PAGE 1 / 46

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An	Authorized Comi	nittee			Office Use Only
NAME OF COMMITTEE (in f	TYPE OR PRIM ull)		mple: If typin r the lines.	g, type	12FE4M5	
Gerson for Con	gress					
1						
	1005.0					
ADDRESS (number and	street)	Ave				
Check if diffe						
than previous reported. (AC		Paul 			MN	55075
2. FEC IDENTIFICA	ATION NUMBER ▼	CITY ▲			STATE A	ZIP CODE A STATE ▼ DISTRICT
C C00523738		3. IS THIS REPORT	NEW (N)	OR	× AMEND (A)	
4. TYPE OF REP	ORT (Choose One)	 (b) 12-Day PRE -	Election Repo	ort for the:		
(a) Quarterly Rep	oorts:	П	Primary (12P	,	General (1	12G) Runoff (12R)
X April 15	Quarterly Report (Q1)			_	_	
July 15 (Quarterly Report (Q2)		Convention (12C)	Special (1	2S)
	15 Quarterly Report (Q3)	Election on	M M /	D D /	Y " Y " Y " Y	in the State of
January 3	31 Year-End Report (YE)	(c) 30-Day POS	Г-Election Rep	oort for the:		
			General (30G	i)	Runoff (30	DR) Special (30S)
Terminati	on Report (TER)	Election on	M M /	D D /	Y Y Y Y	in the State of
5. Covering Period	01 / 01 D	/ Y Y Y Y Y Z Y Z Z Z Z Z Z Z Z Z Z Z Z	through	M M M	/ 31 /	Y Y Y Y Y 2015
-	amined this Report and a	to the best of my kno	owledge and	belief it is tr	rue, correct and	d complete.
Type or Print Name of	Treasurer David Adam	Gerson				
Signature of Treasurer	David Adam Gerson		[Electronically l	Filed] [Date 05	/ D D / Y Y Y Y Y Y 2015
NOTE: Submission of fa	alse, erroneous, or incomp	lete information may s	ubject the per	son signing	this Report to the	he penalties of 2 U.S.C. §437g.
Office Use Only						FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

PAGE 2 / 46

03

31

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Gerson t	for	Congress
----------	-----	----------

01 2015 01 2015 Report Covering the Period: From: To: **COLUMN A COLUMN B Election Cycle-to-Date** This Period Net Contributions (other than loans) **Total Contributions** (a) 870.00 870.00 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 870.00 870.00 (subtract Line 6(b) from Line 6(a)) Net Operating Expenditures (a) Total Operating Expenditures 3727.13 3961.28 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 3727.13 3961.28 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 2439.46 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 151067.41 Schedule C and/or Schedule D).....

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 PAGE 3 / 46 FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Gerson for Congress

03 Report Covering the Period: From: To:

	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
1.	CONTRIBUTIONS (other than loans) FROM:		
	(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	500.00	500.00
	(ii) Unitemized	370.00	370.00
	(iii) TOTAL of contributions from individuals	870.00	870.00
	(b) Political Party Committees (c) Other Political Committees	0.00	0.00
	(such as PACs)	0.00	0.00
	(d) The Candidate	0.00	0.00
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	870.00	870.00
	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
	LOANS: (a) Made or Guaranteed by the		
	(a) Made or Guaranteed by the Candidate	3500.00	3500.00
	(b) All Other Loans(c) TOTAL LOANS	0.00	0.00
	(add Lines 13(a) and (b))	3500.00	3500.00
	OFFSETS TO OPERATING EXPENDITURES		
	(Refunds, Rebates, etc.)	0.00	0.00
	OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	4370.00	4370.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 46

COLUMN A COLUMN B II. DISBURSEMENTS **Total This Period Election Cycle-to-Date** 3727.13 3961.28 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER 0.00 0.00 AUTHORIZED COMMITTEES 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed 0.00 0.00 by the Candidate..... 0.00 0.00 (b) Of All Other Loans TOTAL LOAN REPAYMENTS 0.00 0.00 (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: Individuals/Persons Other 0.00 0.00 Than Political Committees 0.00 0.00 (b) Political Party Committees..... Other Political Committees 0.00 0.00 (such as PACs) TOTAL CONTRIBUTION REFUNDS 0.00 0.00 (add Lines 20(a), (b), and (c))..... 0.00 0.00 21. OTHER DISBURSEMENTS 22. TOTAL DISBURSEMENTS 3727.13 3961.28 (add Lines 17, 18, 19(c), 20(d), and 21) III. CASH SUMMARY 1796.59 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...... 4370.00 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... 6166.59 25. SUBTOTAL (add Line 23 and Line 24)..... 3727.13 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...... 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD 2439.46 (subtract Line 26 from Line 25).....

