Congress

Transaction ID : CC119E80D013A4C848DF

LOAN SOURCE Full Name (Last, First, Middle Initial)  
David Gerson

[PERSONAL FUNDS]

Election: 2012

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave.

City State ZIP Code  
South Saint Paul MN 55075-1225

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
1000.00 0.00 1000.00

### TERMS

Date Incurred Date Due Interest Rate Secured:  
08 / 17 / 2012 M M / D D / On Demand 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

SUBTOTALS This Period This Page (optional)..... ▶ 1000.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER: (check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Gerson for Congress**

Transaction ID : CDFBE68259F634F8FB17

LOAN SOURCE Full Name (Last, First, Middle Initial)

**David Gerson**

[PERSONAL FUNDS]

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave.

City State ZIP Code  
South Saint Paul MN 55075-1225

Original Amount of Loan 4000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 4000.00
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**TERMS**

Date Incurred: M 11 / D 13 / Y 2013  
Date Due: M / D / Y On Demand  
Interest Rate: 0.00 % (apr)  
Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

**SUBTOTALS** This Period This Page (optional)..... ▶ 4000.00  
**TOTALS** This Period (last page in this line only)..... ▶ [ ]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Gerson for Congress**

Transaction ID : **CFB47D2CFA5E3430A852**

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
**David Gerson**

**[PERSONAL FUNDS]**

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave.

City State ZIP Code  
South Saint Paul MN 55075-1225

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
3000.00 0.00 3000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M 11 / D 19 / Y 2013 M M / D D / On Demand 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

**SUBTOTALS** This Period This Page (optional)..... ▶ 3000.00

**TOTALS** This Period (last page in this line only)..... ▶

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**



**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
Gerson for Congress

Transaction ID : C80E4BDE58357453791E

LOAN SOURCE Full Name (Last, First, Middle Initial)

David Gerson

[PERSONAL FUNDS]

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave.

City State ZIP Code  
South Saint Paul MN 55075-1225

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
4000.00 0.00 4000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M 04 / D 18 / Y 2013 M M / D D / On Demand 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... 4000.00

**TOTALS** This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
Gerson for Congress

Transaction ID : CFFE1B8441D1D4FECB0F

LOAN SOURCE Full Name (Last, First, Middle Initial)

David Gerson

[PERSONAL FUNDS]

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave.

City State ZIP Code  
South Saint Paul MN 55075-1225

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
5000.00 0.00 5000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M 06 / D 10 / Y 2013 M M / D D / On Demand 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... 5000.00

**TOTALS** This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

# SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
Gerson for Congress

Transaction ID : C591732688A0D4E2DA9E

LOAN SOURCE Full Name (Last, First, Middle Initial)

David Gerson

[PERSONAL FUNDS]

Election: 2012

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave.

City State ZIP Code  
South Saint Paul MN 55075-1225

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
16554.96 0.00 16554.96

### TERMS

Date Incurred Date Due Interest Rate Secured:  
M 05 / D 29 / Y 2012 M M / D D / On Demand 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

SUBTOTALS This Period This Page (optional)..... ▶ 16554.96

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER: (check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
Gerson for Congress

Transaction ID : CC500ACF29B8341FA9B4

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
David Gerson

[PERSONAL FUNDS]

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave.

City State ZIP Code  
South Saint Paul MN 55075-1225

Original Amount of Loan 3000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 3000.00
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**TERMS**

Date Incurred: M 02 / D 25 / Y 2013  
Date Due: M M / D D / Y On Demand  
Interest Rate: 0.00 % (apr)  
Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

**SUBTOTALS** This Period This Page (optional)..... ▶ 3000.00  
**TOTALS** This Period (last page in this line only)..... ▶ [ ]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Gerson for Congress**

Transaction ID : **C181545E8122344229FF**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**David Gerson**

**[PERSONAL FUNDS]**

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave.

City State ZIP Code  
South Saint Paul MN 55075-1225

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
4000.00 0.00 4000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M 05 / D 13 / Y 2013 M M / D D / On Demand 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶ 4000.00

**TOTALS** This Period (last page in this line only)..... ▶

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Gerson for Congress**

Transaction ID : **CC507AE24B8A54EFE8C7**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**David Gerson**

**[PERSONAL FUNDS]**

Election: 2012

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave.

City State ZIP Code  
South Saint Paul MN 55075-1225

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
5000.00 0.00 5000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M M / D D / Y Y Y Y M M / D D / Y Y Y Y 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

**SUBTOTALS** This Period This Page (optional)..... ▶ 5000.00

**TOTALS** This Period (last page in this line only)..... ▶

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
Gerson for Congress

Transaction ID : C581929EA09A64C45813

LOAN SOURCE Full Name (Last, First, Middle Initial)

David Gerson

[PERSONAL FUNDS]

Election: 2012

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave.

