

**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS

Office Use Only

2018 JUL 19 PM 12:09
12FE4M5

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

PAINTER MINNESOTA

ADDRESS (number and street)

P.O. BOX 6780

Check if different than previously reported. (ACC)

MINNEAPOLIS MN 55406

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C 00673152

3. IS THIS REPORT NEW (N) OR AMENDED (A)

STATE ▼ DISTRICT

MN

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)

Termination Report (TER)

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

- Primary (12P) General (12G) Runoff (12R)
- Convention (12C) Special (12S)

Election on MM / DD / YYYY in the State of

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

- General (30G) Runoff (30R) Special (30S)

Election on MM / DD / YYYY in the State of

5. Covering Period

MM / DD / YYYY
04 / 01 / 2018

through

MM / DD / YYYY
06 / 30 / 2018

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 JENNIFER GLAIM

Signature of Treasurer

Jennifer Glaim

Date

MM / DD / YYYY
07 / 14 / 2018

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

Office Use Only

FEC FORM 3
(Revised 05/2016)

201807200200638856

SUMMARY PAGE

of Receipts and Disbursements

Write or Type Committee Name

PAINTER MINNESOTA

Report Covering the Period: From:

M M / D D / Y Y Y Y
04 / 01 / 2018

To:

M M / D D / Y Y Y Y
06 / 30 / 2018

**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)) ..

156352.04

171263.74

(b) Total Contribution Refunds
(from Line 20(d)) ..

110.00

110.00

(c) Net Contributions (other than loans)
(subtract Line 6(b) from Line 6(a)) ..

156242.04

171153.74

7. Net Operating Expenditures

(a) Total Operating Expenditures
(from Line 17) ..

93963.58

95196.13

(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)) ..

93963.58

95196.13

8. Cash on Hand at Close of
Reporting Period (from Line 27)...

75957.61

9. Debts and Obligations Owed TO
the Committee (Itemize all on
Schedule C and/or Schedule D) ..

0.00

10. Debts and Obligations Owed BY
the Committee (Itemize all on
Schedule C and/or Schedule D) ..

0.00

For further information contact:

Federal Election Commission
1050 First Street, N.E.
Washington, DC 20463

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

201807200200630057

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Page 3

Write or Type Committee Name

PAINTER MINNESOTA

Report Covering the Period: From:

M	M
04	01

 /

D	D
01	01

 /

Y	Y	Y	Y
2018	2018	2018	2018

 To:

M	M
06	30

 /

D	D
30	30

 /

Y	Y	Y	Y
2018	2018	2018	2018

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) ...	63961.63	70611.63
(ii) Unitemized	92390.41	100152.11
(iii) TOTAL of contributions from individuals .	156352.04	170763.74
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs)...	0.00	0.00
(d) The Candidate	0.00	500.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	156352.04	171263.74
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate...	0.00	0.00
(b) All Other Loans...	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))...	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) ..	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...	156352.04	171263.74

201807200200838858

DETAILED SUMMARY PAGE

II. DISBURSEMENTS

**COLUMN A
Total This Period**

**COLUMN B
Election Cycle-to-Date**

17. OPERATING EXPENDITURES...

93963.58

95196.13

18. TRANSFERS TO OTHER
AUTHORIZED COMMITTEES ..

0.00

0.00

19. LOAN REPAYMENTS:

(a) Of Loans Made or Guaranteed
by the Candidate...

0.00

0.00

(b) Of All Other Loans

0.00

0.00

(c) TOTAL LOAN REPAYMENTS
(add Lines 19(a) and (b))...

0.00

0.00

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other
Than Political Committees ..

110.00

110.00

(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))...

110.00

110.00

21. OTHER DISBURSEMENTS ..

0.00

0.00

22. TOTAL DISBURSEMENTS

(add Lines 17, 18, 19(c), 20(d), and 21) ▶

94073.58

95306.13

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...

13679.15

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...

156352.04

25. SUBTOTAL (add Line 23 and Line 24)...

170031.19

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...

94073.58

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD
(subtract Line 26 from Line 25)...

75957.61

201807200200638859

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full) **PAINTER MINNESOTA**

A. Full Name (Last, First, Middle Initial)
HACKETT, MAUREEN

Mailing Address
4919 ARLINGTON DRIVE

City **MINNETONKA** State **MN** Zip Code **55343**

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

Name of Employer **HENNEPIN HEALTH CARE** Occupation **PHYSICIAN**

Receipt For:
 Primary General
 Other (specify) ▼ **2018**

Election Cycle-to-Date
5400.00

Date of Receipt
05 / 12 / 2018

Amount of Each Receipt this Period
2700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
HACKETT, MAUREEN

Mailing Address
4919 ARLINGTON DRIVE

City **MINNETONKA** State **MN** Zip Code **55343**

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

Name of Employer **HENNEPIN HEALTH CARE** Occupation **PHYSICIAN**

Receipt For:
 Primary General
 Other (specify) ▼ **2018**

Election Cycle-to-Date
5400.00

Date of Receipt
05 / 12 / 2018

Amount of Each Receipt this Period
2700.00

Memo Item

C. Full Name (Last, First, Middle Initial)
O'DONNELL, ROSIE

Mailing Address
P.O. BOX 38016

City **ALBANY** State **NY** Zip Code **12203**

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

Name of Employer **SHOWTIME** Occupation **ACTOR**

Receipt For:
 Primary General
 Other (specify) ▼ **2018**

Election Cycle-to-Date
2700.00

Date of Receipt
04 / 29 / 2018

Amount of Each Receipt this Period
2700.00

Memo Item

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

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

8100.00

201807200200038869

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

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

FOR LINE NUMBER: PAGE 6 OF

(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full) **PAINTER MINNESOTA**

A. Full Name (Last, First, Middle Initial)
RATNER, STEVEN

Mailing Address
10797 CHERRY HILL DRIVE

City **SAN DIEGO** State **CA** Zip Code **92130**

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

Name of Employer **RATNER & PINCHMAN** Occupation **LAWYER**

Receipt For:
 Primary General
 Other (specify) ▼ **2018**

Election Cycle-to-Date ▼ **2700.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 02 / 2018

Amount of Each Receipt this Period
2700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MCNAMEE, ANN

Mailing Address
300 OLIVE HILL LANE

City **WOODSIDE** State **CA** Zip Code **94062**

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

Name of Employer **SELF** Occupation **COMPOSER**

Receipt For:
 Primary General
 Other (specify) ▼ **2018**

Election Cycle-to-Date ▼ **2700.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Amount of Each Receipt this Period
2700.00

Memo Item

C. Full Name (Last, First, Middle Initial)
BARRIENTOS, RENE

Mailing Address
433 DEVINE ROAD

City **SAN ANTONIO** State **TX** Zip Code **78212**

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

Name of Employer **SELF** Occupation **RANCHER**

Receipt For:
 Primary General
 Other (specify) ▼ **2018**

Election Cycle-to-Date ▼ **2700.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 07 / 2018

Amount of Each Receipt this Period
2700.00

Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ **8100.00**

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

201807200200638861

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

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

FOR LINE NUMBER: PAGE 7 OF

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

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NAME OF COMMITTEE (In Full) PAINTER MINNESOTA

A. Full Name (Last, First, Middle Initial) SMITH-DEWEY, CHUCK

Mailing Address 19350 IRELAND COURT

City LAKEVILLE State MN Zip Code 55044

FEC ID number of contributing federal political committee. C

Name of Employer HEALTHINSURANCE.ORG Occupation FOUNDER/CEO

Receipt For: Primary General Other (specify) 2018

Election Cycle-to-Date 2700.00

Date of Receipt MM / DD / YYYY 05 / 09 / 2018

Amount of Each Receipt this Period 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial) SMITH-DEWEY, CHUCK

Mailing Address 19350 IRELAND COURT

City LAKEVILLE State MN Zip Code 55044

FEC ID number of contributing federal political committee. C

Name of Employer HEALTHINSURANCE.ORG Occupation FOUNDER/CEO

Receipt For: Primary General Other (specify) 2018

Election Cycle-to-Date 2700.00

Date of Receipt MM / DD / YYYY 06 / 30 / 2018

Amount of Each Receipt this Period 1700.00

Memo Item

C. Full Name (Last, First, Middle Initial) KUROWSKI, ANNE

Mailing Address 7345 LILAC LANE

City VICTORIA State MN Zip Code 55386

FEC ID number of contributing federal political committee. C

Name of Employer NONE Occupation NONE

Receipt For: Primary General Other (specify) 2018

Election Cycle-to-Date 2700.00

Date of Receipt MM / DD / YYYY 05 / 29 / 2018

Amount of Each Receipt this Period 2700.00

Memo Item

SUBTOTAL of Receipts This Page (optional) 5400.00

TOTAL This Period (last page this line number only)

5400.00

201807200200838862

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

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

FOR LINE NUMBER: PAGE 8 OF

(check only one)

11a 11b 11c 11d

12 13a 13b 14 15

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NAME OF COMMITTEE (In Full) PAINTER MINNESOTA

A. Full Name (Last, First, Middle Initial) STEWART, REBEKAH

Mailing Address 130 E 72ND ST

City NEW YORK CITY State NY Zip Code 10021

FEC ID number of contributing federal political committee. C

Name of Employer SELF Occupation INVESTOR

Receipt For: Primary General Other (specify) 2018

Election Cycle-to-Date 2018

Date of Receipt 06 / 23 / 2018

Amount of Each Receipt this Period 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial) HOLDER, JOHN

Mailing Address 2196 SALUDA ROAD

City ROCK HILL State SC Zip Code 29730

FEC ID number of contributing federal political committee. C

Name of Employer WINTHROP UNIVERSITY Occupation INSTRUCTOR

Receipt For: Primary General Other (specify) 2018

Election Cycle-to-Date 2018

Date of Receipt 04 / 30 / 2018

Amount of Each Receipt this Period 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial) WEBB, LISA

Mailing Address 11605 HOBBITON TRAIL

City AUSTIN State TX Zip Code 78739

FEC ID number of contributing federal political committee. C

Name of Employer SELF Occupation CONSULTANT

Receipt For: Primary General Other (specify) 2018

Election Cycle-to-Date 2018

Date of Receipt 04 / 30 / 2018

Amount of Each Receipt this Period 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional) 3000.00

TOTAL This Period (last page this line number only)

201807200200630003

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

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

FOR LINE NUMBER: PAGE 9 OF

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

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NAME OF COMMITTEE (In Full) **PAINTER MINNESOTA**

A. Full Name (Last, First, Middle Initial)
ALTMAN, MARK

Mailing Address
60 BROADWAY #10C

City **BROOKLYN** State **NY** Zip Code **11249**

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

Name of Employer **NONE** Occupation **NONE**

Receipt For:
 Primary General
 Other (specify) ▼ **2018**

Election Cycle-to-Date ▼ **1000.00**

Date of Receipt
MM / DD / YYYY
04 / 30 / 2018

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ALTMAN, MARK

Mailing Address
60 BROADWAY #10C

City **BROOKLYN** State **NY** Zip Code **11249**

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

Name of Employer **NONE** Occupation **NONE**

Receipt For:
 Primary General
 Other (specify) ▼ **2018**

Election Cycle-to-Date ▼ **1000.00**

Date of Receipt
MM / DD / YYYY
06 / 29 / 2018

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
NATION, MARK

Mailing Address
1442 MT LAUREL DR

City **WINTER SPRINGS** State **FL** Zip Code **32750**

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

Name of Employer **NATION LAW FIRM** Occupation **ATTORNEY**

Receipt For:
 Primary General
 Other (specify) ▼ **2018**

Election Cycle-to-Date ▼ **1000.00**

Date of Receipt
MM / DD / YYYY
05 / 02 / 2018

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ **2000.00**

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

201807200200838864

**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 15
 (check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full) PAINTER MINNESOTA

A. Full Name (Last, First, Middle Initial) DASKAIS, RICHARD
 Mailing Address 1623 IDAHO AVE
 City SANTA MONICA State CA Zip Code 90403
 FEC ID number of contributing federal political committee. C
 Name of Employer NONE Occupation NONE
 Receipt For: Primary General
 Other (specify) 2018
 Election Cycle-to-Date 1000.00

Date of Receipt MM / DD / YYYY
 04 / 30 / 2018
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Full Name (Last, First, Middle Initial) WOLFSON, PAUL
 Mailing Address 1509 CHURCH ST NW
 City WASHINGTON State DC Zip Code 20005
 FEC ID number of contributing federal political committee. C
 Name of Employer WILMER HALE Occupation LAWYER
 Receipt For: Primary General
 Other (specify) 2018
 Election Cycle-to-Date 1000.00

Date of Receipt MM / DD / YYYY
 05 / 19 / 2018
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Full Name (Last, First, Middle Initial) LEEDS, CAREY
 Mailing Address 639 THOMPSON DR
 City SUNNYSIDE State WA Zip Code 98944
 FEC ID number of contributing federal political committee. C
 Name of Employer ASTRIA HEALTH Occupation PHYSICIAN
 Receipt For: Primary General
 Other (specify) 2018
 Election Cycle-to-Date 1000.00

Date of Receipt MM / DD / YYYY
 05 / 20 / 2018
 Amount of Each Receipt this Period 1000.00
 Memo Item

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

3000.00

201807200200638865

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

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

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NAME OF COMMITTEE (In Full) **PAINTER MINNESOTA**

A. Full Name (Last, First, Middle Initial)
POLSKY, ALEXANDER

Mailing Address
P.O. BOX 2110

City **WHITE SALMON** State **WA** Zip Code **98672**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) **2018**

Election Cycle-to-Date **2000.00**

Date of Receipt
05 / 05 / 2018

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
BORGERDING, JEAN

Mailing Address
509 8TH AVE NE

City **MINNEAPOLIS** State **MN** Zip Code **55413**

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

Name of Employer **NONE** Occupation **HOMEMAKER**

Receipt For:
 Primary General
 Other (specify) **2018**

Election Cycle-to-Date **2000.00**

Date of Receipt
05 / 19 / 2018

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
YAGER, SEENA

Mailing Address
21382 HEATH AVE CT N

City **FOREST LAKE** State **MN** Zip Code **55025**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) **2018**

Election Cycle-to-Date **230.00**

Date of Receipt
04 / 26 / 2018

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional) **2050.00**

TOTAL This Period (last page this line number only) **2050.00**

201807200200838866

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

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NAME OF COMMITTEE (In Full) **PAINTER MINNESOTA**

A. Full Name (Last, First, Middle Initial) **ELLENOFF, DOUGLAS**

Mailing Address **1136 5TH AVE**

City **NEW YORK** State **NY** Zip Code **10128**

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

Name of Employer **ELLENOFF GROSSMAN** Occupation **LAWYER**

Receipt For: Primary General Other (specify) **2018**

Election Cycle-to-Date **1000.00**

Date of Receipt **06 / 02 / 2018**

Amount of Each Receipt this Period **1000.00**

Memo Item

B. Full Name (Last, First, Middle Initial) **BARKER, JOEL**

Mailing Address **P.O. BOX 7037**

City **ST. PAUL** State **MN** Zip Code **55107**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: Primary General Other (specify) **2018**

Election Cycle-to-Date **1000.00**

Date of Receipt **06 / 29 / 2018**

Amount of Each Receipt this Period **1000.00**

Memo Item

C. Full Name (Last, First, Middle Initial) **MAIER, CHARLES**

Mailing Address **60 LARCHWOOD DRIVE**

City **CAMBRIDGE** State **MA** Zip Code **02138**

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

Name of Employer **HARVARD UNIVERSITY** Occupation **PROFESSOR**

Receipt For: Primary General Other (specify) **2018**

Election Cycle-to-Date **500.00**

Date of Receipt **04 / 23 / 2018**

Amount of Each Receipt this Period **500.00**

Memo Item

SUBTOTAL of Receipts This Page (optional) **2500.00**

TOTAL This Period (last page this line number only)

201807200200638867

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

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NAME OF COMMITTEE (In Full) **Painter Minnesota**

A. Full Name (Last, First, Middle Initial)
GREDIAGIN, ROBIN

Mailing Address
2251 AGATE ST

City **EUGENE** State **OR** Zip Code **97403**

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

Name of Employer **SELF** Occupation **SOFTWARE ANALYST**

Receipt For:
 Primary General
 Other (specify) **2018**

Election Cycle-to-Date **750.00**

Date of Receipt
05 / 03 / 2018

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
GREDIAGIN, ROBIN

Mailing Address
2251 AGATE ST

City **EUGENE** State **OR** Zip Code **97403**

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

Name of Employer **SELF** Occupation **SOFTWARE ANALYST**

Receipt For:
 Primary General
 Other (specify) **2018**

Election Cycle-to-Date **750.00**

Date of Receipt
05 / 06 / 2018

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
GREDIAGIN, ROBIN

Mailing Address
2251 AGATE ST

City **EUGENE** State **OR** Zip Code **97403**

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

Name of Employer **SELF** Occupation **SOFTWARE ANALYST**

Receipt For:
 Primary General
 Other (specify) **2018**

Election Cycle-to-Date **750.00**

Date of Receipt
06 / 30 / 2018

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional) ▶

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

750.00

750.00

201807200200038868

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

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

FOR LINE NUMBER: PAGE 14 OF

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

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NAME OF COMMITTEE (In Full) PAINTER MINNESOTA

