

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 MNCD6 GOP Federal Committee

ADDRESS (number and street) 614 - 5th Ave. S Sartell MN 56377

2. FEC IDENTIFICATION NUMBER C00550467 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report. (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31. (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special. (d) 30-Day POST-Election Report for the: General, Runoff, Special.

5. Covering Period 10 / 01 / 2013 through 12 / 31 / 2013

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

Type or Print Name of Treasurer Andrew Allen Aplikowski

Signature of Treasurer Andrew Allen Aplikowski [Electronically Filed] Date 02 / 21 / 2014

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**MNCD6 GOP Federal Committee**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="0.00"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="16251.65"/>	<input type="text" value="16251.65"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="16251.65"/>	<input type="text" value="16251.65"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="10773.48"/>	<input type="text" value="10773.48"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="5478.17"/>	<input type="text" value="5478.17"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

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

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

## DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**MNCD6 GOP Federal Committee**

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 01 / 2013 To: M M / D D / Y Y Y Y 12 / 31 / 2013

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	2312.50	2312.50
(ii) Unitemized .....	4739.15	4739.15
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	7051.65	7051.65
(b) Political Party Committees .....	200.00	200.00
(c) Other Political Committees (such as PACs).....	9000.00	9000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	16251.65	16251.65
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	16251.65	16251.65
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	16251.65	16251.65

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

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II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	7444.70	7444.70
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	7444.70	7444.70
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	3328.78	3328.78
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	10773.48	10773.48
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10773.48	10773.48

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	16251.65	16251.65
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	16251.65	16251.65
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	7444.70	7444.70
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	7444.70	7444.70

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 18
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**MNCD6 GOP Federal Committee**

**A. Beverly Aplikowski**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1443 Bussard Ct.  
City Arden Hills State MN Zip Code 55112  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Lakeside Homes, Inc. Occupation CEO  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **500.00**

Date of Receipt **10 / 15 / 2013**  
**Transaction ID : SA11AI.4247**  
Amount of Each Receipt this Period **500.00**  
Dinner Tickets

**B. Kevin Arnold**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1300 Meadowbrook Ln. NE  
City Sauk Rapids State MN Zip Code 56379  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Columbia Gear Occupation Machinist  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **500.00**

Date of Receipt **11 / 19 / 2013**  
**Transaction ID : SA11AI.4174**  
Amount of Each Receipt this Period **500.00**  
Dinner Tickets

**C. Kevin Arnold**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1300 Meadowbrook Ln. NE  
City Sauk Rapids State MN Zip Code 56379  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Columbia Gear Occupation Machinist  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **562.50**

Date of Receipt **11 / 26 / 2013**  
**Transaction ID : SA11AI.4212**  
Amount of Each Receipt this Period **62.50**  
Dinner Ticket

**SUBTOTAL** of Receipts This Page (optional)..... **1062.50**  
**TOTAL** This Period (last page this line number only).....

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

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

FOR LINE NUMBER: PAGE 7 OF 18  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**MNCD6 GOP Federal Committee**

Full Name (Last, First, Middle Initial)  
**A. Marge Gruenes**  
 Mailing Address 5651 West Oakes Dr.  
 City State Zip Code  
 St. Cloud MN 56303  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Retired Retired  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 02 / 2013  
**Transaction ID : SA11AI.4272**  
 Amount of Each Receipt this Period  
 250.00  
 Dinner Tickets

Full Name (Last, First, Middle Initial)  
**B. Harry Niska**  
 Mailing Address 5766 - 162nd Crossing NW  
 City State Zip Code  
 Ramsey MN 55303  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Ross & Orenstein, LLC. Attorney  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 14 / 2013  
**Transaction ID : SA11AI.4319**  
 Amount of Each Receipt this Period  
 500.00  
 Dinner Tickets