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:				PAGE	:	5	OF		46	
(check only one)										
×	11a		11b		11c		11	d		
	12		13a		13b		14	ı [15

		I I	12 13a 13b 14 15	
	ny information copied from such Reports and S for commercial purposes, other than using the		erson for the purpose of soliciting contributions	
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) Gerson for Congress			
۹.	Full Name (Last, First, Middle Initial) Diane Ganz Mailing Address 250 Hammond Pond Pkwy		Date of Receipt	
	City Chestnut Hill	State Zip Code MA 02467	03 09 2015 Transaction ID : SA11AI.5611	
	FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period 500.00	
	Name of Employer Homemaker Receipt For: 2016	Occupation Homemaker Election Cycle-to-Date	_	
	Primary General Other (specify)	500.00		
3.	Full Name (Last, First, Middle Initial) Mailing Address		Date of Receipt	
	City	M M / D D / Y Y Y Y Y		
	FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period	
	Name of Employer	Occupation		
	Receipt For: Primary General Other (specify)	Election Cycle-to-Date		
•	Full Name (Last, First, Middle Initial)		Date of Receipt	
	Mailing Address City	State Zip Code	M = M / D = D / Y = Y = Y	
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period	
	Name of Employer			
	Receipt For: Primary General Other (specify)	Election Cycle-to-Date		
s	SUBTOTAL of Receipts This Page (optional)		500.00	
Т	TOTAL This Period (last page this line number of	only)	500.00	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

	FOR LINE NUMBER:	PAGE	6 OF	46			
Use separate schedule(s)	(check only one)						
for each category of the	11a 11b	11c	11d	_			
Detailed Summary Page	12 X 13a	13b	14	15			

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

NAME OF COMMITTEE (In Full) Gerson for Congress Full Name (Last, First, Middle Initial) David Adam Gerson Date of Receipt Mailing Address 1035 Summit Ave 2015 04 City State Zip Code Transaction ID: SA13A.5608 MN 55075 South Saint Paul FEC ID number of contributing Amount of Each Receipt this Period H2MN02130 federal political committee. 3500.00 Name of Employer Occupation Loan Meggitt Engineer Receipt For: 2016 Election Cycle-to-Date | Primary General 3500.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt B. Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) 3500.00 SUBTOTAL of Receipts This Page (optional)..... 3500.00 TOTAL This Period (last page this line number only).....

ITEMIZED DISBURSEMENTS

46 FOR LINE NUMBER: **PAGE** SCHEDULE B (FEC Form 3) Use separate schedule(s) (check only one) for each category of the X 17 18 19a 19b Detailed Summary Page 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) Gerson for Congress Full Name (Last, First, Middle Initial) Date of Disbursement Data Validation 2015 Mailing Address 75 5th St. NW 13 City State Zip Code Amount of Each Disbursement this Period GA Atlanta 30308 Purpose of Disbursement 46.96 Email Screening 003 Transaction ID: SB17.5598 Candidate Name Category/ Type Disbursement For: 2016 Office Sought: House Senate Primary General Other (specify) President District: Full Name (Last, First, Middle Initial) Data Validation Date of Disbursement Mailing Address 75 5th St. NW 01 13 2015 City State Zip Code Amount of Each Disbursement this Period GΑ 30308 Atlanta 0.88 Purpose of Disbursement **Email Screening** 003 Transaction ID: SB17.5600 Candidate Name Category/ Type Disbursement For: Office Sought: House 2016 Senate Primary General Other (specify) President State: District: Full Name (Last, First, Middle Initial) c. Lions Roar Studios Date of Disbursement Mailing Address 23710 State Highway 55 03 05 2015 City State Zip Code Amount of Each Disbursement this Period 55357-9587 Loretto MN Purpose of Disbursement 3500.00 Web Services 003 Transaction ID : SB17.5609 Candidate Name Category/ Type Disbursement For: 2016 Office Sought: House General Senate Primary President Other (specify) State: District:

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

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

3547.84

S

			ı		<u> </u>	2007 2 27 10	
	CHEDULE B EMIZED DISI	•	-	Use separate sch for each category Detailed Summar	nedule(s) y of the	FOR LINE NUMBER: PAGE 8 OF 46 (check only one) X 17	
						erson for the purpose of soliciting contributions e to solicit contributions from such committee.	
\rangle	NAME OF COMMIT Gerson for C	, ,					
۱.	Full Name (Last, Fine Mail Chimp	rst, Middle Initial)				Date of Disbursement	•
	Mailing Address 51	2 Means St.				01 13 2015	
	City Atlanta Purpose of Disburs	omont	State GA	Zip Code 30318		Amount of Each Disbursement this Period 55.00	
	Email Services Candidate Name	ешеш			003 Category/	Transaction ID : SB17.5603	
	Office Sought:	House Senate President	Disbursement For: Primary Other (s	General	Type		
	State: [Full Name (Last, Fire	District: rst, Middle Initial)					•
3.	Mail Chimp Mailing Address 5	·				Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City		State	Zip Code			-
	Atlanta		GA	30318		Amount of Each Disbursement this Period	
	Purpose of Disburs Email Services	ement			003	55.00 Transaction ID : SB17.5607	
					Category/ Type		
	Office Sought:	House Senate President	Disbursement For: Primary Other (s	General			
	State: [District: rst, Middle Initial)					
).	Mail Chimp	·				Date of Disbursement	
	Mailing Address 51	2 Means St.				03 13 2015	
	City Atlanta			o Code 0318		Amount of Each Disbursement this Period	
	Purpose of Disburs Email Services					50.00	
	Candidate Name				Category/ Type	Transaction ID : SB17.5612	
	Office Sought:	House Senate President	Disbursement For: Primary Other (s	General			
_	State: [District:					
						160.00	

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

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

SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate sched for each category on Detailed Summary F	lule(s) (cl	DR LINE NUMBER: PAGE 9 OF 46 heck only one) X 17		
Any information copied from such Reports and Statements or for commercial purposes, other than using the name ar			rson for the purpose of soliciting contributions		
NAME OF COMMITTEE (In Full) Gerson for Congress					
Full Name (Last, First, Middle Initial) A. Piryx, Inc.			Date of Disbursement		
Mailing Address 144 2nd St. 1st Floor			02 06 2015		
City State San Francisco CA	Zip Code 94105-3718		Amount of Each Disbursement this Period		
Purpose of Disbursement Donation Processing Candidate Name	[003 Category/	Transaction ID : SB17.5623		
		Туре			
State: District: Full Name (Last, First, Middle Initial) Piryx, Inc. Mailing Address 144 2nd St. 1st Floor			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City State San Francisco CA	Zip Code 94105-3718		Amount of Each Disbursement this Period		
Purpose of Disbursement Donation Processing Candidate Name	34103-3710	003 Category/	4.50 Transaction ID : SB17.5624		
Office Sought: House Senate President State: Disbursement Prima Othe	For: 2016 ary General r (specify)	Type			
Full Name (Last, First, Middle Initial)					
Piryx, Inc. Mailing Address 144 2nd St. 1st Floor			Date of Disbursement M M / D D / Y Y Y Y 03 11 _ 2015 _		
City State San Francisco CA	Zip Code 94105-3718		Amount of Each Disbursement this Period		
Purpose of Disbursement Donation Processing		003	0.90		
Candidate Name	"	Category/ Type	Transaction ID : SB17.5625		
State: District:					
SUBTOTAL of Disbursements This Page (optional)			6.30		