A. Full Name (Last, First, Middle Initial)
JURAN, SHEILA

Mailing Address
601 BUSHAWAY RD

City WAYZATA State MN Zip Code 55391

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

Name of Employer SELF Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) 2018

Election Cycle-to-Date 750.00

Date of Receipt
MM / DD / YYYY
06 / 20 / 2018

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
JURAN, SHEILA

Mailing Address
601 BUSHAWAY RD

City WAYZATA State MN Zip Code 55391

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

Name of Employer SELF Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) 2018

Election Cycle-to-Date 750.00

Date of Receipt
MM / DD / YYYY
06 / 29 / 2018

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
WRIGHT, JULIE, M

Mailing Address
5228 RENAISSANCE AVE

City SAN DIEGO State CA Zip Code 92122

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

Name of Employer SELF Occupation STRATEGIC ADVISOR

Receipt For:
 Primary General
 Other (specify) 2018

Election Cycle-to-Date 350.00

Date of Receipt
MM / DD / YYYY
06 / 29 / 2018

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional) ▶

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

850.00

201807200200638869

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF
	<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) **PAINTER MINNESOTA**

A. Full Name (Last, First, Middle Initial)
DAVISON, CLAUDIA

Mailing Address
2031 OTIS DRIVE, APT C

City **ALAMEDA** State **CA** Zip Code **94501**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼ **2018**

Election Cycle-to-Date ▼ **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 30 / 2018

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
GOTTSTEIN, SANDY

Mailing Address
P.O. BOX 111818

City **ANCHORAGE** State **AK** Zip Code **99511**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼ **2018**

Election Cycle-to-Date ▼ **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 30 / 2018

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
GOTTSTEIN, SANDY

Mailing Address
P.O. BOX 111818

City **ANCHORAGE** State **AK** Zip Code **99511**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼ **2018**

Election Cycle-to-Date ▼ **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 29 / 2018

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ **750.00**

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

201807200200638870

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

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

FOR LINE NUMBER: PAGE 16 OF

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

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

NAME OF COMMITTEE (In Full) **PAINTER MINNESOTA**

A. Full Name (Last, First, Middle Initial)
PAINTER, JUDGE MARK

Mailing Address
15 E 8TH ST

City **CINCINNATI** State **OH** Zip Code **45202**

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

Name of Employer **SELF** Occupation **LAWYER**

Receipt For:
 Primary General
 Other (specify) **2018**

Election Cycle-to-Date **2018**

Date of Receipt
05 / 01 / 2018

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
SALTER, MALCOLM

Mailing Address
18 TRAILL ST, APT 1

City **CAMBRIDGE** State **MA** Zip Code **02138**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) **2018**

Election Cycle-to-Date **2018**

Date of Receipt
05 / 02 / 2018

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
NEWMAN, SHEILA

Mailing Address
306 GREAT FALLS ST

City **FALLS CHURCH** State **VA** Zip Code **22046**

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

Name of Employer **NEW EDITIONS CONSULTING** Occupation **OWNER**

Receipt For:
 Primary General
 Other (specify) **2018**

Election Cycle-to-Date **2018**

Date of Receipt
05 / 06 / 2018

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

1500.00

201807200200838871

SCHEDULE A (FEC Form 3)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)

PAGE 17 OF

<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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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) **PAINTER MINNESOTA**

A. Full Name (Last, First, Middle Initial) **BOK, GEOFFREY**

Mailing Address **169 WALNUT ST, UNIT 6**

City **DORCHESTER** State **MA** Zip Code **02122**

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

Name of Employer **STONEMAN, CHANDLER, & MILLER** Occupation **ATTORNEY**

Receipt For: Primary General Other (specify) **2018**

Election Cycle-to-Date **500.00**

Date of Receipt **05 / 17 / 2018**

Amount of Each Receipt this Period **500.00**

Memo Item

B. Full Name (Last, First, Middle Initial) **MORGAN, SHEILA**

Mailing Address **1307 MOUNT CURVE AVE**

City **MINNEAPOLIS** State **MN** Zip Code **55403**

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

Name of Employer **NONE** Occupation **NONE**

Receipt For: Primary General Other (specify) **2018**

Election Cycle-to-Date **500.00**

Date of Receipt **05 / 18 / 2018**

Amount of Each Receipt this Period **500.00**

Memo Item

C. Full Name (Last, First, Middle Initial) **SHEN, FRANCIS**

Mailing Address **929 DARTMOUTH AVE SE**

City **MINNEAPOLIS** State **MN** Zip Code **55414**

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

Name of Employer **UNIVERSITY OF MINNESOTA** Occupation **PROFESSOR**

Receipt For: Primary General Other (specify) **2018**

Election Cycle-to-Date **500.00**

Date of Receipt **05 / 27 / 2018**

Amount of Each Receipt this Period **500.00**

Memo Item

SUBTOTAL of Receipts This Page (optional) **1500.00**

TOTAL This Period (last page this line number only)

1500.00

201807200200630072

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

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

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NAME OF COMMITTEE (In Full) **PAINTER MINNESOTA**

A. Full Name (Last, First, Middle Initial)
LEINEWEBER, SARAH

Mailing Address
28 HARVEST CT

City **GREENVILLE** State **SC** Zip Code **29601**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) **2018**

Election Cycle-to-Date **500.00**

Date of Receipt
05 / 30 / 2018

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
LEINEWEBER, SARAH

Mailing Address
28 HARVEST CT

City **GREENVILLE** State **SC** Zip Code **29601**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) **2018**

Election Cycle-to-Date **500.00**

Date of Receipt
06 / 29 / 2018

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
GODLEY, NICHOLAS

Mailing Address
350 ALBANY ST, APT 12D

City **NEW YORK** State **NY** Zip Code **10280**

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

Name of Employer **MCH INC.** Occupation **PRESIDENT**

Receipt For:
 Primary General
 Other (specify) **2018**

Election Cycle-to-Date **500.00**

Date of Receipt
06 / 06 / 2018

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional) ▶

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

1000.00

201807200200038873

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF			
	<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) **PAINTER MINNESOTA**

A. Full Name (Last, First, Middle Initial) **PRICE, SCOTT**

Mailing Address **456 MONTGOMERY ST, SUITE 1040**

City **SAN FRANCISCO** State **CA** Zip Code **94104**

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

Name of Employer **SELF** Occupation **CPA**

Receipt For:
 Primary General
 Other (specify) **2018**

Election Cycle-to-Date **500.00**

Date of Receipt **06 / 07 / 2018**

Amount of Each Receipt this Period **500.00**

Memo Item

B. Full Name (Last, First, Middle Initial) **HEANEY, MARK**

Mailing Address **2520 WELLINGTON CIR**

City **MINNETONKA** State **MN** Zip Code **55391**

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

Name of Employer **HEANEY LAW FIRM, LLC** Occupation **ATTORNEY**

Receipt For:
 Primary General
 Other (specify) **2018**

Election Cycle-to-Date **500.00**

Date of Receipt **06 / 26 / 2018**

Amount of Each Receipt this Period **500.00**

Memo Item

C. Full Name (Last, First, Middle Initial) **ANDERSON, FREDERICK**

Mailing Address **1812 N WASHINGTON ST**

City **WHEATON** State **IL** Zip Code **60187**

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

Name of Employer **HPE** Occupation **TECHNOLOGY**

Receipt For:
 Primary General
 Other (specify) **2018**

Election Cycle-to-Date **500.00**

Date of Receipt **06 / 27 / 2018**

Amount of Each Receipt this Period **500.00**

Memo Item

SUBTOTAL of Receipts This Page (optional) **1500.00**

TOTAL This Period (last page this line number only) **1500.00**

1500.00

201807200200938874

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

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

FOR LINE NUMBER: PAGE 20 OF

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

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NAME OF COMMITTEE (In Full) **PAINTER MINNESOTA**

A. Full Name (Last, First, Middle Initial) **LUCICH, DANIEL**

Mailing Address **6214 WINSTON DR**

City **BETHESDA** State **MD** Zip Code **20817**

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

Name of Employer **NONE** Occupation **NONE**

Receipt For:
 Primary General
 Other (specify) **2018**

Election Cycle-to-Date **350.00**

Date of Receipt **04 / 29 / 2018**

Amount of Each Receipt this Period **250.00**

Memo Item

B. Full Name (Last, First, Middle Initial) **LUCICH, DANIEL**

Mailing Address **6214 WINSTON DR**

City **BETHESDA** State **MD** Zip Code **20817**

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

Name of Employer **NONE** Occupation **NONE**

Receipt For:
 Primary General
 Other (specify) **2018**

Election Cycle-to-Date **350.00**

Date of Receipt **06 / 29 / 2018**

Amount of Each Receipt this Period **100.00**

Memo Item

C. Full Name (Last, First, Middle Initial) **BOGOLUB, LARRY**

Mailing Address **1424 LINCOLN AVE**

City **ST. PAUL** State **MN** Zip Code **55105**

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

Name of Employer **MINNEAPOLIS PUBLIC SCHOOLS** Occupation **TEACHER**

Receipt For:
 Primary General
 Other (specify) **2018**

Election Cycle-to-Date **350.00**

Date of Receipt **04 / 30 / 2018**

Amount of Each Receipt this Period **250.00**

Memo Item

SUBTOTAL of Receipts This Page (optional) **600.00**

TOTAL This Period (last page this line number only)

201807200200638875

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

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

FOR LINE NUMBER: PAGE 21 OF

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

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NAME OF COMMITTEE (In Full) **PAINTER MINNESOTA**

A. Full Name (Last, First, Middle Initial)
BOGOLUB, LARRY

Mailing Address
1424 LINCOLN AVE

City **ST. PAUL** State **MN** Zip Code **55105**

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

Name of Employer **MINNEAPOLIS PUBLIC SCHOOLS** Occupation **TEACHER**

Receipt For:
 Primary General
 Other (specify) **2018**

Election Cycle-to-Date **350.00**

Date of Receipt
06 / 28 / 2018

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name (Last, First, Middle Initial)
FAIRCHILD, VALERIE

Mailing Address
110 W SAN FRANCISCO ST

City **SANTA FE** State **NM** Zip Code **87501**

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

Name of Employer **1953** Occupation **JEWELER**

Receipt For:
 Primary General
 Other (specify) **2018**

Election Cycle-to-Date **300.00**

Date of Receipt
06 / 29 / 2018

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ANDREWS, PETER

Mailing Address
235 ROLLINGWOOD DR

City **NORTH KINGSTON** State **RI** Zip Code **02852**

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

Name of Employer **HRM INC.** Occupation **BOAT CAPTAIN**

Receipt For:
 Primary General
 Other (specify) **2018**

Election Cycle-to-Date **300.00**

Date of Receipt
06 / 07 / 2018

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional) **300.00**

TOTAL This Period (last page this line number only) **300.00**

300.00

300.00

201807200200638876

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF			
	<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) **PAINTER MINNESOTA**

A. Full Name (Last, First, Middle Initial) **GALLAGHER, TOM**

Mailing Address **3742 COUNTY ROSE LANE**

City **APOPKA** State **FL** Zip Code **32703**

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

Name of Employer **SELF** Occupation **RESTAURATEUR**

Receipt For: Primary General Other (specify) **2018**

Election Cycle-to-Date **300.00**

Date of Receipt **06 / 28 / 2018**

Amount of Each Receipt this Period **100.00**

Memo Item

B. Full Name (Last, First, Middle Initial) **HORNSTEIN, CHARLES**

Mailing Address **9525 CABBAGE RUN RD**

City **FREDERICK** State **MD** Zip Code **21701**

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

Name of Employer **NONE** Occupation **NONE**

Receipt For: Primary General Other (specify) **2018**

Election Cycle-to-Date **300.00**

Date of Receipt **06 / 30 / 2018**

Amount of Each Receipt this Period **100.00**

Memo Item

C. Full Name (Last, First, Middle Initial) **PYNE, ROY**

Mailing Address **45 CENTER CT**

City **COLCHESTER** State **CT** Zip Code **06415**

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

Name of Employer **SAF GARD SAFETY SHOE CO.** Occupation **SALES**

Receipt For: Primary General Other (specify) **2018**

Election Cycle-to-Date **300.00**

Date of Receipt **06 / 07 / 2018**

Amount of Each Receipt this Period **300.00**

Memo Item

SUBTOTAL of Receipts This Page (optional) **500.00**

TOTAL This Period (last page this line number only) **500.00**

201807200200638877

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

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

FOR LINE NUMBER: PAGE 23 OF

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

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

NAME OF COMMITTEE (In Full) **PAINTER MINNESOTA**

Full Name (Last, First, Middle Initial)
KODA, DAVID

A. Mailing Address
15721 S WESTERN AVE, APT 210

City **GARDENA** State **CA** Zip Code **90247**

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

Name of Employer **DAVID K KODA CPA** Occupation **ACCOUNTANT**

Receipt For:
 Primary General
 Other (specify) 2018

Election Cycle-to-Date **300.00**

Date of Receipt
06 / 18 / 2018

Amount of Each Receipt this Period
300.00

Memo Item

Full Name (Last, First, Middle Initial)
AUCKENTHALER, CLAIRE

B. Mailing Address
1320 W LAKE ST

City **MINNEAPOLIS** State **MN** Zip Code **55408**

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

Name of Employer **NONE** Occupation **NONE**

Receipt For:
 Primary General
 Other (specify) 2018

Election Cycle-to-Date **300.00**

Date of Receipt
06 / 24 / 2018

Amount of Each Receipt this Period
300.00

Memo Item

Full Name (Last, First, Middle Initial)
SCHALLY, JENNIFER

C. Mailing Address
1104 CREEKSIDE CIR

City **STILLWATER** State **MN** Zip Code **55082**

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

Name of Employer **NONE** Occupation **NONE**

Receipt For:
 Primary General
 Other (specify) 2018

Election Cycle-to-Date **300.00**

Date of Receipt
06 / 30 / 2018

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional) ▶

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

700.00

201807200200638878

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

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

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

NAME OF COMMITTEE (In Full) **PAINTE MINNESOTA**

A. Full Name (Last, First, Middle Initial) **HESMONDHALGH, LISA**

Mailing Address **536 CALIBRE ST**

City **FAIRHOPE** State **AL** Zip Code **36532**

Date of Receipt **MM / DD / YYYY**
04 / 29 / 2018

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

Amount of Each Receipt this Period **250.00**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: Primary General
 Other (specify) **2018**

Election Cycle-to-Date **250.00**

Memo Item

B. Full Name (Last, First, Middle Initial) **MARX, TONI**

Mailing Address **9225 FOX MEADOW LANE**

City **POTOMAC** State **MD** Zip Code **20854**

Date of Receipt **MM / DD / YYYY**
04 / 29 / 2018

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

Amount of Each Receipt this Period **250.00**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: Primary General
 Other (specify) **2018**

Election Cycle-to-Date **250.00**

Memo Item

C. Full Name (Last, First, Middle Initial) **SCHWEITZ, JOHN**

Mailing Address **1212 4TH ST SE, APT 621**

City **WASHINGTON** State **DC** Zip Code **20003**

Date of Receipt **MM / DD / YYYY**
04 / 30 / 2018

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

Amount of Each Receipt this Period **250.00**

Name of Employer **US NAVY** Occupation **JAG**

Receipt For: Primary General
 Other (specify) **2018**

Election Cycle-to-Date **250.00**

Memo Item

SUBTOTAL of Receipts This Page (optional) **750.00**

TOTAL This Period (last page this line number only) **750.00**

201807200209638879

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF
	<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) **PAINTE MINNESOTA**

A. Full Name (Last, First, Middle Initial)
CLARK, EVELYN

Mailing Address
4095 55TH ST
City **VERO BEACH** State **FL** Zip Code **32967**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼ 2018

Election Cycle-to-Date **250.00**

Date of Receipt **06 / 29 / 2018**

Amount of Each Receipt this Period **100.00**

Memo Item

B. Full Name (Last, First, Middle Initial)
BECKERMAN, JOHN

Mailing Address
63 FOXWOOD DR
City **MOORESTOWN** State **NJ** Zip Code **08057**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼ 2018

Election Cycle-to-Date **250.00**

Date of Receipt **04 / 30 / 2018**

Amount of Each Receipt this Period **250.00**

Memo Item

C. Full Name (Last, First, Middle Initial)
BOWDEN, DARREN

Mailing Address
55 EAGLE ROCK WAY
City **MONTCLAIR** State **NJ** Zip Code **07042**

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

Name of Employer **CALVIN KLEIN** Occupation **RETAIL EXECUTIVE**

Receipt For:
 Primary General
 Other (specify) ▼ 2018

Election Cycle-to-Date **500.00**

Date of Receipt **05 / 01 / 2018**

Amount of Each Receipt this Period **250.00**

Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ **600.00**

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

201807200200638889

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

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

FOR LINE NUMBER: PAGE 26 OF

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

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NAME OF COMMITTEE (In Full) **PAINTE MINNESOTA**