Full Name (Last, First, Middle Initial)  
**C. Adam Orbeck**  
 Mailing Address 27212 Co. Rd. 10  
 City State Zip Code  
 Paynesville MN 56362  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Wesbeck Trucking Office Manager  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 19 / 2013  
**Transaction ID : SA11AI.4172**  
 Amount of Each Receipt this Period  
 500.00  
 Dinner Tickets

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	2312.50

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 18
<input type="checkbox"/> 11a	<input checked="" type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**MNCD6 GOP Federal Committee**

Full Name (Last, First, Middle Initial)  
**A. ABELER4SENATE**

Mailing Address **600 EAST MAIN STREET**

City **ANOKA** State **MN** Zip Code **55303**

FEC ID number of contributing federal political committee. **C C00546630**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **125.00**

Date of Receipt  
**12 / 14 / 2013**  
**Transaction ID : SA11B.4313**

Amount of Each Receipt this Period  
**125.00**

Dinner Tickets and Vendor Table

Full Name (Last, First, Middle Initial)  
**B. JULIANNE MN INC**

Mailing Address **PO BOX 173**

City **CHASKA** State **MN** Zip Code **55318**

FEC ID number of contributing federal political committee. **C C00548446**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **75.00**

Date of Receipt  
**12 / 14 / 2013**  
**Transaction ID : SA11B.4317**

Amount of Each Receipt this Period  
**75.00**

Dinner Ticket and Vendor Table

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) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>200.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>200.00</b>



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

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

FOR LINE NUMBER: PAGE 9 OF 18  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**MNCD6 GOP Federal Committee**

**A. 15B House District RPM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13492 - 3rd St. Apt. 31  
 City State Zip Code  
 Becker MN 55308  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 19 / 2013  
**Transaction ID : SA11C.4176**  
 Amount of Each Receipt this Period  
 400.00  
 Dinner Tickets

**B. 35th Senate District RPM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14131 Junkite St. NW  
 City State Zip Code  
 Ramsey MN 55303  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 27 / 2013  
**Transaction ID : SA11C.4119**  
 Amount of Each Receipt this Period  
 500.00  
 Donation

**C. Benson (Michelle) for Senate**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2022 - 144th Ln. NE  
 City State Zip Code  
 Ham Lake MN 55304  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 27 / 2013  
**Transaction ID : SA11C.4111**  
 Amount of Each Receipt this Period  
 500.00  
 Dinner Tickets

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1400.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 18
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**MNCD6 GOP Federal Committee**

Full Name (Last, First, Middle Initial) <b>A. Branden (Petersen) for Senate</b>		Date of Receipt MM / DD / YYYY 10 / 27 / 2013
Mailing Address 13440 Uplander St. NW		<b>Transaction ID : SA11C.4115</b>
City Andover	State MN	Zip Code 55304
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	Dinner Tickets
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. CHRIS DAHLBERG FOR US SENATE</b>		Date of Receipt MM / DD / YYYY 10 / 27 / 2013
Mailing Address PMB #119 4602 GRAND AVE SUITE 500		<b>Transaction ID : SA11C.4113</b>
City DULUTH	State MN	Zip Code 55807
FEC ID number of contributing federal political committee. C C00550459		Amount of Each Receipt this Period 125.00
Name of Employer	Occupation	Dinner tickets and vendor table
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 125.00	

Full Name (Last, First, Middle Initial) <b>C. Citizens for Ernie Leidiger</b>		Date of Receipt MM / DD / YYYY 11 / 11 / 2013
Mailing Address 7775 Tacoma Ave.		<b>Transaction ID : SA11C.4147</b>
City Mayer	State MN	Zip Code 55360
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer	Occupation	Dinner Tickets
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	825.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

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NAME OF COMMITTEE (In Full)  
**MNCD6 GOP Federal Committee**

**A. Citizens for Ernie Leidiger**  
Full Name (Last, First, Middle Initial)  
Mailing Address 7775 Tacoma Ave.  
City Mayer State MN Zip Code 55360  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 26 / 2013  
**Transaction ID : SA11C.4219**  
Amount of Each Receipt this Period 100.00  
Dinner Tickets