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

S

	1001 000001 <u>1</u>									
SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS		for eac	Use separate schedule(s) for each category of the Detailed Summary Page			LINE NUME ck only one) X 17 20a		PAGI	E 10	OF 46
	ny information copied from such Reports and State for commercial purposes, other than using the na					n for the pu			g contri	ibutions
<u> </u>	<u>-</u>	ne and address t	or arry por	tical committe	ice io	SOIICIT COTITI	Dutions i	TOTTI SUC	on com	Tillitee.
	NAME OF COMMITTEE (In Full) Gerson for Congress									
_	Full Name (Last, First, Middle Initial)									
A.	A. Skype					Date of Dis	burseme		Y	V
	Mailing Address 23-29 Rives de Clausen					03	27	L	2015	
	,	State Zip	Code			Amount of	Each Dis	bursem	ent this	Period
	Purpose of Disbursement	 -							10	0.00
	Phone Service			003		ransaction I	-	5612		
	Candidate Name			Category/ Type		ansaction	D . 3B17	.5015		
	Office Sought: House Senate President Disburser	nent For: 2016 Primary Other (specify)	General	311-2						
	State: District:									
В.	Full Name (Last, First, Middle Initial) Skype					Date of Dis				_
	Mailing Address 23-29 Rives de Clausen					03 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			Y	
	City	State Zip	Code			Amount of	Fach Dis	bursem	ent this	Period
	Luxembourg	ZZ								
	Purpose of Disbursement Phone Service			003	٦ ٦	ransaction I	D : SB17			2.99
	Candidate Name			Category/ Type						
	Office Sought: House Disburser Senate President	nent For: 2016 Primary Other (specify)	General							
	State: District:	(1)/								
	Full Name (Last, First, Middle Initial)									
C.						Date of Dis				_
	Mailing Address					M M /	D " D	/ Y	Y Y	Y
	City State	Zip Code				Amount of	Each Dis	bursem	ent this	Period
	Purpose of Disbursement				7		,	,	-	
	Candidate Name			Category/ Type	/					
	Office Sought: House Disburser Senate President	nent For: Primary Other (specify)	General							
	State: District:	orner (specify)								

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

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

12.99

3727.13

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

11

X	13a
	13h

46

Detailed Summary Page Transaction ID: SC/10.4392 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) \blacktriangledown 1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 16554.96 0.00 16554.96 **TERMS** Date Incurred Date Due Interest Rate Secured: 29 ^M 05^M Ž012 1/1/2020 0.00 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 16554.96 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

12

X	13a
	13b

46

Detailed Summary Page Transaction ID: SC/10.4365 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) \blacktriangledown 1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 10000.00 0.00 10000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 07^M ^D19^D Ž012 0.00 NA % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 10000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

13

×	13a
	13b

46

Detailed Summary Page Transaction ID: SC/10.4381 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) \blacktriangledown 1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D24^D ^M 07^M Ž012 0.00 NA % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE

14

	i
X	13a
	13b

46

(check only one) Detailed Summary Page Transaction ID: SC/10.4468 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) \blacktriangledown 1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 5.00 0.00 5.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D24^D ^M 07^M Ž012 0.00 NA % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 5.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

15

X	13a
	13h

46

Detailed Summary Page Transaction ID: SC/10.4128 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) \blacktriangledown 1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 07^M ^D26 Ž012 0.00 NA % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

16

×	13a
	13b

46

Detailed Summary Page Transaction ID: SC/10.4389 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) \blacktriangledown 1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 01 ^M08^M Ž012 0.00 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

17

×	13a
	13b

46

Detailed Summary Page Transaction ID: SC/10.4129 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) \blacktriangledown 1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M08^M ^D10^D Ž012 0.00 NA % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

18

×	13a
	13b

46

Detailed Summary Page Transaction ID: SC/10.4470 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) \blacktriangledown 1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 6.00 0.00 6.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M08^M ^D10^D Ž012 0.00 NA % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 6.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE

19

	il.
X	13a
	13b

46

(check only one) Detailed Summary Page Transaction ID: SC/10.4130 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) \blacktriangledown 1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 1000.00 0.00 1000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M08^M ^D 17 Ž012 0.00 NA % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 1000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE

20

	il.
X	13a
	13b

46

(check only one) Detailed Summary Page Transaction ID: SC/10.4131 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) \blacktriangledown 1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 1000.00 0.00 1000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 20 ^M08^M Ž012 0.00 NA % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 1000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE

21

×	13a
	13h

46

(check only one) Detailed Summary Page Transaction ID: SC/10.4442 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) \blacktriangledown 1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 479.33 0.00 479.33 **TERMS** Date Incurred Date Due Interest Rate Secured: 22 ^M 02^M 2013 1/1/2020 0.00 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 479.33 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

22

X	13a
	13b

46

Detailed Summary Page Transaction ID: SC/10.4444 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) \blacktriangledown 1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 3000.00 0.00 3000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D25 ^M 02^M 2013 1/1/2020 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 3000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE

23

	1
X	13a
	13b

46

(check only one) Detailed Summary Page Transaction ID: SC/10.4464 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) \blacktriangledown 1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 3000.00 0.00 3000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D26 ^M 03^M 2013 1/1/2020 0.00 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 3000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

24

×	13a
	13b

46

Detailed Summary Page Transaction ID: SC/10.4502 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) \blacktriangledown 1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 4000.00 0.00 4000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D 18^D ^M 04 2013 0.00 1/1/20 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 4000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

25

×	13a
	13b

46

Detailed Summary Page Transaction ID: SC/10.4545 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) \blacktriangledown 1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 4000.00 0.00 4000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D 13^D ^M 05^M 2013 0.00 1/1/20 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 4000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

PAGE 26

E NUMBER: nly one) X 13a

46

DANS			Detailed Summary	Page	(check only o	ne) /	13b
AME OF COMMITTEE (In Full) Gerson for Congress			Trar	saction	ID : SC/10.4591		
LOAN SOURCE Full Name (Last David Adam Gerson	t, First, Middle Initial)	1	[PERSONAL FUNDS	-,	ction: 2014 Primary		
Mailing Address					General Other (specify)	•	
1035 Summit Ave					, , , , , , , , , , , , , , , , , , , ,	<u> </u>	
City South Saint Paul	State MN	ZIP Cod 55075	de				
Original Amount of Loan	Cumulat	ive Payment To	Date	Balance (Outstanding at (Close of Thi	is Period
	000.00	, ,	0.00		, , ,	5000.	
TERMS Date Incurred	Y Y M M /	Date Due	Interest			Secured:	
M06 ^M / D10 ^D / Y 201	3		1/1/20 Y	0.00	% (apr)	Yes	× No
List All Endorsers or Guaranton		ource					
1. Full Name (Last, First, Middle	nitial)		Name of Employer				
Mailing Address			Occupation				
City	State ZIP Co	de	Amount Guaranteed Outstanding:]
2. Full Name (Last, First, Middle	Initial)		Name of Employer				
Mailing Address			Occupation				
City	State ZIP Co	de	Amount Guaranteed Outstanding:		7]
3. Full Name (Last, First, Middle	Initial)		Name of Employer				
Mailing Address			Occupation				
City	State ZIP Co	de	Amount Guaranteed Outstanding:	- 7]
4. Full Name (Last, First, Middle	Initial)		Name of Employer				
Mailing Address			Occupation				
City	State ZIP Co	de	Amount Guaranteed Outstanding:	- 7	7]
UBTOTALS This Period This Page	(optional)		·····		7 7	5000.	.00
OTALS This Period (last page in t			,		7 7		
Carry outstanding balance only to	LINE 3, Schedule D, 1	tor this line. If i	no Schedule D, carry	torward	to appropriate	line of Sun	nmary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

27

×	13a
	13b

46

Detailed Summary Page Transaction ID: SC/10.4622 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) \blacktriangledown 1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 131.12 0.00 131.12 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D30 ^M06^M 2013 0.00 1/1/20 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 131.12 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 28