A. Full Name (Last, First, Middle Initial)
HUMPHREYS, ROBERTA

Mailing Address
594 POND VIEW DR

City **MENDOTA HEIGHTS** State **MN** Zip Code **55120**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼ **2018**

Election Cycle-to-Date **250.00**

Date of Receipt
06 / 30 / 2018

Amount of Each Receipt this Period
50.00

Memo Item

B. Full Name (Last, First, Middle Initial)
BECK, GEORGE

Mailing Address
3118 W LAKE ST, APT 623

City **MINNEAPOLIS** State **MN** Zip Code **55416**

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

Name of Employer **SELF** Occupation **ARBITRATOR**

Receipt For:
 Primary General
 Other (specify) ▼ **2018**

Election Cycle-to-Date **250.00**

Date of Receipt
06 / 29 / 2018

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ESHLEMAN, CAROLYN

Mailing Address
3833 DUNBAR CT

City **BROOKLYN PARK** State **MN** Zip Code **55443**

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

Name of Employer **SELF** Occupation **LAWYER**

Receipt For:
 Primary General
 Other (specify) ▼ **2018**

Election Cycle-to-Date **250.00**

Date of Receipt
05 / 03 / 2018

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ **400.00**

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

201807200200630001

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF
	<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) **Painter Minnesota**

A. Full Name (Last, First, Middle Initial) **BENDITT, MARYANN**

Mailing Address **2 CIRCLE WEST**

City **EDINA** State **MN** Zip Code **55436**

Date of Receipt **06 / 30 / 2018**

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

Amount of Each Receipt this Period **50.00**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: Primary General Other (specify) **2018**

Election Cycle-to-Date **250.00**

Memo Item

B. Full Name (Last, First, Middle Initial) **DARROW, ELIZABETH**

Mailing Address **13 VIA DEL ZORRO**

City **CARMEL VALLEY** State **CA** Zip Code **93924**

Date of Receipt **05 / 03 / 2018**

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

Amount of Each Receipt this Period **250.00**

Name of Employer **SELF** Occupation **HEALTH CARE CONSULTANT**

Receipt For: Primary General Other (specify) **2018**

Election Cycle-to-Date **250.00**

Memo Item

C. Full Name (Last, First, Middle Initial) **COREY, GEORGE**

Mailing Address **5614 CONNECTICUT AVE NW, APT 362**

City **WASHINGTON** State **DC** Zip Code **20015**

Date of Receipt **05 / 05 / 2018**

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

Amount of Each Receipt this Period **250.00**

Name of Employer **CGS FINANCIAL SERVICES LLC** Occupation **LAWYER**

Receipt For: Primary General Other (specify) **2018**

Election Cycle-to-Date **250.00**

Memo Item

SUBTOTAL of Receipts This Page (optional) **550.00**

TOTAL This Period (last page this line number only)

201807200200630002

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

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

FOR LINE NUMBER: PAGE 28 OF

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

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NAME OF COMMITTEE (In Full) **PAINTE MINNESOTA**

Full Name (Last, First, Middle Initial)
A. PETRAS, EDWARD

Mailing Address
P.O. BOX 1293

City **NAPLES** State **FL** Zip Code **34106**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼ **2018**

Election Cycle-to-Date **250.00**

Date of Receipt
05 / 06 / 2018

Amount of Each Receipt this Period
250.00

Memo Item

Full Name (Last, First, Middle Initial)
B. APPEL, LAURA

Mailing Address
142 TEMELE CIR

City **SONOMA** State **CA** Zip Code **95476**

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

Name of Employer **SELF** Occupation **ACCOUNTANT**

Receipt For:
 Primary General
 Other (specify) ▼ **2018**

Election Cycle-to-Date **250.00**

Date of Receipt
05 / 06 / 2018

Amount of Each Receipt this Period
250.00

Memo Item

Full Name (Last, First, Middle Initial)
C. SUNSHINE, DIANA

Mailing Address
105 N BALSAMINA

City **PORTOLA VALLEY** State **CA** Zip Code **94028**

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

Name of Employer **COURSERA** Occupation **MARKETING**

Receipt For:
 Primary General
 Other (specify) ▼ **2018**

Election Cycle-to-Date **250.00**

Date of Receipt
05 / 08 / 2018

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional) ▶

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

750.00

201807200200630003

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF
	<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) **Painter Minnesota**

A. Full Name (Last, First, Middle Initial)
POSNER, ANDREW

Mailing Address
90 BORDER ST

City **DEDHAM** State **MA** Zip Code **02026**

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

Name of Employer **CAPITOL GOOD FUND** Occupation **NONPROFIT CEO**

Receipt For:
 Primary General
 Other (specify) **2018**

Election Cycle-to-Date **250.00**

Date of Receipt
 MM / DD / YYYY
05 / 10 / 2018

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
COLLIER, SOPHIA

Mailing Address
1 HARBOR DR, SUITE 209

City **SAUSALITO** State **CA** Zip Code **94965**

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

Name of Employer **SELF** Occupation **INVESTOR**

Receipt For:
 Primary General
 Other (specify) **2018**

Election Cycle-to-Date **250.00**

Date of Receipt
 MM / DD / YYYY
05 / 16 / 2018

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ANDERSON, LAURENCE

Mailing Address
4301 YOSEMITE WAY

City **LOS ANGELES** State **CA** Zip Code **90065**

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

Name of Employer **PAPAYA PAYMENTS** Occupation **SOFTWARE ENGINEER**

Receipt For:
 Primary General
 Other (specify) **2018**

Election Cycle-to-Date **250.00**

Date of Receipt
 MM / DD / YYYY
05 / 21 / 2018

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional) ▶

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

750.00

201807200200638804

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

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

FOR LINE NUMBER: (check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15
 PAGE 30 OF

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NAME OF COMMITTEE (In Full) **Painter Minnesota**

Full Name (Last, First, Middle Initial)

A. WARNOCK, DAVID

Mailing Address

801 KEY HWY, APT 131

City State Zip Code

BALTIMORE MD 21230

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

Name of Employer Occupation

CAMDEN PARTNERS VENTURE CAPITAL

Receipt For: Election Cycle-to-Date

Primary General

Other (specify) 2018

250.00

Date of Receipt

MM / DD / YYYY
05 / 24 / 2018

Amount of Each Receipt this Period

250.00

Memo Item

Full Name (Last, First, Middle Initial)

B. WATT, LEEANNE

Mailing Address

766 E COLORADO BLVD, SUITE 203

City State Zip Code

PASADENA CA 91101

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

Name of Employer Occupation

SELF PSYCHOLOGIST

Receipt For: Election Cycle-to-Date

Primary General

Other (specify) 2018

250.00

Date of Receipt

MM / DD / YYYY
05 / 28 / 2018

Amount of Each Receipt this Period

250.00

Memo Item

Full Name (Last, First, Middle Initial)

C. KERBAUGH, STEVEN

Mailing Address

700 WASHINGTON AVE N, UNIT 525

City State Zip Code

MINNEAPOLIS MN 55401

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

Name of Employer Occupation

ANTHONY OSTLUND BAER & LOUWAGIE ATTORNEY

Receipt For: Election Cycle-to-Date

Primary General

Other (specify) 2018

250.00

Date of Receipt

MM / DD / YYYY
05 / 30 / 2018

Amount of Each Receipt this Period

250.00

Memo Item

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

750.00

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

201807200200638885

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

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NAME OF COMMITTEE (In Full) **PAINTE MINNESOTA**

A. Full Name (Last, First, Middle Initial)
WORRALL, ROBERT

Mailing Address
4901 SUNNYSIDE RD

City **EDINA** State **MN** Zip Code **55424**

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

Name of Employer **HONEYWELL** Occupation **PATENT ATTORNEY**

Receipt For:
 Primary General
 Other (specify) ▼ **2018**

Election Cycle-to-Date **250.00**

Date of Receipt
 MM / DD / YYYY
05 / 31 / 2018

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MEIER, GERALD

Mailing Address
2613 JOPPA AVE S

City **SAINT LOUIS PARK** State **MN** Zip Code **55416**

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

Name of Employer **E-COMMWORKS** Occupation **OWNER**

Receipt For:
 Primary General
 Other (specify) ▼ **2018**

Election Cycle-to-Date **250.00**

Date of Receipt
 MM / DD / YYYY
06 / 01 / 2018

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
LYMAN, R.J.

Mailing Address
852 HALE ST

City **BOSTON** State **MA** Zip Code **01915**

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

Name of Employer **ML STRATEGIES** Occupation **CONSULTANT**

Receipt For:
 Primary General
 Other (specify) ▼ **2018**

Election Cycle-to-Date **250.00**

Date of Receipt
 MM / DD / YYYY
06 / 05 / 2018

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ **750.00**

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

201807200200638886

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

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

FOR LINE NUMBER: PAGE 32 OF

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

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NAME OF COMMITTEE (In Full) **PAINTE MINNESOTA**

A. Full Name (Last, First, Middle Initial)
BUTKS, DORI

Mailing Address
115 SOUTH LANE

City **MORELAND HILLS** State **OH** Zip Code **44022**

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

Name of Employer **NONE** Occupation **NONE**

Receipt For:
 Primary General
 Other (specify) ▼ **2018**

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
06 / 06 / 2018

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
WYLAND, DONALD

Mailing Address
15 2ND AVE SE

City **NEW BRIGHTON** State **MN** Zip Code **55112**

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

Name of Employer **NONE** Occupation **NONE**

Receipt For:
 Primary General
 Other (specify) ▼ **2018**

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
06 / 14 / 2018

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
PAINTE, MARION

Mailing Address
30 WHARF LANE

City **YARMOUTH PORT** State **MA** Zip Code **02675**

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

Name of Employer **NONE** Occupation **NONE**

Receipt For:
 Primary General
 Other (specify) ▼ **2018**

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
06 / 15 / 2018

Amount of Each Receipt this Period
250.00

Memo Item

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

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

750.00

201807200200638887

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

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

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NAME OF COMMITTEE (In Full) **PAINTE MINNESOTA**

Full Name (Last, First, Middle Initial)
PETERSON, MICHELLE

A. Mailing Address
2908 MCCOMAS AVE

City **KENSINGTON** State **MD** Zip Code **20895**

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

Name of Employer **FEDERAL DEFENDER** Occupation **ATTORNEY**

Receipt For:
 Primary General
 Other (specify) ▼ 2018

Election Cycle-to-Date **250.00**

Date of Receipt
 MM / DD / YYYY
06 / 15 / 2018

Amount of Each Receipt this Period
250.00

Memo Item

Full Name (Last, First, Middle Initial)
ELLEDGE, MELINDA

B. Mailing Address
9120 64TH ST N

City **STILLWATER** State **MN** Zip Code **55082**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼ 2018

Election Cycle-to-Date **250.00**

Date of Receipt
 MM / DD / YYYY
06 / 19 / 2018

Amount of Each Receipt this Period
250.00

Memo Item

Full Name (Last, First, Middle Initial)
ANDERSON, DEBORAH

C. Mailing Address
5121 E CHERYL PKWY, APT 319

City **FITCHBURG** State **WI** Zip Code **53711**

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

Name of Employer **NONE** Occupation **NONE**

Receipt For:
 Primary General
 Other (specify) ▼ 2018

Election Cycle-to-Date **250.00**

Date of Receipt
 MM / DD / YYYY
06 / 19 / 2018

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional) ▶

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

750.00

201807200200638888

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

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

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NAME OF COMMITTEE (In Full) **PAINTE MINNESOTA**

A. Full Name (Last, First, Middle Initial)
THAXTON, MICHAEL

Mailing Address
2208 ELIZABETH AVE

City **WINSTON SALEM** State **NC** Zip Code **27103**

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

Name of Employer **NONE** Occupation **NONE**

Receipt For:
 Primary General
 Other (specify) ▼ **2018**

Election Cycle-to-Date **250.00**

Date of Receipt
 MM / DD / YYYY
06 / 19 / 2018

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
GUGGENHEIMER, NICHOLA

Mailing Address
1703 NE FALLS DR

City **ISSAQUAH** State **WA** Zip Code **98029**

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

Name of Employer **NONE** Occupation **NONE**

Receipt For:
 Primary General
 Other (specify) ▼ **2018**

Election Cycle-to-Date **250.00**

Date of Receipt
 MM / DD / YYYY
06 / 20 / 2018

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
SLOAN, KATHERINE

Mailing Address
650 LOVELL AVE

City **MILL VALLEY** State **CA** Zip Code **94941**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼ **2018**

Election Cycle-to-Date **250.00**

Date of Receipt
 MM / DD / YYYY
06 / 25 / 2018

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ **750.00**

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

201807200200638889

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

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

FOR LINE NUMBER: (check only one)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 35 OF

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) **Painter Minnesota**

Full Name (Last, First, Middle Initial)
A. LYNCH, CHRISTINA

Mailing Address
 78 VALLEY RD
 City: **NEEDHAM** State: **MA** Zip Code: **02492**

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

Name of Employer: **INTEX** Occupation: **MANAGER**

Receipt For:
 Primary General
 Other (specify) ▼ 2018

Election Cycle-to-Date
 250.00

Date of Receipt
 MM / DD / YYYY
06 / 26 / 2018

Amount of Each Receipt this Period
 250.00

Memo Item

Full Name (Last, First, Middle Initial)
B. CEDERBERG, LAUREL

Mailing Address
 534 OWASSO HILLS DR
 City: **ST. PAUL** State: **MN** Zip Code: **55113**

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

Name of Employer: **HEALTH PARTNERS** Occupation: **PHYSICIAN**

Receipt For:
 Primary General
 Other (specify) ▼ 2018

Election Cycle-to-Date
 250.00

Date of Receipt
 MM / DD / YYYY
06 / 28 / 2018

Amount of Each Receipt this Period
 250.00

Memo Item

Full Name (Last, First, Middle Initial)
C. GUSLANDER, NAN

Mailing Address
 5501A BALCONES DR, APT 175
 City: **AUSTIN** State: **TX** Zip Code: **78731**

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

Name of Employer: **RETIRED** Occupation: **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼ 2018

Election Cycle-to-Date
 250.00

Date of Receipt
 MM / DD / YYYY
06 / 28 / 2018

Amount of Each Receipt this Period
 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional) ▶

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

750.00

201807200200638890

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

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

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

NAME OF COMMITTEE (In Full) **Painter Minnesota**

A. Full Name (Last, First, Middle Initial) **LINDSLEY, ELIZABETH**

Mailing Address **517 11TH ST**

City **SANTA MONICA** State **CA** Zip Code **90402**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: Primary General Other (specify) **2018**

Election Cycle-to-Date **500.00**

Date of Receipt **04 / 24 / 2018**

Amount of Each Receipt this Period **500.00**

Memo Item

B. Full Name (Last, First, Middle Initial) **SUILMAN, MARY**

Mailing Address **215 10TH AVE S, UNIT 714**

City **MINNEAPOLIS** State **MN** Zip Code **55415**

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

Name of Employer **NONE** Occupation **NONE**

Receipt For: Primary General Other (specify) **2018**

Election Cycle-to-Date **250.00**

Date of Receipt **06 / 08 / 2018**

Amount of Each Receipt this Period **250.00**

Memo Item

C. Full Name (Last, First, Middle Initial) **VAALER, KATHERINE**

Mailing Address **221 JANALYN CIR**

City **GOLDEN VALLEY** State **MN** Zip Code **55416**

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

Name of Employer **CAMP!** Occupation **TREASURER**

Receipt For: Primary General Other (specify) **2018**

Election Cycle-to-Date **300.00**

Date of Receipt **05 / 25 / 2018**

Amount of Each Receipt this Period **300.00**

Memo Item

SUBTOTAL of Receipts This Page (optional) **1050.00**

TOTAL This Period (last page this line number only) **1050.00**

201807200200638891

**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)

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

PAGE 37 OF

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NAME OF COMMITTEE (In Full) **Painter Minnesota**

Full Name (Last, First, Middle Initial)
A. BENT, ELIZABETH

Mailing Address
2423 E 2ND ST

City **DULUTH** State **MN** Zip Code **55812**

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

Name of Employer **COLLEGE OF ST. SCHOLASTICA** Occupation **ADJUNCT PROFESSOR**

Receipt For:
 Primary General
 Other (specify) **2018**

Election Cycle-to-Date **300.00**

Date of Receipt **06 / 13 / 2018**

Amount of Each Receipt this Period **100.00**

Memo Item

Full Name (Last, First, Middle Initial)
B. MCGRATH, CATHARINE

Mailing Address
313 WEST 117TH ST, APT 6B

City **NEW YORK** State **NY** Zip Code **10026**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) **2018**

Election Cycle-to-Date **325.00**

Date of Receipt **06 / 24 / 2018**

Amount of Each Receipt this Period **200.00**

Memo Item

Full Name (Last, First, Middle Initial)
C. CARSON, DENNIS

Mailing Address
23509 3RD AVE

City **FLORALA** State **AL** Zip Code **36442**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) **2018**