City State ZIP Code  
South Saint Paul MN 55075-1225

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
5000.00 0.00 5000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M 07 / D 26 / Y 2012 M M / D D / On Demand 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... 5000.00

**TOTALS** This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Gerson for Congress**

Transaction ID : C22D915EEFF424A89BDC

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
**David Gerson**

**[PERSONAL FUNDS]**

Election: 2012

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave.

City State ZIP Code  
South Saint Paul MN 55075-1225

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
10000.00 0.00 10000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M 07 / D 19 / Y 2012 M M / D D / On Demand 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

**SUBTOTALS** This Period This Page (optional)..... ▶ 10000.00  
**TOTALS** This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
Gerson for Congress

Transaction ID : C3EE12C561B0F4FCFBCF

LOAN SOURCE Full Name (Last, First, Middle Initial)

David Gerson

[PERSONAL FUNDS]

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave.

City State ZIP Code  
South Saint Paul MN 55075-1225

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
131.12 0.00 131.12

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M 06 / D 30 / Y 2013 M M / D D / On Demand 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... 131.12

**TOTALS** This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

# SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
Gerson for Congress

Transaction ID : C4A6EDFF368FA4528981

LOAN SOURCE Full Name (Last, First, Middle Initial)  
David Gerson

[PERSONAL FUNDS]

Election: 2012

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave.

City State ZIP Code  
South Saint Paul MN 55075-1225

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
5000.00 0.00 5000.00

TERMS

Date Incurred Date Due Interest Rate Secured:  
08 / 01 / 2012 M M / D D / On Demand 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... 5000.00

TOTALS This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Gerson for Congress**

Transaction ID : **C5243E0D6267D470AB8E**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**David Gerson**

**[PERSONAL FUNDS]**

Election: 2012

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave.

City State ZIP Code  
South Saint Paul MN 55075-1225

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
5.00 0.00 5.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M 07 / D 24 / Y 2012 M M / D D / On Demand 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

**SUBTOTALS** This Period This Page (optional)..... ▶ 5.00

**TOTALS** This Period (last page in this line only)..... ▶

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Gerson for Congress**

Transaction ID : **C75024B6AADAFA48039EE**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**David Gerson**

**[PERSONAL FUNDS]**

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave.

City State ZIP Code  
South Saint Paul MN 55075-1225

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
3000.00 0.00 3000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M 03 / D 26 / Y 2013 M M / D D / On Demand 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

**SUBTOTALS** This Period This Page (optional)..... ▶ 3000.00

**TOTALS** This Period (last page in this line only)..... ▶ [ ]

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Gerson for Congress**

Transaction ID : **C58F5BC729D1541179D8**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**David Gerson**

**[PERSONAL FUNDS]**

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave.

City State ZIP Code  
South Saint Paul MN 55075-1225

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
5000.00 0.00 5000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M 07 / D 29 / Y 2013 M M / D D / On Demand 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... 5000.00

**TOTALS** This Period (last page in this line only).....

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Gerson for Congress**

Transaction ID : **C0B4FC68045C0434EA2F**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**David Gerson**

**[PERSONAL FUNDS]**

Election: 2012

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave.

City State ZIP Code  
South Saint Paul MN 55075-1225

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
5000.00 0.00 5000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M 07 / D 24 / Y 2012 M M / D D / On Demand 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶ 5000.00

**TOTALS** This Period (last page in this line only)..... ▶

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Gerson for Congress**

Transaction ID : **C0896E5DB057444CDA77**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**David Gerson**

**[PERSONAL FUNDS]**

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave.

City State ZIP Code  
South Saint Paul MN 55075-1225

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
5000.00 0.00 5000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M M / D D / Y Y Y Y M M / D D / Y Y Y Y 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶ 5000.00

**TOTALS** This Period (last page in this line only)..... ▶

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) Transaction ID : C8F480B7D0B0D4976865  
**Gerson for Congress**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>David Gerson</b>	<b>[PERSONAL FUNDS]</b>	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1035 Summit Ave.		
City South Saint Paul	State MN	ZIP Code 55075-1225

Original Amount of Loan 5000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 5000.00
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**TERMS**

Date Incurred M 07 / D 05 / Y 2013	Date Due M M / D D / Y On Demand	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

<b>SUBTOTALS</b> This Period This Page (optional).....	5000.00
<b>TOTALS</b> This Period (last page in this line only).....	

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**



**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) Transaction ID : C3C3C120484CD45AEB45  
**Gerson for Congress**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>David Gerson</b>	<b>[PERSONAL FUNDS]</b>	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1035 Summit Ave.		

City	State	ZIP Code
South Saint Paul	MN	55075-1225

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5000.00	0.00	5000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 10 / D 04 / Y 2013 Y	M M / D D / Y Y Y Y On Demand	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional).....	<input style="width: 100%;" type="text" value="5000.00"/>
<b>TOTALS</b> This Period (last page in this line only).....	<input style="width: 100%;" type="text"/>
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Gerson for Congress**

Transaction ID : **C1EDC6E3AE0E84F15BEB**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**David Gerson**

**[PERSONAL FUNDS]**

Election: 2012

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave.