**B. Citizens for Runbeck (Linda)**  
Full Name (Last, First, Middle Initial)  
Mailing Address 48 E. Golden Lake Rd.  
City Circle Pines State MN Zip Code 55014  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 05 / 2013  
**Transaction ID : SA11C.4138**  
Amount of Each Receipt this Period 500.00  
Dinner Tickets

**C. Dave Brown for Senate**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 614  
City Becker State MN Zip Code 55308  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 50.00

Date of Receipt 10 / 27 / 2013  
**Transaction ID : SA11C.4122**  
Amount of Each Receipt this Period 50.00  
Dinner Ticket

**SUBTOTAL** of Receipts This Page (optional).....▶ 650.00  
**TOTAL** This Period (last page this line number only).....▶

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

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

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NAME OF COMMITTEE (In Full)  
**MNCD6 GOP Federal Committee**

**A. EMMER FOR CONGRESS**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 998

City ANOKA	State MN	Zip Code 55303
FEC ID number of contributing federal political committee. C 00545749		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 27 / 2013  
**Transaction ID : SA11C.4117**

Amount of Each Receipt this Period  
400.00

Dinner Tickets

**B. FREEDOM CLUB FEDERAL PAC**  
Full Name (Last, First, Middle Initial)  
Mailing Address P. O. BOX 416

City CHAMPLIN	State MN	Zip Code 55316
FEC ID number of contributing federal political committee. C 00307777		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 14 / 2013  
**Transaction ID : SA11C.4315**

Amount of Each Receipt this Period  
500.00

Dinner Tickets

**C. Friends of (Michelle) Fischbach**  
Full Name (Last, First, Middle Initial)  
Mailing Address 416 Burr St.

City Paynesville	State MN	Zip Code 56362
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50.00	

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
11 / 19 / 2013  
**Transaction ID : SA11C.4168**

Amount of Each Receipt this Period  
50.00

Dinner Ticket

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	950.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

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NAME OF COMMITTEE (In Full)  
**MNCD6 GOP Federal Committee**

Full Name (Last, First, Middle Initial)  
**A. Friends of David FitzSimmons**

Mailing Address 10731 Cnty Rd 37 NE

City Albertville	State MN	Zip Code 55301
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	22	/	2013

**Transaction ID : SA11C.4103**

Amount of Each Receipt this Period  
1000.00

Dinner Tickets

Full Name (Last, First, Middle Initial)  
**B. Johnson (Jeff) for Governor**

Mailing Address 3500 Vicksburg Ln. #416

City Plymouth	State MN	Zip Code 55447
------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
125.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	22	/	2013

**Transaction ID : SA11C.4200**

Amount of Each Receipt this Period  
125.00

Dinner tickets and vendor table

Full Name (Last, First, Middle Initial)  
**C. MCFADDEN FOR SENATE**

Mailing Address PO BOX 4039

City SAINT PAUL	State MN	Zip Code 55104
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C C00545921**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
425.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	25	/	2013

**Transaction ID : SA11C.4206**

Amount of Each Receipt this Period  
425.00

Dinner Tickets and Vendor Table

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1550.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

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NAME OF COMMITTEE (In Full)  
**MNCD6 GOP Federal Committee**

**A. MN CD6 GOP State Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 614 - 5th Ave. S

City Sartell	State MN	Zip Code 56377
-----------------	-------------	-------------------

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	22	/	2013

**Transaction ID : SA11C.4105**

Amount of Each Receipt this Period  
1000.00

Donation

**B. Republican Liberty Caucus of Minnesota**

Full Name (Last, First, Middle Initial)  
Mailing Address 328 - 1st Ave. S

City South St. Paul	State MN	Zip Code 55075
------------------------	-------------	-------------------