Election Cycle-to-Date **500.00**

Date of Receipt **06 / 14 / 2018**

Amount of Each Receipt this Period **300.00**

Memo Item

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

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

600.00

201807200200638892

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

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

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NAME OF COMMITTEE (In Full) **Painter Minnesota**

A. Full Name (Last, First, Middle Initial) **HILL, CLAIRE**

Mailing Address **79 MACKUBIN ST**

City **ST. PAUL** State **MN** Zip Code **55102**

Date of Receipt **05 / 27 / 2018**

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

Amount of Each Receipt this Period **500.00**

Name of Employer **UNIVERSITY OF MINNESOTA** Occupation **PROFESSOR**

Receipt For: Primary General
 Other (specify) **2018**

Election Cycle-to-Date **500.00**

Memo Item

B. Full Name (Last, First, Middle Initial) **Vaaler, Bryn**

Mailing Address **4217 DREW AVE S**

City **MINNEAPOLIS** State **MN** Zip Code **55410**

Date of Receipt **05 / 27 / 2018**

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

Amount of Each Receipt this Period **250.00**

Name of Employer **DORSEY & WHITNEY** Occupation **ATTORNEY**

Receipt For: Primary General
 Other (specify) **2018**

Election Cycle-to-Date **500.00**

Memo Item

C. Full Name (Last, First, Middle Initial) **Vaaler, Bryn**

Mailing Address **4217 DREW AVE S**

City **MINNEAPOLIS** State **MN** Zip Code **55410**

Date of Receipt **06 / 21 / 2018**

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

Amount of Each Receipt this Period **250.00**

Name of Employer **DORSEY & WHITNEY** Occupation **ATTORNEY**

Receipt For: Primary General
 Other (specify) **2018**

Election Cycle-to-Date **500.00**

Memo Item

SUBTOTAL of Receipts This Page (optional) **1000.00**

TOTAL This Period (last page this line number only)

201807200200638893

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

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

FOR LINE NUMBER: PAGE 39 OF

(check only one)

11a 11b 11c 11d

12 13a 13b 14 15

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NAME OF COMMITTEE (In Full) PAINTER MINNESOTA

Full Name (Last, First, Middle Initial)
A. WALDFOGEL, JOEL

Mailing Address
1720 HUMBOLDT AVE S

City MINNEAPOLIS State MN Zip Code 55403

FEC ID number of contributing federal political committee. C

Name of Employer UNIVERSITY OF MINNESOTA Occupation PROFESSOR

Receipt For:
 Primary General
 Other (specify) 2018

Election Cycle-to-Date 500.00

Date of Receipt MM / DD / YYYY
05 / 27 / 2018

Amount of Each Receipt this Period 500.00

Memo Item

Full Name (Last, First, Middle Initial)
B. THOMAS, LAURA

Mailing Address
3300 48TH AVE S

City MINNEAPOLIS State MN Zip Code 55406

FEC ID number of contributing federal political committee. C

Name of Employer UNIVERSITY OF MINNESOTA Occupation PROFESSOR

Receipt For:
 Primary General
 Other (specify) 2018

Election Cycle-to-Date 250.00

Date of Receipt MM / DD / YYYY
05 / 26 / 2018

Amount of Each Receipt this Period 250.00

Memo Item

Full Name (Last, First, Middle Initial)
C. CARBONE, JUNE

Mailing Address
621 W 57TH TERRACE

City KANSAS CITY State MO Zip Code 64113

FEC ID number of contributing federal political committee. C

Name of Employer UNIVERSITY OF MINNESOTA Occupation PROFESSOR

Receipt For:
 Primary General
 Other (specify) 2018

Election Cycle-to-Date 1000.00

Date of Receipt MM / DD / YYYY
05 / 27 / 2018

Amount of Each Receipt this Period 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional) 1750.00

TOTAL This Period (last page this line number only)

201807200200638894

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

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

FOR LINE NUMBER: PAGE 40 OF

(check only one)

11a 11b 11c 11d

12 13a 13b 14 15

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NAME OF COMMITTEE (In Full) PAINTER MINNESOTA

Full Name (Last, First, Middle Initial)
THOMAS, ANGELA

A. Mailing Address
736 GOODRICH AVE

City ST. PAUL State MN Zip Code 55105

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) 2018

Election Cycle-to-Date
500.00

Date of Receipt
MM / DD / YYYY
05 / 11 / 2018

Amount of Each Receipt this Period
500.00

Memo Item

BEST EFFORTS

Full Name (Last, First, Middle Initial)
STANKIEWICZ, ELLEN

B. Mailing Address
1689 BIRCH LAKE AVE

City WHITE BEAR LAKE State MN Zip Code 55110

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
SELF CONSULTANT

Receipt For:
 Primary General
 Other (specify) 2018

Election Cycle-to-Date
250.00

Date of Receipt
MM / DD / YYYY
05 / 22 / 2018

Amount of Each Receipt this Period
250.00

Memo Item

Full Name (Last, First, Middle Initial)
LARSE, JOHN

C. Mailing Address
24 SEASCAPE VLG

City APTOS State CA Zip Code 95003

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
SELF PLANT BREEDER

Receipt For:
 Primary General
 Other (specify) 2018

Election Cycle-to-Date
2861.63

Date of Receipt
MM / DD / YYYY
05 / 26 / 2018

Amount of Each Receipt this Period
2450.00

Memo Item

SUBTOTAL of Receipts This Page (optional) ▶

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

3200.00

201807200200638895

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

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

FOR LINE NUMBER: PAGE 41 OF

(check only one)

11a 11b 11c 11d

12 13a 13b 14 15

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NAME OF COMMITTEE (In Full) PAINTER MINNESOTA

Full Name (Last, First, Middle Initial)
LARSE, JOHN

A. Mailing Address
24 SEASCAPE VLG
City APTOS State CA Zip Code 95003

FEC ID number of contributing federal political committee. C

Name of Employer SELF Occupation PLANT BREEDER

Receipt For:
 Primary General
 Other (specify) 2018

Election Cycle-to-Date 2861.63

Date of Receipt
MM / DD / YYYY
05 / 26 / 2018

Amount of Each Receipt this Period
- 150.00

Memo Item

Full Name (Last, First, Middle Initial)
LARSE, JOHN

B. Mailing Address
24 SEASCAPE VLG
City APTOS State CA Zip Code 95003

FEC ID number of contributing federal political committee. C

Name of Employer SELF Occupation CONSULTANT

Receipt For:
 Primary General
 Other (specify) 2018

Election Cycle-to-Date 2861.63

Date of Receipt
MM / DD / YYYY
05 / 26 / 2018

Amount of Each Receipt this Period
150.00

Memo Item

Full Name (Last, First, Middle Initial)
LARSE, JOHN

C. Mailing Address
24 SEASCAPE VLG
City APTOS State CA Zip Code 95003

FEC ID number of contributing federal political committee. C

Name of Employer SELF Occupation PLANT BREEDER

Receipt For:
 Primary General
 Other (specify) 2018

Election Cycle-to-Date 2861.63

Date of Receipt
MM / DD / YYYY
06 / 25 / 2018

Amount of Each Receipt this Period
11.63

Memo Item

CONTRIBUTION EARMARKED THROUGH ACTBLUE

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

11.63

201807200200630096

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

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

FOR LINE NUMBER: PAGE 42 OF
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full) **Painter Minnesota**

A. Full Name (Last, First, Middle Initial) **ACTBLUE**
 Mailing Address **P.O. BOX 441146**
 City **WEST SOMERVILLE** State **MA** Zip Code **02144**
 FEC ID number of contributing federal political committee. **C 00401224**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) 2018
 Election Cycle-to-Date **5455.89**

Date of Receipt **06 / 30 / 2018**
 Amount of Each Receipt this Period **11.63**
 Memo Item
TOTAL EARMARKED THROUGH CONDUIT: LIMIT NOT AFFECTED

B. Full Name (Last, First, Middle Initial) **BROY, ANTHONY**
 Mailing Address **1065 ROUTE 22 W, SUITE 2D**
 City **BRIDGEWATER** State **NJ** Zip Code **08807**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **NONE** Occupation **NONE**
 Receipt For: Primary General Other (specify) 2018
 Election Cycle-to-Date **2700.00**

Date of Receipt **06 / 28 / 2018**
 Amount of Each Receipt this Period **2700.00**
 Memo Item
CONTRIBUTION EARMARKED THROUGH ACTBLUE

C. Full Name (Last, First, Middle Initial) **ACTBLUE**
 Mailing Address **P.O. BOX 441146**
 City **WEST SOMERVILLE** State **MA** Zip Code **02144**
 FEC ID number of contributing federal political committee. **C 00401224**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) 2018
 Election Cycle-to-Date **5455.89**

Date of Receipt **06 / 30 / 2018**
 Amount of Each Receipt this Period **2700.00**
 Memo Item
TOTAL EARMARKED THROUGH CONDUIT: LIMIT NOT AFFECTED

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

2700.00
2700.00

201807200200638897

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

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

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NAME OF COMMITTEE (In Full) **PAINTER MINNESOTA**

A. Full Name (Last, First, Middle Initial)
CASHDAN, ERIC

Mailing Address
10 SCHOONER LANE

City **PORT WASHINGTON** State **NY** Zip Code **11050**

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

Name of Employer **GUMERSELL CASHDAN INC** Occupation **ENGINEERING SALES**

Receipt For:
 Primary General
 Other (specify) **2018**

Election Cycle-to-Date **250.00**

Date of Receipt
05 / 01 / 2018

Amount of Each Receipt this Period
250.00

Memo Item

CONTRIBUTION EARMARKED THROUGH ACTBLUE

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

Mailing Address
P.O. BOX 441146

City **WEST SOMERVILLE** State **MA** Zip Code **02144**

FEC ID number of contributing federal political committee. **C 00401224**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) **2018**

Election Cycle-to-Date **5455.89**

Date of Receipt
05 / 06 / 2018

Amount of Each Receipt this Period
250.00

Memo Item

TOTAL EARMARKED THROUGH CONDUIT: LIMIT NOT AFFECTED

C. Full Name (Last, First, Middle Initial)
ROSE, ROBERT

Mailing Address
11415 HARBORVIEW DRIVE

City **CLEVELAND** State **OH** Zip Code **44102**

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

Name of Employer **NONE** Occupation **NONE**

Receipt For:
 Primary General
 Other (specify) **2018**

Election Cycle-to-Date **250.00**

Date of Receipt
06 / 18 / 2018

Amount of Each Receipt this Period
250.00

Memo Item

CONTRIBUTION EARMARKED THROUGH ACTBLUE

SUBTOTAL of Receipts This Page (optional) **500.00**

TOTAL This Period (last page this line number only)

500.00

201807200200653398

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

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

FOR LINE NUMBER: PAGE 44 OF

(check only one)

11a 11b 11c 11d

12 13a 13b 14 15

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NAME OF COMMITTEE (In Full) **PAINTE MINNESOTA**

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

Mailing Address
P.O. BOX 441146

City **WEST SOMERVILLE** State **MA** Zip Code **02144**

FEC ID number of contributing federal political committee. **C 00401224**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) **2018**

Election Cycle-to-Date **5455.89**

Date of Receipt
06 / 24 / 2018

Amount of Each Receipt this Period
250.00

Memo Item

**TOTAL EARMARKED THROUGH CONDUIT:
LIMIT NOT AFFECTED**

B. Full Name (Last, First, Middle Initial)
YEDOR, JAMES

Mailing Address
1622 SIERRA ALTA

City **SANTA ANA** State **CA** Zip Code **92705**

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

Name of Employer Occupation
DADMAN FARMS OWNER

Receipt For:
 Primary General
 Other (specify) **2018**

Election Cycle-to-Date **250.00**

Date of Receipt
05 / 01 / 2018

Amount of Each Receipt this Period
250.00

Memo Item

**CONTRIBUTION EARMARKED
THROUGH ACTBLUE**

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

Mailing Address
P.O. BOX 441146

City **WEST SOMERVILLE** State **MA** Zip Code **02144**

FEC ID number of contributing federal political committee. **C 00401224**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) **2018**

Election Cycle-to-Date **5455.89**

Date of Receipt
05 / 06 / 2018

Amount of Each Receipt this Period
250.00

Memo Item

**TOTAL EARMARKED THROUGH CONDUIT:
LIMIT NOT AFFECTED**

SUBTOTAL of Receipts This Page (optional) ▶

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

250.00

250.00

201807200200030099

**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 45 OF
	<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) **PAINTEER MINNESOTA**

Full Name (Last, First, Middle Initial)
A. STEWART, TRAVIS

Mailing Address
11808 OTSEGO ST

City **VALLEY VILLAGE** State **CA** Zip Code **91607**

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

Name of Employer **THE DRAVIS AGENCY** Occupation **OWNER**

Receipt For:
 Primary General
 Other (specify) **2018**

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 30 / 2018

Amount of Each Receipt this Period
500.00

Memo Item

CONTRIBUTION EARMARKED THROUGH ACTBLUE

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

Mailing Address
P.O. BOX 441146

City **WEST SOMERVILLE** State **MA** Zip Code **02144**

FEC ID number of contributing federal political committee. **C 00401224**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) **2018**

Election Cycle-to-Date **5455.89**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 06 / 2018

Amount of Each Receipt this Period
500.00

Memo Item

TOTAL EARMARKED THROUGH CONDUIT: LIMIT NOT AFFECTED

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

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

Memo Item

SUBTOTAL of Receipts This Page (optional)	500.00
TOTAL This Period (last page this line number only)	63961.63

201807200200638900

**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	
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c

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NAME OF COMMITTEE (In Full)
PAINTER MINNESOTA

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address
185 BERRY ST #550

City: SAN FRANCISCO State: CA Zip Code: 94107

Purpose of Disbursement: CARD PROCESSING/WEB APPLICATION FEES

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: _____ District: _____ 2018

Date of Disbursement: 04 / 03 / 2018

FEC Identification Number: C _____

Amount of Each Disbursement this Period: 59.30

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address
185 BERRY ST #550

City: SAN FRANCISCO State: CA Zip Code: 94107

Purpose of Disbursement: CARD PROCESSING/WEB APPLICATION FEES

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: _____ District: _____ 2018

Date of Disbursement: 04 / 05 / 2018

FEC Identification Number: C _____

Amount of Each Disbursement this Period: 31.97

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address
185 BERRY ST #550

City: SAN FRANCISCO State: CA Zip Code: 94107

Purpose of Disbursement: CARD PROCESSING/WEB APPLICATION FEES

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: _____ District: _____ 2018

Date of Disbursement: 04 / 06 / 2018

FEC Identification Number: C _____

Amount of Each Disbursement this Period: 21.80

Memo Item

SUBTOTAL of Disbursements This Page (optional) ... ▶ 113.07

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

201807200200838901

**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			
	<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) **Painter Minnesota**

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address: 185 BERRY ST #550

City: SAN FRANCISCO State: CA Zip Code: 94107

Purpose of Disbursement: CARD PROCESSING/WEB APPLICATION FEES Category/Type: 001

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

State: District:

Date of Disbursement: 04 / 10 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 1.78

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address: 185 BERRY ST #550

City: SAN FRANCISCO State: CA Zip Code: 94107

Purpose of Disbursement: CARD PROCESSING/WEB APPLICATION FEES Category/Type: 001

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

State: District:

Date of Disbursement: 04 / 11 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 4.45

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address: 185 BERRY ST #550

City: SAN FRANCISCO State: CA Zip Code: 94107

Purpose of Disbursement: CARD PROCESSING/WEB APPLICATION FEES Category/Type: 001

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

State: District:

Date of Disbursement: 04 / 17 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 3.25

Memo Item

SUBTOTAL of Disbursements This Page (optional) ... 9.48

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

201807200200636902

**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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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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)

PAINTER MINNESOTA

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address
185 BERRY ST #550

City: SAN FRANCISCO State: CA Zip Code: 94107

Purpose of Disbursement: CARD PROCESSING/WEB APPLICATION FEES Category/Type: 001

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) 2018

State: District:

Date of Disbursement: MM / DD / YYYY
04 / 18 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 1.78

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address
185 BERRY ST #550

City: SAN FRANCISCO State: CA Zip Code: 94107

Purpose of Disbursement: CARD PROCESSING/WEB APPLICATION FEES Category/Type: 001

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) 2018

State: District:

Date of Disbursement: MM / DD / YYYY
04 / 25 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 29.80

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address
185 BERRY ST #550

City: SAN FRANCISCO State: CA Zip Code: 94107

Purpose of Disbursement: CARD PROCESSING/WEB APPLICATION FEES Category/Type: 001

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) 2018

State: District:

Date of Disbursement: MM / DD / YYYY
05 / 03 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 1.78

Memo Item

SUBTOTAL of Disbursements This Page (optional) ... → 33.36

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

201807200200638903

**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			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Painter Minnesota