City State ZIP Code  
South Saint Paul MN 55075-1225

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
6.00 0.00 6.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
08 / 10 / 2012 M M / D D / On Demand 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

**SUBTOTALS** This Period This Page (optional)..... ▶ 6.00

**TOTALS** This Period (last page in this line only)..... ▶

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Gerson for Congress**

Transaction ID : **C8C6F94F9155F4F208E4**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**David Gerson**

**[PERSONAL FUNDS]**

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave.

City State ZIP Code  
South Saint Paul MN 55075-1225

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
5000.00 0.00 5000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M M / D D / Y Y Y Y M M / D D / Y Y Y Y 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶ 5000.00

**TOTALS** This Period (last page in this line only)..... ▶

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Gerson for Congress**

Transaction ID : **CF995C7DB594B49438DA**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**David Gerson**

**[PERSONAL FUNDS]**

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave.

City State ZIP Code  
South Saint Paul MN 55075-1225

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
5000.00 0.00 5000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M M / D D / Y Y Y Y M M / D D / Y Y Y Y 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶ 5000.00

**TOTALS** This Period (last page in this line only)..... ▶

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Gerson for Congress** Transaction ID : **CC7210372F33248EA953**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **David Gerson** *[PERSONAL FUNDS]* Election: 2014  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave.

City State ZIP Code  
South Saint Paul MN 55075-1225

Original Amount of Loan 3000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 3000.00
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**TERMS**

Date Incurred: M 12 / D 16 / Y 2013  
 Date Due: M / D / Y On Demand  
 Interest Rate: 0.00 % (apr)  
 Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

**SUBTOTALS** This Period This Page (optional)..... ▶ 3000.00

**TOTALS** This Period (last page in this line only)..... ▶ [ ]

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Gerson for Congress**

Transaction ID : **CEFD5335FCDAC444183B**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**David Gerson**

**[PERSONAL FUNDS]**

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave.

City State ZIP Code  
South Saint Paul MN 55075-1225

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
3000.00 0.00 3000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
09 / 30 / 2013 M M / D D / On Demand 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... 3000.00

**TOTALS** This Period (last page in this line only).....

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Gerson for Congress**

Transaction ID : **C432C183E90614B0DB65**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**David Gerson**

**[PERSONAL FUNDS]**

Election: 2012

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave.

City State ZIP Code  
South Saint Paul MN 55075-1225

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
1000.00 0.00 1000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M M / D D / Y Y Y Y M M / D D / Y Y Y Y 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶ 1000.00

**TOTALS** This Period (last page in this line only)..... ▶

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Gerson for Congress**

Transaction ID : **C38335C64048A4CAD9CA**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**David Gerson**

**[PERSONAL FUNDS]**

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave.

City State ZIP Code  
South Saint Paul MN 55075-1225

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
4000.00 0.00 4000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M 11 / D 29 / Y 2013 M M / D D / On Demand 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶ 4000.00

**TOTALS** This Period (last page in this line only)..... ▶

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**



**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Gerson for Congress**

Transaction ID : **C73AEC387623D4CF18C5**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**David Gerson**

**[PERSONAL FUNDS]**

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave.

City State ZIP Code  
South Saint Paul MN 55075-1225

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
5000.00 0.00 5000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M M / D D / Y Y Y Y M M / D D / Y Y Y Y 0.00 % (apr)  Yes  No  
10 16 / 2013 On Demand

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

**SUBTOTALS** This Period This Page (optional)..... ▶ 5000.00

**TOTALS** This Period (last page in this line only)..... ▶

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Gerson for Congress** Transaction ID : **CBC884A2776D8495494E**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **David Gerson** *[PERSONAL FUNDS]* Election: 2014  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave.

City State ZIP Code  
South Saint Paul MN 55075-1225

Original Amount of Loan 4000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 4000.00
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**TERMS**

Date Incurred M 12 / D 09 / Y 2013	Date Due M / D / Y On Demand	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	[ ] 4000.00
<b>TOTALS</b> This Period (last page in this line only).....	▶	[ ]

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

# SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
Gerson for Congress

Transaction ID : C233F73A44B02435C9FF

LOAN SOURCE Full Name (Last, First, Middle Initial)  
David Gerson

[PERSONAL FUNDS]

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave.

City State ZIP Code  
South Saint Paul MN 55075-1225

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
5000.00 0.00 5000.00

### TERMS

Date Incurred Date Due Interest Rate Secured:  
M 11 / D 04 / Y 2013 M M / D D / On Demand 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... 5000.00

TOTALS This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Gerson for Congress**

Transaction ID : **C8C8BDDF9FA7149CA9D0**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**David Gerson**

**[PERSONAL FUNDS]**

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1035 Summit Ave.

City State ZIP Code  
South Saint Paul MN 55075-1225

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
479.33 0.00 479.33

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
02 / 22 / 2013 M M / D D / On Demand 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶ 479.33  
**TOTALS** This Period (last page in this line only)..... ▶ 129176.41

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**