46

DANS			Detailed Summary Page		X 13a 13b
AME OF COMMITTEE (In Full) Gerson for Congress			Transac	ction ID : SC/10.5169	
	ant First Middl	a laitial\		Floring	
LOAN SOURCE Full Name (I David Adam Gerson	_ast, First, Milddi	e initial)	[PERSONAL FUNDS]	Election: 2014 Primary General	
Mailing Address 1035 Summit Ave				Other (specify) ▼	
City	S	tate ZIP C	ode		
South Saint Paul		MN 55075	5		
Original Amount of Loan	1	Cumulative Payment To	o Date Bala	ance Outstanding at Close of	This Period
2	5000.00	,	0.00	500	00.00
TERMS Date Incurred		Date Due	e Interest Rate	e Secure	d:
	2013 Y	M / D D / Y	1/1/20 Y 0.00	0 % (apr)	X
List All Endorsers or Guaran	tors (if any) to I	_oan Source		Yes	s No
1. Full Name (Last, First, Mid	Idle Initial)		Name of Employer		
Mailing Address			Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:	7	
2. Full Name (Last, First, Midd	dle Initial)		Name of Employer		
Mailing Address			Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:	7	
3. Full Name (Last, First, Midd	dle Initial)		Name of Employer		
Mailing Address			Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:	9 1 9 1 0	
4. Full Name (Last, First, Midd	dle Initial)		Name of Employer		
Mailing Address			Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:	7	
SUBTOTALS This Period This Pa	age (optional)		·····	500	00.00
TOTALS This Period (last page in	n this line only)			· · · · · · · · · · · · · · · · · · ·	
Carry outstanding balance only	to LINE 3. Sched	lule D. for this line. If	f no Schedule D. carry for	ward to appropriate line of S	ummarv.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

29

	1
X	13a
	13b

46

Detailed Summary Page Transaction ID: SC/10.5170 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) \blacktriangledown 1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 07^M ^D29^D 2013 0.00 1/1/20 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE

30

X	13a
	13h

46

(check only one) Detailed Summary Page Transaction ID: SC/10.5172 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) ullet1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D 19^D ^M08^M 2013 0.00 1/1/20 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE

31

×	13a
	13h

46

(check only one) Detailed Summary Page Transaction ID: SC/10.5173 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) ullet1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 09^M ^D12 2013 0.00 1/1/20 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE 32

46

LOANS		Detailed Summary Pag	(Crieck Offig Offe)	13a 13b
NAME OF COMMITTEE (In Full) Gerson for Congress		Transac	tion ID : SC/10.5174	
LOAN SOURCE Full Name (Last, First, Midd David Adam Gerson Mailing Address 1035 Summit Ave	lle Initial)	[PERSONAL FUNDS]	Election: 2014 ✓ Primary General Other (specify) ▼	
	710.0-	-1-		
City South Saint Paul	State ZIP Co. MN 55075	ae		
Original Amount of Loan	Cumulative Payment To	Date Bala	nce Outstanding at Close of This F	
Date Incurred Mo9M / Date Incurred Mo9M / Date Incurred	Date Due	Interest Rate		No
List All Endorsers or Guarantors (if any) to 1. Full Name (Last, First, Middle Initial)	Loan Source	Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:	, ,	
2. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:	7	
3. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:	, , , , , , ,	
4. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:	, ,	
SUBTOTALS This Period This Page (optional) TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3. Sche		······································	3000.00	

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

33

X	13a
	13h

46

Detailed Summary Page Transaction ID: SC/10.5202 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) ullet1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 04 ^M 10^M 2013 0.00 1/1/20 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE

34

×	13a
	13b

46

(check only one) Detailed Summary Page Transaction ID: SC/10.5203 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) ullet1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 10^M ^D16 2013 0.00 1/1/20 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE 35

X	13a
	13b

OF

46

OANS		Detailed Summary Page (check only one)
AME OF COMMITTEE (In Full)		Transaction ID : SC/10.5204
Gerson for Congress		
LOAN SOURCE Full Name (Last,	First, Middle Initial)	[PERSONAL FUNDS] Election: 2014 Primary
David Adam Gerson		General
Mailing Address 1035 Summit Ave		Other (specify) ▼
City	State ZIP	Code
South Saint Paul	MN 550	75
Original Amount of Loan	Cumulative Payment	
5000	.00	0.00 5000.00
TERMS Date Incurred	Date D	Due Interest Rate Secured:
M 10 M / D 23 D / Y Ž013	Y M M / D D /	^Y 1/1/20
List All Endorsers or Guarantors	(if any) to Loan Source	100 110
1. Full Name (Last, First, Middle In	nitial)	Name of Employer
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle In	tial)	Name of Employer
Mailing Address		Occupation
3		Amount
City	State ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle In	tial)	Name of Employer
Mailing Address		Occupation
		Amount
City	State ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle In	tial)	Name of Employer
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This Page (c	· · · · · · · · · · · · · · · · · · ·	
FOTALS This Period (last page in this	iiile Offiy)	-
Carry outstanding balance only to LIN	IE 3, Schedule D, for this line.	. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