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address
185 BERRY ST #550

City: SAN FRANCISCO State: CA Zip Code: 94107

Purpose of Disbursement: CARD PROCESSING/WEB APPLICATION FEES Category/Type: 001

Candidate Name

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

State: District:

Date of Disbursement: 05 / 08 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 1.78

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address
185 BERRY ST #550

City: SAN FRANCISCO State: CA Zip Code: 94107

Purpose of Disbursement: CARD PROCESSING/WEB APPLICATION FEES Category/Type: 001

Candidate Name

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

State: District:

Date of Disbursement: 05 / 31 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 1.78

Memo Item

Full Name (Last, First, Middle Initial)

C. ACTBLUE TECHNICAL SERVICES

Mailing Address
366 SUMMER ST

City: SOMERVILLE State: MA Zip Code: 02144

Purpose of Disbursement: CARD PROCESSING FEES Category/Type: 001

Candidate Name

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

State: District:

Date of Disbursement: 06 / 30 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 123.63

Memo Item

SUBTOTAL of Disbursements This Page (optional)... 127.19

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

201807200200638904

**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
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Painter Minnesota

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. STRIPE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y
Mailing Address 185 BERRY ST #550		<input type="text"/> 04 / <input type="text"/> 25 / <input type="text"/> 2018
City SAN FRANCISCO	State CA	Zip Code 94107
Purpose of Disbursement CARD PROCESSING FEES		FEC Identification Number <input type="text"/> C <input type="text"/>
Candidate Name		Amount of Each Disbursement this Period <input type="text"/> 0.59
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	2018	

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. STRIPE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y
Mailing Address 185 BERRY ST #550		<input type="text"/> 04 / <input type="text"/> 29 / <input type="text"/> 2018
City SAN FRANCISCO	State CA	Zip Code 94107
Purpose of Disbursement CARD PROCESSING FEES		FEC Identification Number <input type="text"/> C <input type="text"/>
Candidate Name		Amount of Each Disbursement this Period <input type="text"/> 1.75
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	2018	

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. STRIPE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y
Mailing Address 185 BERRY ST #550		<input type="text"/> 05 / <input type="text"/> 01 / <input type="text"/> 2018
City SAN FRANCISCO	State CA	Zip Code 94107
Purpose of Disbursement CARD PROCESSING FEES		FEC Identification Number <input type="text"/> C <input type="text"/>
Candidate Name		Amount of Each Disbursement this Period <input type="text"/> 700.25
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	2018	

SUBTOTAL of Disbursements This Page (optional)...	<input type="text"/> 702.59
TOTAL This Period (last page this line number only)...	<input type="text"/>

201807200200638905

**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	
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c

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NAME OF COMMITTEE (In Full)
PAINTER MINNESOTA

Full Name (Last, First, Middle Initial) A. STRIPE		Date of Disbursement MM / DD / YYYY 05 / 02 / 2018
Mailing Address 185 BERRY ST #550		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94107
Purpose of Disbursement CARD PROCESSING FEES		Amount of Each Disbursement this Period 250.63
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	2018
State:	District:	

Full Name (Last, First, Middle Initial) B. STRIPE		Date of Disbursement MM / DD / YYYY 05 / 03 / 2018
Mailing Address 185 BERRY ST #550		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94107
Purpose of Disbursement CARD PROCESSING FEES		Amount of Each Disbursement this Period 205.08
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	2018
State:	District:	

Full Name (Last, First, Middle Initial) C. STRIPE		Date of Disbursement MM / DD / YYYY 05 / 06 / 2018
Mailing Address 185 BERRY ST #550		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94107
Purpose of Disbursement CARD PROCESSING FEES		Amount of Each Disbursement this Period 88.47
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	2018
State:	District:	

SUBTOTAL of Disbursements This Page (optional)...	544.18
TOTAL This Period (last page this line number only)...	

201807200200638900

**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	
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c

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NAME OF COMMITTEE (In Full)
PAINTER MINNESOTA

Full Name (Last, First, Middle Initial) A. STRIPE		Date of Disbursement MM / DD / YYYY 05 / 07 / 2018
Mailing Address 185 BERRY ST #550		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94107
Purpose of Disbursement CARD PROCESSING FEES		Amount of Each Disbursement this Period 69.88
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	2018
State: District:		

Full Name (Last, First, Middle Initial) B. STRIPE		Date of Disbursement MM / DD / YYYY 05 / 08 / 2018
Mailing Address 185 BERRY ST #550		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94107
Purpose of Disbursement CARD PROCESSING FEES		Amount of Each Disbursement this Period 387.22
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	2018
State: District:		

Full Name (Last, First, Middle Initial) C. STRIPE		Date of Disbursement MM / DD / YYYY 05 / 09 / 2018
Mailing Address 185 BERRY ST #550		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94107
Purpose of Disbursement CARD PROCESSING FEES		Amount of Each Disbursement this Period 17.69
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	2018
State: District:		

SUBTOTAL of Disbursements This Page (optional)...	474.79
TOTAL This Period (last page this line number)...	

201807200200638907

**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			
	<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)
Painter Minnesota

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address
185 BERRY ST #550

City: SAN FRANCISCO State: CA Zip Code: 94107

Purpose of Disbursement: CARD PROCESSING FEES Category/Type: 001

Candidate Name

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

State: District:

Date of Disbursement: MM/DD/YYYY 05/10/2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 82.59

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address
185 BERRY ST #550

City: SAN FRANCISCO State: CA Zip Code: 94107

Purpose of Disbursement: CARD PROCESSING FEES Category/Type: 001

Candidate Name

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

State: District:

Date of Disbursement: MM/DD/YYYY 05/13/2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 25.29

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address
185 BERRY ST #550

City: SAN FRANCISCO State: CA Zip Code: 94107

Purpose of Disbursement: CARD PROCESSING FEES Category/Type: 001

Candidate Name

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

State: District:

Date of Disbursement: MM/DD/YYYY 05/14/2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 4.99

Memo Item

SUBTOTAL of Disbursements This Page (optional) ... 112.87

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

201807200200638908

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

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

FOR LINE NUMBER: (check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
PAINTER MINNESOTA

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address
185 BERRY ST #550

City: SAN FRANCISCO State: CA Zip Code: 94107

Purpose of Disbursement: CARD PROCESSING FEES Category/Type: 001

Candidate Name

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

State: District:

Date of Disbursement: 05 / 15 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 184.10

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address
185 BERRY ST #550

City: SAN FRANCISCO State: CA Zip Code: 94107

Purpose of Disbursement: CARD PROCESSING FEES Category/Type: 001

Candidate Name

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

State: District:

Date of Disbursement: 05 / 16 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 8.63

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address
185 BERRY ST #550

City: SAN FRANCISCO State: CA Zip Code: 94107

Purpose of Disbursement: CARD PROCESSING FEES Category/Type: 001

Candidate Name

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

State: District:

Date of Disbursement: 05 / 17 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 21.67

Memo Item

SUBTOTAL of Disbursements This Page (optional) ... 214.40

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

201807200200630909

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

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

FOR LINE NUMBER: (check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
Painter Minnesota

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

Date of Disbursement: MM / DD / YYYY
05 / 20 / 2018

Mailing Address: 185 BERRY ST #550

City: SAN FRANCISCO State: CA Zip Code: 94107

Purpose of Disbursement: CARD PROCESSING FEES Category/Type: 001

Candidate Name: _____

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

State: _____ District: _____

FEC Identification Number: C _____

Amount of Each Disbursement this Period: 177.10

Memo Item

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

Date of Disbursement: MM / DD / YYYY
05 / 21 / 2018

Mailing Address: 185 BERRY ST #550

City: SAN FRANCISCO State: CA Zip Code: 94107

Purpose of Disbursement: CARD PROCESSING FEES Category/Type: 001

Candidate Name: _____

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

State: _____ District: _____

FEC Identification Number: C _____

Amount of Each Disbursement this Period: 29.87

Memo Item

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

Date of Disbursement: MM / DD / YYYY
05 / 22 / 2018

Mailing Address: 185 BERRY ST #550

City: SAN FRANCISCO State: CA Zip Code: 94107

Purpose of Disbursement: CARD PROCESSING FEES Category/Type: 001

Candidate Name: _____

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

State: _____ District: _____

FEC Identification Number: C _____

Amount of Each Disbursement this Period: 140.97

Memo Item

SUBTOTAL of Disbursements This Page (optional) ... 347.94

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

201807200200638910

**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 56 OF
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 18 <input type="checkbox"/> 19a <input type="checkbox"/> 19b <input type="checkbox"/> 20a <input type="checkbox"/> 20b <input type="checkbox"/> 20c <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
PAINTER MINNESOTA

Full Name (Last, First, Middle Initial) A. STRIPE		Date of Disbursement MM / DD / YYYY 05 / 23 / 2018
Mailing Address 185 BERRY ST #550		FEC Identification Number C
City SAN FRANCISCO	State CA	
Zip Code 94107		Amount of Each Disbursement this Period 82.32
Purpose of Disbursement CARD PROCESSING FEES		
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2018	
State:	District:	

Full Name (Last, First, Middle Initial) B. STRIPE		Date of Disbursement MM / DD / YYYY 05 / 24 / 2018
Mailing Address 185 BERRY ST #550		FEC Identification Number C
City SAN FRANCISCO	State CA	
Zip Code 94107		Amount of Each Disbursement this Period 11.13
Purpose of Disbursement CARD PROCESSING FEES		
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2018	
State:	District:	

Full Name (Last, First, Middle Initial) C. STRIPE		Date of Disbursement MM / DD / YYYY 05 / 28 / 2018
Mailing Address 185 BERRY ST #550		FEC Identification Number C
City SAN FRANCISCO	State CA	
Zip Code 94107		Amount of Each Disbursement this Period 9.54
Purpose of Disbursement CARD PROCESSING FEES		
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2018	
State:	District:	

SUBTOTAL of Disbursements This Page (optional)...	→	102.99
TOTAL This Period (last page this line number only)...	→	

201807200200638911

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

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

FOR LINE NUMBER: (check only one)
 17 18 19a 19b
 20a 20b 20c 21

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)
PAINTER MINNESOTA

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

Date of Disbursement: MM / DD / YYYY
05 / 29 / 2018

Mailing Address: 185 BERRY ST #550

City: SAN FRANCISCO State: CA Zip Code: 94107

Purpose of Disbursement: CARD PROCESSING FEES Category/Type: 001

Candidate Name: _____

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

State: _____ District: _____

FEC Identification Number: C _____

Amount of Each Disbursement this Period: 12.23

Memo Item

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

Date of Disbursement: MM / DD / YYYY
05 / 30 / 2018

Mailing Address: 185 BERRY ST #550

City: SAN FRANCISCO State: CA Zip Code: 94107

Purpose of Disbursement: CARD PROCESSING FEES Category/Type: 001

Candidate Name: _____

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

State: _____ District: _____

FEC Identification Number: C _____

Amount of Each Disbursement this Period: 217.98

Memo Item

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

Date of Disbursement: MM / DD / YYYY
05 / 31 / 2018

Mailing Address: 185 BERRY ST #550

City: SAN FRANCISCO State: CA Zip Code: 94107

Purpose of Disbursement: CARD PROCESSING FEES Category/Type: 001

Candidate Name: _____

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

State: _____ District: _____

FEC Identification Number: C _____

Amount of Each Disbursement this Period: 34.66

Memo Item

SUBTOTAL of Disbursements This Page (optional) ... ▶ 264.87

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

2018072002000638912

**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 58 OF			
	<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)
Painter Minnesota

Full Name (Last, First, Middle Initial) A. STRIPE		Date of Disbursement MM / DD / YYYY 06 / 03 / 2018	
Mailing Address 185 BERRY ST #550		FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94107	Amount of Each Disbursement this Period 65.83
Purpose of Disbursement CARD PROCESSING FEES		Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2018		

Full Name (Last, First, Middle Initial) B. STRIPE		Date of Disbursement MM / DD / YYYY 06 / 04 / 2018	
Mailing Address 185 BERRY ST #550		FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94107	Amount of Each Disbursement this Period 27.57
Purpose of Disbursement CARD PROCESSING FEES		Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2018		

Full Name (Last, First, Middle Initial) C. STRIPE		Date of Disbursement MM / DD / YYYY 06 / 05 / 2018	
Mailing Address 185 BERRY ST #550		FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94107	Amount of Each Disbursement this Period 97.19
Purpose of Disbursement CARD PROCESSING FEES		Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2018		

SUBTOTAL of Disbursements This Page (optional)...	190.59
TOTAL This Period (last page this line number only)...	

201807200200630913

**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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
PAINTER MINNESOTA

Full Name (Last, First, Middle Initial) STRIFE		Date of Disbursement MM / DD / YYYY 06 / 06 / 2018
Mailing Address 185 BERRY ST #550		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94107
Purpose of Disbursement CARD PROCESSING FEES		Amount of Each Disbursement this Period 23.09
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001
State: District:	2018	

Full Name (Last, First, Middle Initial) STRIFE		Date of Disbursement MM / DD / YYYY 06 / 07 / 2018
Mailing Address 185 BERRY ST #550		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94107
Purpose of Disbursement CARD PROCESSING FEES		Amount of Each Disbursement this Period 180.98
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001
State: District:	2018	

Full Name (Last, First, Middle Initial) STRIFE		Date of Disbursement MM / DD / YYYY 06 / 10 / 2018
Mailing Address 185 BERRY ST #550		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94107
Purpose of Disbursement CARD PROCESSING FEES		Amount of Each Disbursement this Period 61.05
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001
State: District:	2018	

SUBTOTAL of Disbursements This Page (optional)...	265.12
TOTAL This Period (last page this line number only)...	

201807200200038914

**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 60 OF	
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c

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)
PAINTER MINNESOTA

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address
185 BERRY ST #550

City: SAN FRANCISCO State: CA Zip Code: 94107

Purpose of Disbursement: CARD PROCESSING FEES Category/Type: 001

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) 2018

State: District:

Date of Disbursement: 06 / 11 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 26.62

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address
185 BERRY ST #550

City: SAN FRANCISCO State: CA Zip Code: 94107

Purpose of Disbursement: CARD PROCESSING FEES Category/Type: 001

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) 2018

State: District:

Date of Disbursement: 06 / 12 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 68.53

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address
185 BERRY ST #550

City: SAN FRANCISCO State: CA Zip Code: 94107

Purpose of Disbursement: CARD PROCESSING FEES Category/Type: 001

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) 2018

State: District:

Date of Disbursement: 06 / 13 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 19.39

Memo Item

SUBTOTAL of Disbursements This Page (optional) ... 114.54

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

201807200200633915

**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 61 OF
	<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) **PAINTER MINNESOTA**

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address
185 BERRY ST #550

City: SAN FRANCISCO State: CA Zip Code: 94107

Purpose of Disbursement: CARD PROCESSING FEES Category/Type: 001

Candidate Name

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

State: District:

Date of Disbursement: 06 / 14 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 22.32

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address
185 BERRY ST #550

City: SAN FRANCISCO State: CA Zip Code: 94107

Purpose of Disbursement: CARD PROCESSING FEES Category/Type: 001

Candidate Name

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

State: District:

Date of Disbursement: 06 / 17 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 16.52

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address
185 BERRY ST #550

City: SAN FRANCISCO State: CA Zip Code: 94107

Purpose of Disbursement: CARD PROCESSING FEES Category/Type: 001

Candidate Name

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

State: District:

Date of Disbursement: 06 / 18 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 36.40

Memo Item

SUBTOTAL of Disbursements This Page (optional)... 75.24

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

201807200200638916

**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 62 OF			
	<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)
Painter Minnesota

Full Name (Last, First, Middle Initial)

A. STRIPE

Date of Disbursement: MM / DD / YYYY
06 / 19 / 2018

Mailing Address: 185 BERRY ST #550

City: SAN FRANCISCO State: CA Zip Code: 94107

Purpose of Disbursement: CARD PROCESSING FEES Category/Type: 001

Candidate Name:

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

State: District:

FEC Identification Number: C

Amount of Each Disbursement this Period: 107.46

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Date of Disbursement: MM / DD / YYYY
06 / 20 / 2018

Mailing Address: 185 BERRY ST #550

City: SAN FRANCISCO State: CA Zip Code: 94107

Purpose of Disbursement: CARD PROCESSING FEES Category/Type: 001

Candidate Name:

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

State: District:

FEC Identification Number: C

Amount of Each Disbursement this Period: 88.07

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Date of Disbursement: MM / DD / YYYY
06 / 21 / 2018

Mailing Address: 185 BERRY ST #550

City: SAN FRANCISCO State: CA Zip Code: 94107

Purpose of Disbursement: CARD PROCESSING FEES Category/Type: 001

Candidate Name:

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

State: District:

FEC Identification Number: C

Amount of Each Disbursement this Period: 70.66

Memo Item

SUBTOTAL of Disbursements This Page (optional) ... 266.19

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

201807200200638917

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

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

FOR LINE NUMBER: (check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
PAINTER MINNESOTA

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

Date of Disbursement: MM / DD / YYYY
06 / 24 / 2018

Mailing Address: 185 BERRY ST #550

City: SAN FRANCISCO State: CA Zip Code: 94107

Purpose of Disbursement: CARD PROCESSING FEES Category/Type: 001

Candidate Name: _____

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

State: _____ District: _____

FEC Identification Number: C _____

Amount of Each Disbursement this Period: 52.42

Memo Item

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

Date of Disbursement: MM / DD / YYYY
06 / 25 / 2018

Mailing Address: 185 BERRY ST #550

City: SAN FRANCISCO State: CA Zip Code: 94107

Purpose of Disbursement: CARD PROCESSING FEES Category/Type: 001

Candidate Name: _____

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

State: _____ District: _____

FEC Identification Number: C _____

Amount of Each Disbursement this Period: 62.55

Memo Item

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

Date of Disbursement: MM / DD / YYYY
06 / 26 / 2018

Mailing Address: 185 BERRY ST #550

City: SAN FRANCISCO State: CA Zip Code: 94107

Purpose of Disbursement: CARD PROCESSING FEES Category/Type: 001

Candidate Name: _____

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

State: _____ District: _____

FEC Identification Number: C _____

Amount of Each Disbursement this Period: 108.31

Memo Item

SUBTOTAL of Disbursements This Page (optional)... 223.28

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

201807200200030918

**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 64 OF	
	<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)
Painter Minnesota

Full Name (Last, First, Middle Initial) A. STRIPE		Date of Disbursement MM / DD / YYYY 06 / 27 / 2018
Mailing Address 185 BERRY ST #550		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94107
Purpose of Disbursement CARD PROCESSING FEES		Amount of Each Disbursement this Period 118.42
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	2018
State:	District:	

Full Name (Last, First, Middle Initial) B. STRIPE		Date of Disbursement MM / DD / YYYY 06 / 28 / 2018
Mailing Address 185 BERRY ST #550		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94107
Purpose of Disbursement CARD PROCESSING FEES		Amount of Each Disbursement this Period 108.58
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	2018
State:	District:	

Full Name (Last, First, Middle Initial) C. BARNHART, ELLIE		Date of Disbursement MM / DD / YYYY 06 / 21 / 2018
Mailing Address 65 1/2 S 2ND E		FEC Identification Number C
City REXBURG	State ID	Zip Code 83440
Purpose of Disbursement GRAPHICS DESIGN		Amount of Each Disbursement this Period 225.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	2018
State:	District:	

SUBTOTAL of Disbursements This Page (optional)...	452.00
TOTAL This Period (last page this line number only)...	