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2013

**Transaction ID : SA11C.4128**

Amount of Each Receipt this Period  
500.00

Dinner Tickets

**C. Scott (Peggy Sue) for Minnesota House**

Full Name (Last, First, Middle Initial)  
Mailing Address 1363 - 146th Ave. NW

City Andover	State MN	Zip Code 55304
-----------------	-------------	-------------------

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2013

**Transaction ID : SA11C.4126**

Amount of Each Receipt this Period  
500.00

Dinner Tickets

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)  
**MNCD6 GOP Federal Committee**

**A. SIVARAJAH FOR CONGRESS**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 490485

City BLAINE	State MN	Zip Code 55449
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FEC ID number of contributing federal political committee. **C** C00546283

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2013

**Transaction ID : SA11C.4132**

Amount of Each Receipt this Period  
400.00

Dinner Tickets

**B. Tim Sanders Volunteer Committee**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2064 119th Ave. NE

City Blaine	State MN	Zip Code 55434
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FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2013

**Transaction ID : SA11C.4109**

Amount of Each Receipt this Period  
500.00

Dinner Tickets

**C. Volunteers for Zerwas**  
Full Name (Last, First, Middle Initial)  
Mailing Address 12778 - 183rd Ct. NW

City Elk River	State MN	Zip Code 55330
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FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

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

**Transaction ID : SA11C.4293**

Amount of Each Receipt this Period  
500.00

Dinner Tickets

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1400.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 16 OF 18  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**MNCD6 GOP Federal Committee**

**A. Win with Nguyen (Dennis)**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 490603

City Minneapolis	State MN	Zip Code 55449
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FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	02	/	2013

**Transaction ID : SA11C.4258**

Amount of Each Receipt this Period  
225.00

Dinner Tickets and vendor table

**B.**  
Full Name (Last, First, Middle Initial)  
Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

**C.**  
Full Name (Last, First, Middle Initial)  
Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	225.00
<b>TOTAL</b> This Period (last page this line number only).....▶	9000.00



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MNCD6 GOP Federal Committee**

Full Name (Last, First, Middle Initial)

**A. MN CD6 GOP State Committee**

Mailing Address 614 - 5th Ave. S

City Sartell State MN Zip Code 56377

Purpose of Disbursement  
Reimbursement for Fundraiser Deposit

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				06				2013					

Transaction ID : SB21B.4236

Amount of Each Disbursement this Period

5	0	0	.	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. MOnTicello Community Education**

Mailing Address 302 Washington St.

City Monticello State MN Zip Code 55362

Purpose of Disbursement  
2014 Convention Downpayment

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				16				2013					

Transaction ID : SB21B.4240

Amount of Each Disbursement this Period

5	0	3	.	1	0
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Full Name (Last, First, Middle Initial)

**C. Unique Dining Experience**

Mailing Address 13545 Martin St. NW

City Andover State MN Zip Code 55304

Purpose of Disbursement  
Fundraising Dinner Expense

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				09				2013					

Transaction ID : SB21B.4238

Amount of Each Disbursement this Period

6	2	6	.	8	9	0
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

7	2	7	.	2	0	0
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**TOTAL** This Period (last page this line number only)..... ▶

7	2	7	.	2	0	0
---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MNCD6 GOP Federal Committee**

Full Name (Last, First, Middle Initial)

**A. Accurate Press**

Mailing Address 1561 Old Highway 8

City New Brighton State MN Zip Code 55112

Purpose of Disbursement  
Fundraising Mailing

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 26 / 2013

Transaction ID : SB29.4226

Amount of Each Disbursement this Period

1612.00

Full Name (Last, First, Middle Initial)

**B. US Postmaster**

Mailing Address PO Box 645015

City St. Paul State MN Zip Code 55164

Purpose of Disbursement  
Postage for Fundraising Mailer

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 13 / 2013

Transaction ID : SB29.4232

Amount of Each Disbursement this Period

1557.16

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

3169.16

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

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

3169.16

3169.16