×	13a
	13b

46

Detailed Summary Page Transaction ID: SC/10.5205 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) ullet1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: м _{= М} 04 2013 0.00 1/1/20 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

37

×	13a		
	13b		

46

Detailed Summary Page Transaction ID: SC/10.5206 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) ullet1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 4000.00 0.00 4000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: м _{= М} ^D 13^D 2013 0.00 1/1/20 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 4000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE

38

	il
X	13a
	13h

46

(check only one) Detailed Summary Page Transaction ID: SC/10.5207 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) ullet1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 3000.00 0.00 3000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: м _{= М} ^D 19^D 2013 0.00 1/1/20 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 3000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE

39

×	13a
	13b

46

(check only one) Detailed Summary Page Transaction ID: SC/10.5208 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) ullet1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 4000.00 0.00 4000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: м _{= М} ^D29^D 2013 0.00 1/1/20 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 4000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

40

×	13a
	13b

46

Detailed Summary Page Transaction ID: SC/10.5209 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) ullet1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 4000.00 0.00 4000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 12^M 09 2013 0.00 1/1/20 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 4000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

41

×	13a		
	13b		

46

Detailed Summary Page Transaction ID: SC/10.5210 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) ullet1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 3000.00 0.00 3000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^м 12^м ^D16 2013 0.00 1/1/20 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 3000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

42

×	13a	
	13b	

46

Detailed Summary Page Transaction ID: SC/10.5542 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) ullet1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 3000.00 0.00 3000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 01 ^M 08 ž014 0.00 1/1/20 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 3000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

43

×	13a		
	13b		

46

Detailed Summary Page Transaction ID: SC/10.5543 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) ullet1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 01 ^M ^D16 ž014 0.00 1/1/20 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

44

X	13a	
	13b	

46

Detailed Summary Page Transaction ID: SC/10.5544 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) ullet1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 10000.00 0.00 10000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 02^M ^D26 ž014 0.00 1/1/20 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 10000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE

45

	i
×	13a
	13h

46

LOANS (check only one) Detailed Summary Page Transaction ID: SC/10.5587 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary David Adam Gerson General Mailing Address Other (specify) ullet1035 Summit Ave City State ZIP Code MN 55075 South Saint Paul Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 391.00 0.00 391.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 28 ^M 10^M ž014 0.00 NA % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 391.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE 46

X 13a

46

DANS .			Detailed Summary Pa	ge (crieck only one)
AME OF COMMITTEE (In Full) Gerson for Congress			Transa	ction ID : SC/10.5608
LOAN SOURCE Full Name (Last, David Adam Gerson	First, Middle	Initial)	[PERSONAL FUNDS]	Election: 2016 Primary General
Mailing Address 1035 Summit Ave				Other (specify)
City	Sta	te ZIP Co	ode	
South Saint Paul	М	N 55075		
Original Amount of Loan	0.00	umulative Payment To	Date Bala	ance Outstanding at Close of This Period 3500.00
Date Incurred M 03 / D 04 D / Y 2015	M	Date Due	Interest Rat	
List All Endorsers or Guarantors		an Source		
1. Full Name (Last, First, Middle	Initial)		Name of Employer	
Mailing Address			Occupation	
City	State Z	IP Code	Amount Guaranteed Outstanding:	7
2. Full Name (Last, First, Middle In	nitial)		Name of Employer	
Mailing Address			Occupation	
City	State Z	IP Code	Amount Guaranteed Outstanding:	7
3. Full Name (Last, First, Middle In	nitial)		Name of Employer	
Mailing Address			Occupation	
City	State Z	IP Code	Amount Guaranteed Outstanding:	7
4. Full Name (Last, First, Middle In	nitial)		Name of Employer	
Mailing Address			Occupation	
City	State Z	IP Code	Amount Guaranteed Outstanding:	9 9
SUBTOTALS This Period This Page (optional)		·····	3500.00
OTALS This Period (last page in thi	s line only)		•	151067.41
Carry outstanding balance only to Li	NE 3, Schedu	le D, for this line. If	no Schedule D, carry for	ward to appropriate line of Summary.