201807200200638919

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

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

FOR LINE NUMBER: (check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
PAINTER MINNESOTA

A. FACEBOOK

Full Name (Last, First, Middle Initial)

Mailing Address
 1601 WILLOW ROAD

City MENLO PARK State CA Zip Code 94025

Purpose of Disbursement
ONLINE ADVERTISING Category/Type

Candidate Name

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

State: _____ District: _____

Date of Disbursement
 M M / D D / Y Y Y Y
06 / 22 / 2018

FEC Identification Number
 C _____

Amount of Each Disbursement this Period
 _____ 1.76

Memo Item

B. FACEBOOK

Full Name (Last, First, Middle Initial)

Mailing Address
 1601 WILLOW ROAD

City MENLO PARK State CA Zip Code 94025

Purpose of Disbursement
ONLINE ADVERTISING Category/Type

Candidate Name

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

State: _____ District: _____

Date of Disbursement
 M M / D D / Y Y Y Y
06 / 28 / 2018

FEC Identification Number
 C _____

Amount of Each Disbursement this Period
 _____ 749.06

Memo Item

C. FACEBOOK

Full Name (Last, First, Middle Initial)

Mailing Address
 1601 WILLOW ROAD

City MENLO PARK State CA Zip Code 94025

Purpose of Disbursement
ONLINE ADVERTISING Category/Type

Candidate Name

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

State: _____ District: _____

Date of Disbursement
 M M / D D / Y Y Y Y
06 / 14 / 2018

FEC Identification Number
 C _____

Amount of Each Disbursement this Period
 _____ 749.78

Memo Item

SUBTOTAL of Disbursements This Page (optional) ... 1500.60

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

201807200200638920

**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 66 OF			
	<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) **PAINTER MINNESOTA**

Full Name (Last, First, Middle Initial)

A. FACEBOOK

Mailing Address
1601 WILLOW ROAD

City: MENLO PARK State: CA Zip Code: 94025

Purpose of Disbursement: ONLINE ADVERTISING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) 2018

State: District:

Date of Disbursement: MM / DD / YYYY
06 / 18 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 749.65

Memo Item

Full Name (Last, First, Middle Initial)

B. FACEBOOK

Mailing Address
1601 WILLOW ROAD

City: MENLO PARK State: CA Zip Code: 94025

Purpose of Disbursement: ONLINE ADVERTISING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) 2018

State: District:

Date of Disbursement: MM / DD / YYYY
06 / 12 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 724.64

Memo Item

Full Name (Last, First, Middle Initial)

C. FACEBOOK

Mailing Address
1601 WILLOW ROAD

City: MENLO PARK State: CA Zip Code: 94025

Purpose of Disbursement: ONLINE ADVERTISING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) 2018

State: District:

Date of Disbursement: MM / DD / YYYY
06 / 12 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 25.36

Memo Item

SUBTOTAL of Disbursements This Page (optional) ... 1499.65

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

201807200200638921

**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 67 OF			
	<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)
PAINTER MINNESOTA

Full Name (Last, First, Middle Initial)

A. FACEBOOK

Mailing Address
1601 WILLOW ROAD

City: MENLO PARK State: CA Zip Code: 94025

Purpose of Disbursement: ONLINE ADVERTISING

Candidate Name: [] Category/Type: []

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) 2018

State: District:

Date of Disbursement: MM/DD/YYYY 06/20/2018

FEC Identification Number: C []

Amount of Each Disbursement this Period: 747.66

Memo Item

Full Name (Last, First, Middle Initial)

B. FACEBOOK

Mailing Address
1601 WILLOW ROAD

City: MENLO PARK State: CA Zip Code: 94025

Purpose of Disbursement: ONLINE ADVERTISING

Candidate Name: [] Category/Type: []

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) 2018

State: District:

Date of Disbursement: MM/DD/YYYY 06/18/2018

FEC Identification Number: C []

Amount of Each Disbursement this Period: 748.99

Memo Item

Full Name (Last, First, Middle Initial)

C. FACEBOOK

Mailing Address
1601 WILLOW ROAD

City: MENLO PARK State: CA Zip Code: 94025

Purpose of Disbursement: ONLINE ADVERTISING

Candidate Name: [] Category/Type: []

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) 2018

State: District:

Date of Disbursement: MM/DD/YYYY 06/18/2018

FEC Identification Number: C []

Amount of Each Disbursement this Period: 1.01

Memo Item

SUBTOTAL of Disbursements This Page (optional) ... 1497.66

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

201807200200638922

**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 68 OF			
	<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)
Painter Minnesota

Full Name (Last, First, Middle Initial)			Date of Disbursement								
A. FACEBOOK			<table border="1"> <tr> <td>M M</td> <td>D D</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td>20</td> <td>2018</td> </tr> </table>			M M	D D	Y Y Y Y	06	20	2018
M M	D D	Y Y Y Y									
06	20	2018									
Mailing Address 1601 WILLOW ROAD			FEC Identification Number C								
City MENLO PARK	State CA	Zip Code 94025	Amount of Each Disbursement this Period 2.34								
Purpose of Disbursement ONLINE ADVERTISING		Category/Type	<input type="checkbox"/> Memo Item								
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		2018								
State: District:											

Full Name (Last, First, Middle Initial)			Date of Disbursement								
B. FACEBOOK			<table border="1"> <tr> <td>M M</td> <td>D D</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td>21</td> <td>2018</td> </tr> </table>			M M	D D	Y Y Y Y	06	21	2018
M M	D D	Y Y Y Y									
06	21	2018									
Mailing Address 1601 WILLOW ROAD			FEC Identification Number C								
City MENLO PARK	State CA	Zip Code 94025	Amount of Each Disbursement this Period 737.81								
Purpose of Disbursement ONLINE ADVERTISING		Category/Type	<input type="checkbox"/> Memo Item								
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		2018								
State: District:											

Full Name (Last, First, Middle Initial)			Date of Disbursement								
C. FACEBOOK			<table border="1"> <tr> <td>M M</td> <td>D D</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td>21</td> <td>2018</td> </tr> </table>			M M	D D	Y Y Y Y	06	21	2018
M M	D D	Y Y Y Y									
06	21	2018									
Mailing Address 1601 WILLOW ROAD			FEC Identification Number C								
City MENLO PARK	State CA	Zip Code 94025	Amount of Each Disbursement this Period 12.19								
Purpose of Disbursement ONLINE ADVERTISING		Category/Type	<input type="checkbox"/> Memo Item								
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		2018								
State: District:											

SUBTOTAL of Disbursements This Page (optional) ...	752.34
TOTAL This Period (last page this line number) ...	

201807200200638923

**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 69 OF			
	<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)
Painter Minnesota

Full Name (Last, First, Middle Initial)

A. FACEBOOK

Mailing Address
1601 WILLOW ROAD

City: MENLO PARK State: CA Zip Code: 94025

Purpose of Disbursement: ONLINE ADVERTISING

Candidate Name: [] Category/Type: []

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) 2018

State: District: 2018

Date of Disbursement: MM / DD / YYYY
06 / 07 / 2018

FEC Identification Number: C []

Amount of Each Disbursement this Period: [] 575.96

Memo Item

Full Name (Last, First, Middle Initial)

B. FACEBOOK

Mailing Address
1601 WILLOW ROAD

City: MENLO PARK State: CA Zip Code: 94025

Purpose of Disbursement: ONLINE ADVERTISING

Candidate Name: [] Category/Type: []

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) 2018

State: District: 2018

Date of Disbursement: MM / DD / YYYY
06 / 07 / 2018

FEC Identification Number: C []

Amount of Each Disbursement this Period: [] 174.04

Memo Item

Full Name (Last, First, Middle Initial)

C. FACEBOOK

Mailing Address
1601 WILLOW ROAD

City: MENLO PARK State: CA Zip Code: 94025

Purpose of Disbursement: ONLINE ADVERTISING

Candidate Name: [] Category/Type: []

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) 2018

State: District: 2018

Date of Disbursement: MM / DD / YYYY
06 / 25 / 2018

FEC Identification Number: C []

Amount of Each Disbursement this Period: [] 747.15

Memo Item

SUBTOTAL of Disbursements This Page (optional)... [] 1497.15

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

201807200200838924

**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 70 OF	
	<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)
Painter Minnesota

Full Name (Last, First, Middle Initial)

A. FACEBOOK

Mailing Address
1601 WILLOW ROAD

City: MENLO PARK State: CA Zip Code: 94025

Purpose of Disbursement: ONLINE ADVERTISING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) 2018

State: District:

Date of Disbursement: MM/DD/YYYY 06/11/2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 618.20

Memo Item

Full Name (Last, First, Middle Initial)

B. FACEBOOK

Mailing Address
1601 WILLOW ROAD

City: MENLO PARK State: CA Zip Code: 94025

Purpose of Disbursement: ONLINE ADVERTISING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) 2018

State: District:

Date of Disbursement: MM/DD/YYYY 06/11/2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 131.80

Memo Item

Full Name (Last, First, Middle Initial)

C. FACEBOOK

Mailing Address
1601 WILLOW ROAD

City: MENLO PARK State: CA Zip Code: 94025

Purpose of Disbursement: ONLINE ADVERTISING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) 2018

State: District:

Date of Disbursement: MM/DD/YYYY 06/25/2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 2.85

Memo Item

SUBTOTAL of Disbursements This Page (optional) ... 752.85

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

201807200200038925

**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 71 OF
	<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)
Painter Minnesota

A. FACEBOOK

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM/DD/YYYY **05/22/2018**

Mailing Address: **1601 WILLOW ROAD**

City: **MENLO PARK** State: **CA** Zip Code: **94025**

Purpose of Disbursement: **ONLINE ADVERTISING**

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) 2018

State: District:

FEC Identification Number: **C**

Amount of Each Disbursement this Period: **498.69**

Memo Item

B. FACEBOOK

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM/DD/YYYY **06/22/2018**

Mailing Address: **1601 WILLOW ROAD**

City: **MENLO PARK** State: **CA** Zip Code: **94025**

Purpose of Disbursement: **ONLINE ADVERTISING**

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) 2018

State: District:

FEC Identification Number: **C**

Amount of Each Disbursement this Period: **748.24**

Memo Item

C. FACEBOOK

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM/DD/YYYY **06/01/2018**

Mailing Address: **1601 WILLOW ROAD**

City: **MENLO PARK** State: **CA** Zip Code: **94025**

Purpose of Disbursement: **ONLINE ADVERTISING**

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) 2018

State: District:

FEC Identification Number: **C**

Amount of Each Disbursement this Period: **271.84**

Memo Item

SUBTOTAL of Disbursements This Page (optional) ... **1518.77**

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

201807200200638926

**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 72 OF	
	<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)
Painter Minnesota

Full Name (Last, First, Middle Initial)

A. FACEBOOK

Date of Disbursement: MM / DD / YYYY
05 / 22 / 2018

Mailing Address: 1601 WILLOW ROAD

City: MENLO PARK State: CA Zip Code: 94025

Purpose of Disbursement: ONLINE ADVERTISING

Candidate Name: [] Category/Type: []

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District: 2018

FEC Identification Number: C []

Amount of Each Disbursement this Period: [] 1.31

Memo Item

Full Name (Last, First, Middle Initial)

B. FACEBOOK

Date of Disbursement: MM / DD / YYYY
05 / 01 / 2018

Mailing Address: 1601 WILLOW ROAD

City: MENLO PARK State: CA Zip Code: 94025

Purpose of Disbursement: ONLINE ADVERTISING

Candidate Name: [] Category/Type: []

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District: 2018

FEC Identification Number: C []

Amount of Each Disbursement this Period: [] 250.00

Memo Item

Full Name (Last, First, Middle Initial)

C. NGP-VAN

Date of Disbursement: MM / DD / YYYY
06 / 04 / 2018

Mailing Address: 1445 NEW YORK AVE NW, SUITE 200

City: WASHINGTON State: DC Zip Code: 20005

Purpose of Disbursement: PROGRAM MONTHLY FEE

Candidate Name: [] Category/Type: []

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District: 2018

FEC Identification Number: C []

Amount of Each Disbursement this Period: [] 915.00

Memo Item

SUBTOTAL of Disbursements This Page (optional) ... [] 1166.31

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

201807200200638927

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

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

FOR LINE NUMBER: (check only one)
 17 18 19a 19b
 20a 20b 20c 21

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)
PAINTER MINNESOTA

Full Name (Last, First, Middle Initial)

A. DELTA AIRLINES

Mailing Address
1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement
AIRFARE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) 2018

State: District:

Date of Disbursement: 06 / 22 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 323.20

Memo Item

Full Name (Last, First, Middle Initial)

B. DELTA AIRLINES

Mailing Address
1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement
BAGGAGE FEE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) 2018

State: District:

Date of Disbursement: 06 / 29 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 25.00

Memo Item

Full Name (Last, First, Middle Initial)

C. BEST BUY

Mailing Address
1643 COUNTY ROAD B2

City ROSEVILLE State MN Zip Code 55113

Purpose of Disbursement
CAMERA LIGHT/BATTERIES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) 2018

State: District:

Date of Disbursement: 05 / 22 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 114.85

Memo Item

SUBTOTAL of Disbursements This Page (optional)... 463.05

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

201807200200638928

**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 74 OF			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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) **PAINTER MINNESOTA**

Full Name (Last, First, Middle Initial)

A. TWIN CITIES PRIDE

Mailing Address
2021 E HENNEPIN AVE #402

City **MINNEAPOLIS** State **MN** Zip Code **55413**

Purpose of Disbursement
BOOTH REGISTRATION FEE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) 2018

State: District:

Date of Disbursement: MM / DD / YYYY **05 / 21 / 2018**

FEC Identification Number **C**

Amount of Each Disbursement this Period **213.45**

Memo Item

Full Name (Last, First, Middle Initial)

B. CENTURYLINK

Mailing Address
200 S 5TH ST

City **MINNEAPOLIS** State **MN** Zip Code **55402**

Purpose of Disbursement
INTERNET

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) 2018

State: District:

Date of Disbursement: MM / DD / YYYY **06 / 29 / 2018**

FEC Identification Number **C**

Amount of Each Disbursement this Period **206.70**

Memo Item

Full Name (Last, First, Middle Initial)

C. BEST BUY

Mailing Address
1643 COUNTY ROAD B2

City **ROSEVILLE** State **MN** Zip Code **55113**

Purpose of Disbursement
LAPTOP/SOFTWARE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) 2018

State: District:

Date of Disbursement: MM / DD / YYYY **04 / 26 / 2018**

FEC Identification Number **C**

Amount of Each Disbursement this Period **515.38**

Memo Item

SUBTOTAL of Disbursements This Page (optional) ... **935.53**

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

201807200200636929

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

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

FOR LINE NUMBER: (check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
Painter Minnesota

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

Date of Disbursement: MM / DD / YYYY
06 / 26 / 2018

Mailing Address: 1355 MARKET ST, SUTE 900

City: SAN FRANCISCO State: CA Zip Code: 94103

Purpose of Disbursement: ONLINE ADVERTISING

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____ 2018

State: _____ District: _____

FEC Identification Number: C _____

Amount of Each Disbursement this Period: _____ 300.00

Memo Item

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

Date of Disbursement: MM / DD / YYYY
06 / 25 / 2018

Mailing Address: 1355 MARKET ST, SUTE 900

City: SAN FRANCISCO State: CA Zip Code: 94103

Purpose of Disbursement: ONLINE ADVERTISING

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____ 2018

State: _____ District: _____

FEC Identification Number: C _____

Amount of Each Disbursement this Period: _____ 350.00

Memo Item

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

Date of Disbursement: MM / DD / YYYY
06 / 22 / 2018

Mailing Address: 1355 MARKET ST, SUTE 900

City: SAN FRANCISCO State: CA Zip Code: 94103

Purpose of Disbursement: ONLINE ADVERTISING

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____ 2018

State: _____ District: _____

FEC Identification Number: C _____

Amount of Each Disbursement this Period: _____ 103.68

Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ **753.68**

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

201807200200630930

**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 76 OF			
	<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) **PAINTER MINNESOTA**

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

TWITTER

Mailing Address: 1355 MARKET ST, SUTE 900

City: SAN FRANCISCO State: CA Zip Code: 94103

Purpose of Disbursement: ONLINE ADVERTISING

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____ 2018

Date of Disbursement: 06 / 19 / 2018

FEC Identification Number: C _____

Amount of Each Disbursement this Period: 150.00

Memo Item

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

TWITTER

Mailing Address: 1355 MARKET ST, SUTE 900

City: SAN FRANCISCO State: CA Zip Code: 94103

Purpose of Disbursement: ONLINE ADVERTISING

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____ 2018

Date of Disbursement: 06 / 18 / 2018

FEC Identification Number: C _____

Amount of Each Disbursement this Period: 200.00

Memo Item

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

TWITTER

Mailing Address: 1355 MARKET ST, SUTE 900

City: SAN FRANCISCO State: CA Zip Code: 94103

Purpose of Disbursement: ONLINE ADVERTISING

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____ 2018

Date of Disbursement: 06 / 15 / 2018

FEC Identification Number: C _____

Amount of Each Disbursement this Period: 100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional) ... 450.00

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

201807200200638931

**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 77 OF			
	<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)
Painter Minnesota

Full Name (Last, First, Middle Initial)		Date of Disbursement	
A. SQUARESPACE		MM / DD / YYYY 06 / 26 / 2018	
Mailing Address 225 VARICK ST, FL 12		FEC Identification Number C	
City NEW YORK	State NY	Zip Code 10014	Amount of Each Disbursement this Period 50.00
Purpose of Disbursement WEBSITE FEES		Category/Type	<input type="checkbox"/> Memo Item
Candidate Name	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2018		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B. SQUARESPACE		MM / DD / YYYY 06 / 26 / 2018	
Mailing Address 225 VARICK ST, FL 12		FEC Identification Number C	
City NEW YORK	State NY	Zip Code 10014	Amount of Each Disbursement this Period 26.00
Purpose of Disbursement EMAIL HOSTING		Category/Type	<input type="checkbox"/> Memo Item
Candidate Name	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2018		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement	
C. SQUARESPACE		MM / DD / YYYY 06 / 07 / 2018	
Mailing Address 225 VARICK ST, FL 12		FEC Identification Number C	
City NEW YORK	State NY	Zip Code 10014	Amount of Each Disbursement this Period 3.08
Purpose of Disbursement EMAIL ADDRESS FEE		Category/Type	<input type="checkbox"/> Memo Item
Candidate Name	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2018		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

SUBTOTAL of Disbursements This Page (optional)...	79.08
TOTAL This Period (last page this line number only)...	

201807200200038932

**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 78 OF			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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)
Painter Minnesota

Full Name (Last, First, Middle Initial)

A. SQUARESPACE

Mailing Address
225 VARICK ST, FL 12

City: NEW YORK State: NY Zip Code: 10014

Purpose of Disbursement: WEBSITE FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) 2018

State: District:

Date of Disbursement: 05 / 29 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 45.00

Memo Item

Full Name (Last, First, Middle Initial)

B. SQUARESPACE

Mailing Address
225 VARICK ST, FL 12

City: NEW YORK State: NY Zip Code: 10014

Purpose of Disbursement: EMAIL HOSTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) 2018

State: District:

Date of Disbursement: 05 / 29 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 26.00

Memo Item

Full Name (Last, First, Middle Initial)

C. STOUT NYC

Mailing Address
133 WEST 33RD ST

City: NEW YORK State: NY Zip Code: 10011

Purpose of Disbursement: FUNDRAISER FOOD/DRINK

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) 2018

State: District:

Date of Disbursement: 06 / 28 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 1125.08

Memo Item

SUBTOTAL of Disbursements This Page (optional) ... 1196.08

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

201807290200638933

**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 79 OF
	<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) **Painter Minnesota**

A. Full Name (Last, First, Middle Initial) **NATION MEDIA**

Mailing Address **1300 E RIVERSIDE DR, APT D901**

City **AUSTIN** State **TX** Zip Code **78741**

Purpose of Disbursement **WEBSITE CONSTRUCTION** Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **2018**

State: District:

Date of Disbursement: **04 / 27 / 2018**

FEC Identification Number **C**

Amount of Each Disbursement this Period **500.00**

Memo Item

B. Full Name (Last, First, Middle Initial) **NATION MEDIA**

Mailing Address **1300 E RIVERSIDE DR, APT D901**

City **AUSTIN** State **TX** Zip Code **78741**

Purpose of Disbursement **WEBSITE CONSTRUCTION** Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **2018**

State: District:

Date of Disbursement: **04 / 16 / 2018**

FEC Identification Number **C**

Amount of Each Disbursement this Period **2000.00**

Memo Item

C. Full Name (Last, First, Middle Initial) **PIZZA LUCE**

Mailing Address **11 E SUPERIOR ST, #100**

City **DULUTH** State **MN** Zip Code **55802**

Purpose of Disbursement **FUNDRAISER FOOD/DRINK** Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **2018**

State: District:

Date of Disbursement: **06 / 15 / 2018**

FEC Identification Number **C**

Amount of Each Disbursement this Period **238.12**

Memo Item

SUBTOTAL of Disbursements This Page (optional) ... **2738.12**

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

201807200200638934

**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 80 OF
	<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)
Painter Minnesota

Full Name (Last, First, Middle Initial)

A. PRICELINE

Mailing Address
800 CONNECTICUT AVE

City NORWALK State CT Zip Code 06854

Purpose of Disbursement
LODGING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) 2018

State: District:

Date of Disbursement
MM / DD / YYYY
06 / 26 / 2018

FEC Identification Number
C

Amount of Each Disbursement this Period
420.98

Memo Item

Full Name (Last, First, Middle Initial)

B. PRICELINE

Mailing Address
800 CONNECTICUT AVE

City NORWALK State CT Zip Code 06854

Purpose of Disbursement
LODGING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) 2018

State: District:

Date of Disbursement
MM / DD / YYYY
06 / 22 / 2018

FEC Identification Number
C

Amount of Each Disbursement this Period
348.02

Memo Item

Full Name (Last, First, Middle Initial)

C. VERIZON

Mailing Address
474 HAMLINE AVE N

City ST. PAUL State MN Zip Code 55104

Purpose of Disbursement
CELL PHONE/WIFI HOTSPOT

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) 2018

State: District:

Date of Disbursement
MM / DD / YYYY
05 / 09 / 2018

FEC Identification Number
C

Amount of Each Disbursement this Period
162.80

Memo Item

SUBTOTAL of Disbursements This Page (optional) ... 931.80

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

201807200200630935

**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 81 OF	
	<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)
PAINTER MINNESOTA

Full Name (Last, First, Middle Initial)		Date of Disbursement							
A. NATIONBUILDER		<table border="1"> <tr> <td>M M</td> <td>D D</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td>25</td> <td>2018</td> </tr> </table>		M M	D D	Y Y Y Y	06	25	2018
M M	D D	Y Y Y Y							
06	25	2018							
Mailing Address 520 S GRAND AVE, FL 2		FEC Identification Number							
City LOS ANGELES	State CA	Zip Code 90071	<input type="checkbox"/> C						
Purpose of Disbursement WEBSITE HOSTING		Amount of Each Disbursement this Period							
Candidate Name		<table border="1"> <tr> <td>2459.05</td> </tr> </table>		2459.05					
2459.05									
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item						
State: District:	2018								

Full Name (Last, First, Middle Initial)		Date of Disbursement							
B. NATIONBUILDER		<table border="1"> <tr> <td>M M</td> <td>D D</td> <td>Y Y Y Y</td> </tr> <tr> <td>05</td> <td>24</td> <td>2018</td> </tr> </table>		M M	D D	Y Y Y Y	05	24	2018
M M	D D	Y Y Y Y							
05	24	2018							
Mailing Address 520 S GRAND AVE, FL 2		FEC Identification Number							
City LOS ANGELES	State CA	Zip Code 90071	<input type="checkbox"/> C						
Purpose of Disbursement WEBSITE HOSTING		Amount of Each Disbursement this Period							
Candidate Name		<table border="1"> <tr> <td>2459.05</td> </tr> </table>		2459.05					
2459.05									
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item						
State: District:	2018								

Full Name (Last, First, Middle Initial)		Date of Disbursement							
C. NATIONBUILDER		<table border="1"> <tr> <td>M M</td> <td>D D</td> <td>Y Y Y Y</td> </tr> <tr> <td>04</td> <td>26</td> <td>2018</td> </tr> </table>		M M	D D	Y Y Y Y	04	26	2018
M M	D D	Y Y Y Y							
04	26	2018							
Mailing Address 520 S GRAND AVE, FL 2		FEC Identification Number							
City LOS ANGELES	State CA	Zip Code 90071	<input type="checkbox"/> C						
Purpose of Disbursement WEBSITE HOSTING		Amount of Each Disbursement this Period							
Candidate Name		<table border="1"> <tr> <td>6459.05</td> </tr> </table>		6459.05					
6459.05									
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item						
State: District:	2018								

SUBTOTAL of Disbursements This Page (optional)...	<table border="1"> <tr> <td>11377.15</td> </tr> </table>	11377.15
11377.15		
TOTAL This Period (last page this line number only)...	<table border="1"> <tr> <td></td> </tr> </table>	

201807200200638936

**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 82 OF			
	<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)
PAINTER MINNESOTA

Full Name (Last, First, Middle Initial)

A. SUN COUNTRY AIRLINES

Date of Disbursement: MM / DD / YYYY
06 / 22 / 2018

Mailing Address: 1300 MENDOTA HEIGHTS RD

City: MENDOTA HEIGHTS State: MN Zip Code: 55120

Purpose of Disbursement: AIRFARE

Candidate Name:

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) 2018

State: District:

FEC Identification Number: C

Amount of Each Disbursement this Period: 273.20

Memo Item

Full Name (Last, First, Middle Initial)

B. US POST OFFICE

Date of Disbursement: MM / DD / YYYY
06 / 06 / 2018

Mailing Address: 1056 HWY 96 E

City: VADNAIS HEIGHTS State: MN Zip Code: 55127

Purpose of Disbursement: POSTAGE

Candidate Name:

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) 2018

State: District:

FEC Identification Number: C

Amount of Each Disbursement this Period: 24.70

Memo Item

Full Name (Last, First, Middle Initial)

C. US POST OFFICE

Date of Disbursement: MM / DD / YYYY
05 / 30 / 2018

Mailing Address: 1056 HWY 96 E

City: VADNAIS HEIGHTS State: MN Zip Code: 55127

Purpose of Disbursement: POSTAGE

Candidate Name:

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) 2018

State: District:

FEC Identification Number: C

Amount of Each Disbursement this Period: 10.00

Memo Item

SUBTOTAL of Disbursements This Page (optional) ... 307.90

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

201807200200030937

**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 83 OF	
	<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)
PAINTER MINNESOTA

Full Name (Last, First, Middle Initial) A. TONY DOOM SUPPLY COMPANY		Date of Disbursement MM / DD / YYYY 06 / 20 / 2018
Mailing Address P.O. BOX 644		FEC Identification Number C
City MARSHALL	State MN	Zip Code 56258
Purpose of Disbursement PRINTING - BUTTONS, STICKERS, BANNERS, T-SHIRTS		Amount of Each Disbursement this Period 3630.91
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	2018
State:	District:	

Full Name (Last, First, Middle Initial) B. US POST OFFICE		Date of Disbursement MM / DD / YYYY 06 / 08 / 2018
Mailing Address 1056 HWY 96 E		FEC Identification Number C
City VADNAIS HEIGHTS	State MN	Zip Code 55127
Purpose of Disbursement POSTAGE		Amount of Each Disbursement this Period 17.75
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	2018
State:	District:	

Full Name (Last, First, Middle Initial) C. US POST OFFICE		Date of Disbursement MM / DD / YYYY 06 / 04 / 2018
Mailing Address 2223 5TH ST		FEC Identification Number C
City SAINT PAUL	State MN	Zip Code 55110
Purpose of Disbursement POSTAGE		Amount of Each Disbursement this Period 10.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	2018
State:	District:	

SUBTOTAL of Disbursements This Page (optional)...	3658.66
TOTAL This Period (last page this line number)...	

201807200200638938

**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 84 OF	
	<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)
Painter Minnesota

Full Name (Last, First, Middle Initial)

A. GRIGGS MIDWAY BUILDING

Mailing Address
1821 UNIVERSITY AVE W

City ST. PAUL State MN Zip Code 55104

Purpose of Disbursement
OFFICE SPACE RENT

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) 2018

State: District:

Date of Disbursement
MM / DD / YYYY
05 / 03 / 2018

FEC Identification Number
C

Amount of Each Disbursement this Period
2510.00

Memo Item

Full Name (Last, First, Middle Initial)

B. GRIGGS MIDWAY BUILDING

Mailing Address
1821 UNIVERSITY AVE W

City ST. PAUL State MN Zip Code 55104

Purpose of Disbursement
OFFICE SPACE RENT

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) 2018

State: District:

Date of Disbursement
MM / DD / YYYY
06 / 01 / 2018

FEC Identification Number
C

Amount of Each Disbursement this Period
1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. BRITTANY WHITE

Mailing Address
213 LYNDALe AVE N

City NEW PRAGUE State MN Zip Code 56071

Purpose of Disbursement
CAMERA/EQUIPMENT PURCHASE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) 2018

State: District:

Date of Disbursement
MM / DD / YYYY
05 / 16 / 2018

FEC Identification Number
C

Amount of Each Disbursement this Period
850.00

Memo Item

SUBTOTAL of Disbursements This Page (optional) ... 4360.00

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

201807200200638939

**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 85 OF			
	<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)
PAINTER MINNESOTA

Full Name (Last, First, Middle Initial) A. MINNESOTA DFL		Date of Disbursement MM / DD / YYYY 05 / 07 / 2018
Mailing Address 255 PLATO BLVD		FEC Identification Number C
City ST. PAUL	State MN	
Zip Code 55107		<input type="checkbox"/> Memo Item
Purpose of Disbursement STATE CONVENTION BOOTH REGISTRATION		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2018	
State: District:		

Full Name (Last, First, Middle Initial) B. ELLEN STANKIEWICZ		Date of Disbursement MM / DD / YYYY 05 / 07 / 2018
Mailing Address 1689 BIRCH LAKE AVE		FEC Identification Number C
City WHITE BEAR LAKE	State MN	
Zip Code 55110		<input type="checkbox"/> Memo Item
Purpose of Disbursement FUNDRAISING CONSULTING		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2018	
State: District:		

Full Name (Last, First, Middle Initial) C. WILLIAM DENNEY		Date of Disbursement MM / DD / YYYY 05 / 07 / 2018
Mailing Address 3316 41ST AVE S		FEC Identification Number C
City MINNEAPOLIS	State MN	
Zip Code 55406		<input type="checkbox"/> Memo Item
Purpose of Disbursement COMPLIANCE CONSULTING		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2018	
State: District:		

SUBTOTAL of Disbursements This Page (optional)...	7200.00
TOTAL This Period (last page this line number)...	

201807200200630940

**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 86 OF	
	<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)
Painter Minnesota

Full Name (Last, First, Middle Initial)
A. JOHN DENNEY

Date of Disbursement
MM / DD / YYYY
05 / 07 / 2018

Mailing Address
512 MAPLE ST

City
TAYLORS FALLS State
MN Zip Code
55084

Purpose of Disbursement
MANAGEMENT CONSULTING Category/Type
C

Candidate Name

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

State: District:

Amount of Each Disbursement this Period
6000.00

Memo Item

Full Name (Last, First, Middle Initial)
B. BILL HALTER

Date of Disbursement
MM / DD / YYYY
05 / 14 / 2018

Mailing Address
7600 PENN AVE SOUTH, E-203

City
RICHFIELD State
MN Zip Code
55423

Purpose of Disbursement
COMMUNICATIONS CONSULTING Category/Type
C

Candidate Name

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

State: District:

Amount of Each Disbursement this Period
2000.00

Memo Item

Full Name (Last, First, Middle Initial)
C. ELLEN STANKIEWICZ

Date of Disbursement
MM / DD / YYYY
05 / 18 / 2018

Mailing Address
1689 BIRCH LAKE AVE

City
WHITE BEAR LAKE State
MN Zip Code
55110

Purpose of Disbursement
FUNDRAISING CONSULTING Category/Type
C

Candidate Name

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

State: District:

Amount of Each Disbursement this Period
500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional) ... **8500.00**

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

201807200200030941

**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 87 OF

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

PAINTER MINNESOTA

Full Name (Last, First, Middle Initial)

A. BILL HALTER			Date of Disbursement
Mailing Address 7600 PENN AVENUE SOUTH, E-203			<input type="text" value="06"/> / <input type="text" value="01"/> / <input type="text" value="2018"/>
City RICHFIELD	State MN	Zip Code 55423	FEC Identification Number <input type="text" value="C"/>
Purpose of Disbursement COMMUNICATIONS CONSULTING		Category/ Type <input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="2000.00"/>
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	2018		

B. KATHLEEN MURPHY			Date of Disbursement
Mailing Address 300 MARSHALL AVE, APT 1			<input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2018"/>
City ST. PAUL	State MN	Zip Code 55102	FEC Identification Number <input type="text" value="C"/>
Purpose of Disbursement DESIGN - LETTERHEAD, SIGNS, LIT, GRAPHICS		Category/ Type <input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="1800.00"/>
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	2018		

C. ELLEN STANKIEWICZ			Date of Disbursement
Mailing Address 1689 BIRCH LAKE AVE			<input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2018"/>
City WHITE BEAR LAKE	State MN	Zip Code 55110	FEC Identification Number <input type="text" value="C"/>
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type <input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="2000.00"/>
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	2018		

SUBTOTAL of Disbursements This Page (optional)...

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

201807200200658942

**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 88 OF

<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)
PAINTER MINNESOTA

A. Full Name (Last, First, Middle Initial)
JOHN DENNEY

Mailing Address
512 MAPLE ST

City **TAYLORS FALLS** State **MN** Zip Code **55084**

Purpose of Disbursement
MANAGEMENT CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) 2018

State: District:

Date of Disbursement: **06 / 01 / 2018**

FEC Identification Number: **C**

Amount of Each Disbursement this Period: **3000.00**

Memo Item

B. Full Name (Last, First, Middle Initial)
ANNA YLINIEMI

Mailing Address
2013 WEST 11TH STREET

City **DULUTH** State **MN** Zip Code **55806**

Purpose of Disbursement
PHONE BANKING PAY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) 2018

State: District:

Date of Disbursement: **06 / 01 / 2018**

FEC Identification Number: **C**

Amount of Each Disbursement this Period: **285.00**

Memo Item

C. Full Name (Last, First, Middle Initial)
COURTNEY PERRY

Mailing Address
7217 MONARDO LANE

City **EDINA** State **MN** Zip Code **55435**

Purpose of Disbursement
PHOTOGRAPHY SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) 2018

State: District:

Date of Disbursement: **05 / 29 / 2018**

FEC Identification Number: **C**

Amount of Each Disbursement this Period: **875.00**

Memo Item

SUBTOTAL of Disbursements This Page (optional) ... **4160.00**

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

201807200200638943

**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 89 OF
	<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)
PAINTER MINNESOTA

A. Full Name (Last, First, Middle Initial)
SAMANTHA DENNEY

Date of Disbursement: MM / DD / YYYY
06 / 01 / 2018

Mailing Address: 512 MAPLE ST

City: TAYLORS FALLS State: MN Zip Code: 55084

Purpose of Disbursement: ADMINISTRATIVE CONSULTING

Candidate Name: [] Category/Type: []

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) 2018

State: District:

FEC Identification Number: C []

Amount of Each Disbursement this Period: 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
TONY STAUBER

Date of Disbursement: MM / DD / YYYY
06 / 01 / 2018

Mailing Address: 95 VICTORIA ST S, APT 18

City: ST. PAUL State: MN Zip Code: 55105

Purpose of Disbursement: POLICY CONSULTING

Candidate Name: [] Category/Type: []

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) 2018

State: District:

FEC Identification Number: C []

Amount of Each Disbursement this Period: 500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
COLTON WITTE

Date of Disbursement: MM / DD / YYYY
05 / 29 / 2018

Mailing Address: 2816 XERXES AVE, APT 3

City: MINNEAPOLIS State: MN Zip Code: 55416

Purpose of Disbursement: VOLUNTEER COORDINATION

Candidate Name: [] Category/Type: []

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) 2018

State: District:

FEC Identification Number: C []

Amount of Each Disbursement this Period: 500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)... 2000.00

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

201807200200030944

**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 90 OF	
	<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)
Painter Minnesota

Full Name (Last, First, Middle Initial)

A. MINNESOTA SECRETARY OF STATE

Mailing Address
60 EMPIRE DR #100

City: ST. PAUL State: MN Zip Code: 55103

Purpose of Disbursement: CANDIDATE FILING FEE

Candidate Name: [] Category/Type: []

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

State: District: 2018

Date of Disbursement: MM / DD / YYYY
05 / 31 / 2018

FEC Identification Number: C []

Amount of Each Disbursement this Period: [] 400.00

Memo Item

Full Name (Last, First, Middle Initial)

B. DO-GOOD BIZ INC.

Mailing Address
1410 ENERGY PARK, SUITE 9

City: ST. PAUL State: MN Zip Code: 55108

Purpose of Disbursement: CAMPAIGN MAILERS

Candidate Name: [] Category/Type: []

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

State: District: 2018

Date of Disbursement: MM / DD / YYYY
05 / 31 / 2018

FEC Identification Number: C []

Amount of Each Disbursement this Period: [] 995.99

Memo Item

Full Name (Last, First, Middle Initial)

C. RODNEY LANGSETH

Mailing Address
202 IRIS LANE

City: ST. JOSEPH State: MN Zip Code: 56374

Purpose of Disbursement: PHONE BANKING PAY

Candidate Name: [] Category/Type: []

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

State: District: 2018

Date of Disbursement: MM / DD / YYYY
06 / 01 / 2018

FEC Identification Number: C []

Amount of Each Disbursement this Period: [] 457.50

Memo Item

SUBTOTAL of Disbursements This Page (optional) ... [] 1853.49

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

201807200200636945

**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 91 OF	
	<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)
PAINTER MINNESOTA

Full Name (Last, First, Middle Initial) A. ELLEN STANKIEWICZ			Date of Disbursement MM / DD / YYYY 06 / 16 / 2018
Mailing Address 1689 BIRCH LAKE AVE			FEC Identification Number C
City WHITE BEAR LAKE	State MN	Zip Code 55110	Amount of Each Disbursement this Period 2000.00
Purpose of Disbursement FUNDRAISING CONSULTING			<input type="checkbox"/> Memo Item
Candidate Name			Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	2018		

Full Name (Last, First, Middle Initial) B. COLTON WITTE			Date of Disbursement MM / DD / YYYY 06 / 15 / 2018
Mailing Address 2816 XERXES AVE, APT 3			FEC Identification Number C
City MINNEAPOLIS	State MN	Zip Code 55416	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement VOLUNTEER COORDINATION			<input type="checkbox"/> Memo Item
Candidate Name			Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	2018		

Full Name (Last, First, Middle Initial) C. JOHN DENNEY			Date of Disbursement MM / DD / YYYY 06 / 15 / 2018
Mailing Address 512 MAPLE ST			FEC Identification Number C
City TAYLORS FALLS	State MN	Zip Code 55084	Amount of Each Disbursement this Period 2000.00
Purpose of Disbursement MANAGEMENT CONSULTING			<input type="checkbox"/> Memo Item
Candidate Name			Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	2018		

SUBTOTAL of Disbursements This Page (optional)...	5000.00
TOTAL This Period (last page this line number)...	

201807200200638946

**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 92 OF

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

PAINTER MINNESOTA

Full Name (Last, First, Middle Initial)

A.			Date of Disbursement																						
Full Name (Last, First, Middle Initial) TONY STAUBER			<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>8</td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	5		2	0	1	8
M	M	/	D	D	/	Y	Y	Y	Y																
0	6		1	5		2	0	1	8																
Mailing Address 95 VICTORIA ST			FEC Identification Number C																						
City ST PAUL	State MN	Zip Code 55105	Amount of Each Disbursement this Period 1000.00																						
Purpose of Disbursement POLICY CONSULTING			<input type="checkbox"/> Memo Item																						
Candidate Name			Category/Type																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		2018																						
State:	District:																								

B.			Date of Disbursement																						
Full Name (Last, First, Middle Initial) BILL HALTER			<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>8</td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	5		2	0	1	8
M	M	/	D	D	/	Y	Y	Y	Y																
0	6		1	5		2	0	1	8																
Mailing Address 7600 PENN AVE SOUTH, E-203			FEC Identification Number C																						
City RICHFIELD	State MN	Zip Code 55423	Amount of Each Disbursement this Period 2000.00																						
Purpose of Disbursement COMMUNICATIONS CONSULTING			<input type="checkbox"/> Memo Item																						
Candidate Name			Category/Type																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		2018																						
State:	District:																								

C.			Date of Disbursement																						
Full Name (Last, First, Middle Initial) SAMANTHA DENNEY			<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>8</td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	5		2	0	1	8
M	M	/	D	D	/	Y	Y	Y	Y																
0	6		1	5		2	0	1	8																
Mailing Address 512 MAPLE ST			FEC Identification Number C																						
City TAYLORS FALLS	State MN	Zip Code 55084	Amount of Each Disbursement this Period 500.00																						
Purpose of Disbursement ADMINISTRATIVE CONSULTING			<input type="checkbox"/> Memo Item																						
Candidate Name			Category/Type																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		2018																						
State:	District:																								

SUBTOTAL of Disbursements This Page (optional)...

3500.00

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

201807200200638947

**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 93 OF	
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c

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NAME OF COMMITTEE (In Full)
PAINTER MINNESOTA

Full Name (Last, First, Middle Initial)		Date of Disbursement							
A. PERMANENT ADG		<table border="1"> <tr> <td>M M</td> <td>D D</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td>15</td> <td>2018</td> </tr> </table>		M M	D D	Y Y Y Y	06	15	2018
M M	D D	Y Y Y Y							
06	15	2018							
Mailing Address 1828 JEFFERSON ST NE		FEC Identification Number							
City MINNEAPOLIS	State MN	<table border="1"> <tr> <td>C</td> </tr> </table>		C					
C									
Purpose of Disbursement WEB DESIGN AND DEVELOPMENT	Zip Code 55418	Amount of Each Disbursement this Period							
Candidate Name	Category/Type	<table border="1"> <tr> <td>1500.00</td> </tr> </table>		1500.00					
1500.00									
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>							
State: District:	2018								

Full Name (Last, First, Middle Initial)		Date of Disbursement							
B. WDIO-TV		<table border="1"> <tr> <td>M M</td> <td>D D</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td>19</td> <td>2018</td> </tr> </table>		M M	D D	Y Y Y Y	06	19	2018
M M	D D	Y Y Y Y							
06	19	2018							
Mailing Address 10 OBSERVATION RD		FEC Identification Number							
City DULUTH	State MN	<table border="1"> <tr> <td>C</td> </tr> </table>		C					
C									
Purpose of Disbursement TV AD BUY	Zip Code 55811	Amount of Each Disbursement this Period							
Candidate Name	Category/Type	<table border="1"> <tr> <td>1211.25</td> </tr> </table>		1211.25					
1211.25									
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>							
State: District:	2018								

Full Name (Last, First, Middle Initial)		Date of Disbursement							
C. FLYOVER FILMS		<table border="1"> <tr> <td>M M</td> <td>D D</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td>15</td> <td>2018</td> </tr> </table>		M M	D D	Y Y Y Y	06	15	2018
M M	D D	Y Y Y Y							
06	15	2018							
Mailing Address 1229 NE 2ND ST		FEC Identification Number							
City MINNEAPOLIS	State MN	<table border="1"> <tr> <td>C</td> </tr> </table>		C					
C									
Purpose of Disbursement VIDEO PRODUCTION	Zip Code 55413	Amount of Each Disbursement this Period							
Candidate Name	Category/Type	<table border="1"> <tr> <td>5847.00</td> </tr> </table>		5847.00					
5847.00									
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>							
State: District:	2018								

SUBTOTAL of Disbursements This Page (optional)...	<table border="1"> <tr> <td>8558.25</td> </tr> </table>	8558.25
8558.25		
TOTAL This Period (last page this line number)...	<table border="1"> <tr> <td></td> </tr> </table>	

201807200200638948

**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 94 OF 94	
	<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)
PAINTER MINNESOTA

Full Name (Last, First, Middle Initial) ALEX BUCK		Date of Disbursement MM / DD / YYYY 05 / 29 / 2018
Mailing Address 13310 58TH AVE N, UNIT D		FEC Identification Number C
City PLYMOUTH	State MN	Zip Code 55442
Purpose of Disbursement WEB DEVELOPMENT CONSULTING		Amount of Each Disbursement this Period 1500.00
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	2018	

Full Name (Last, First, Middle Initial) KATHERINE VAALER		Date of Disbursement MM / DD / YYYY 05 / 27 / 2018
Mailing Address 221 JANALYN CIR		FEC Identification Number C
City GOLDEN VALLEY	State MN	Zip Code 55416
Purpose of Disbursement REIMBURSEMENT		Amount of Each Disbursement this Period 314.63
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	2018	

Full Name (Last, First, Middle Initial) TRADER JOE'S		Date of Disbursement MM / DD / YYYY 05 / 25 / 2018
Mailing Address 11220 WAYZATA BLVD		FEC Identification Number C
City MINNETONKA	State MN	Zip Code 55305
Purpose of Disbursement FUNDRAISER FOOD/DRINK		Amount of Each Disbursement this Period 314.63
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:	2018	

SUBTOTAL of Disbursements This Page (optional)...	1814.63
TOTAL This Period (last page this line number only)...	90457.44

201807200200638949

INSPECTION

United States Senate
Post Office



FedEx carbon-neutral
envelope shipping

Express

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WILLIAM DENNEY
3316 41ST AVE S
MINNEAPOLIS, MN 55406

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OFFICE OF PUBLIC RECORDS
232 HART SENATE OFFICE BUILDING

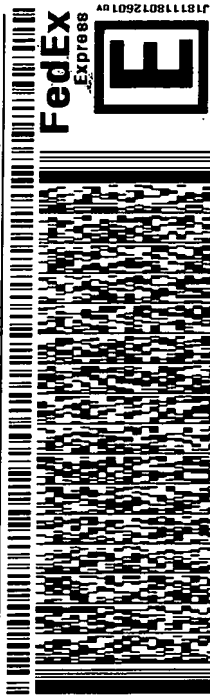
WASHINGTON DC 20510

(612) 269-9502 REF1

DEPT

POST

SHIP DATE: 16 JUL 18
ACTWT: 1.10 LB
CAD: 6989928/55F01904



TUE - 17 JUL 10:30A
PRIORITY OVERNIGHT

TRK# 7818 5857 9020

XC YKNA

20510 IAD
DC-US



Senatorial Post Office
July 16 2018

RT 729 2 10:30 9020
FZ 07.17

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____
Date of Receipt

USPS FIRST CLASS MAIL _____
Date of Receipt Postmark

USPS REGISTERED/CERTIFIED _____
Postmark

USPS PRIORITY MAIL _____
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	7/16/18	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

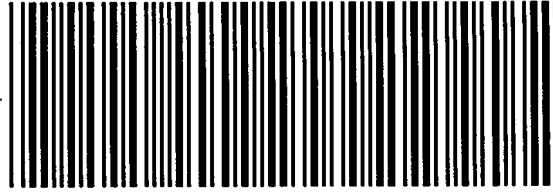
POSTMARK ILLEGIBLE NO POSTMARK

FAX _____
Date of Receipt

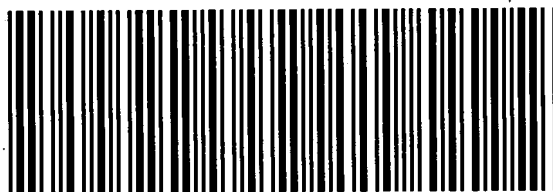
OTHER _____
Date of Receipt or Postmark

PREPARER **BP** DATE PREPARED **7/19/18**

201807200200838951



SEN PATCH



SEN PATCH

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