PAGE 1 / 43

FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

1 0111111 0	For An Auth	norized Com	mittee	Offic	ce Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼		cample: If typing, type er the lines.	12FE4M5	
Gerson for Congress					
	PO Box 1465				
ADDRESS (number and street)					
Check if different					
than previously reported. (ACC)	Burnsville			MN 553	37
2. FEC IDENTIFICATION N	IIIMRED 🔻	CITY ▲		STATE ▲	ZIP CODE ▲
C C00523738		3. IS THIS REPORT	NEW (N) OR	AMENDED (A)	STATE ▼ DISTRICT MN 02 □
4. TYPE OF REPORT (CI	hoose One)) 12-Day PRF	-Election Report for t	·he·	
(a) Quarterly Reports:) 12-Day File	·		П
April 15 Quarterly	Report (Q1)	ᆜ	Primary (12P)	General (12G)	Runoff (12R)
July 15 Quarterly	Report (O2)	Ш	Convention (12C)	Special (12S)	
October 15 Quarte		Election on	M M / D	D / Y Y Y Y	in the State of
January 31 Year-E	nd Report (YE) (c	30-Day POS	ST -Election Report for	the:	
			General (30G)	Runoff (30R)	Special (30S)
Termination Repor	t (TER)	Election on		7 Y Y Y Y Y	in the State of
5. Covering Period	01 01 Y	Y Y Y 2022	through	03 / D D / Y	y y y 2022
I certify that I have examined to	Gerson, David, , ,		nowledge and belief it	t is true, correct and con	mplete.
Ger Signature of Treasurer	rson, David, , ,		[Electronically Filed]	Date 04 /	12 / Y Y Y Y Y 2022
NOTE: Submission of false, error	neous, or incomplete in	nformation may	subject the person sig	ning this Report to the pe	enalties of 52 U.S.C. §30109
Office Use Only				F	FEC FORM 3 (Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

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FEC Form 3 (Revised 05/2016)

Write or Type Committee Name Gerson for Congress

			COLUMN A This Period	COLUMN B Election Cycle-to-Date
6.	Net	Contributions (other than loans)		
	(a)	Total Contributions (other than loans) (from Line 11(e))	0.00	0.00
	(b)	Total Contribution Refunds (from Line 20(d))	0.00	0.00
	٠,,	Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	0.00	0.00
7.	Net	Operating Expenditures		
	(a)	Total Operating Expenditures (from Line 17)	0.00	0.00
	(b)	Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
	(c)	Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	0.00	0.00
8.		n on Hand at Close of orting Period (from Line 27)	0.00	
9.	the	ts and Obligations Owed TO Committee (Itemize all on edule C and/or Schedule D)	0.00	
10.	the	ts and Obligations Owed BY Committee (Itemize all on edule C and/or Schedule D)	171460.36	

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

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FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Gerson for Congress

Report Covering the Period: From: 01 01 2022 To: 03 31 2022

I. RECEIPTS		COLUMN A Total This Period	COLUMN B Election Cycle-to-Date	
1. C	CONTRIBUTIONS (other than loans) FROM:			
(a	•			
	Political Committees (i) Itemized (use Schedule A)	0.00	0.00	
	(ii) Unitemized	0.00	0.00	
	(iii) TOTAL of contributions from individuals	0.00	0.00	
(b	,	0.00	0.00	
(0	c) Other Political Committees (such as PACs)	0.00	0.00	
(c (€	TOTAL CONTRIBUTIONS	0.00	0.00	
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	0.00	
	RANSFERS FROM OTHER	0.00	0.00	
Α	UTHORIZED COMMITTEES	0.00	0.00	
	OANS: a) Made or Guaranteed by the			
(c	Candidate	0.00	0.00	
(k	,	0.00	0.00	
(0	c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	0.00	
	PFFSETS TO OPERATING			
	XPENDITURES Refunds, Rebates, etc.)	0.00	0.00	
	OTHER RECEIPTS Dividends, Interest, etc.)	0.00	0.00	
- 1	OTAL RECEIPTS (add Lines 1(e), 12, 13(c), 14, and 15) Carry Total to Line 24, page 4)	0.00	0.00	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 05/2016)

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COLUMN A COLUMN B II. DISBURSEMENTS **Total This Period Election Cycle-to-Date** 0.00 0.00 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 (c) 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 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 0.00 0.00 (add Lines 17, 18, 19(c), 20(d), and 21) III. CASH SUMMARY 0.00 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...... 0.00 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... 0.00 25. SUBTOTAL (add Line 23 and Line 24)..... 0.00 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...... 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD 0.00 (subtract Line 26 from Line 25).....

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

FOR LINE NUMBER: (check only one)

PAGE

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X 13a

OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4392
LOAN SOURCE Full Name (Last, First, M	liddle Initial)	Memo Item Election: 2012
Gerson, David, Adam, ,	nadic iiiliaij	Memo Item Clection: 2012
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
16554.96	,	0.00 16554.96
TERMS Date Incurred]	Date Due Interest Rate Secured: (If none, enter 0)
M05M / D29D / Y Ž01Ž Y	M M / D D	/ Y 1/1/2020 Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any)	to Loan Source	
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	•	Name of Employer
Mailing Address		Occupation
	I	Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional	\	
COSTOTALO TINO I ENOU TINO FAGE (Optional	,	16554.96
TOTALS This Period (last page in this line or	nly)	······································
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s 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

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OF

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13b Transaction ID: SC/10.4365 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 10000.00 0.00 10000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 ^D19^D M 07M Ž01Ž YNA Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code 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 Detailed Summary Page

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FOR LINE NUMBER: (check only one)

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OF

						130	
	ME OF COMMITTEE (In Full) Serson for Congress				Trans	saction ID : SC/10.4381	
Ľ							
	LOAN SOURCE Full Name (Last, Gerson, David, Adam, ,	First, Mic	ldle Initial)		☐ Memo Ite	m Election: 2012 x Primary	
						General	
	Mailing Address PO Box 1465					Other (specify)	
	City		State	ZIP Co	de	✗ Personal Funds of the Candidate	
	Burnsville		MN	55337		1 ersonal runus of the Candidate	
	Original Amount of Loan		Cumulative Pay	yment To	Date B	alance Outstanding at Close of This Period	
	5000	0.00			0.00	5000.00	
	TERMS Date Incurred		С	Date Due	Interest R (If none, er		
	^M 07 ^M / ^D 24 ^D / Y Ž01Ž	Y	M M / D D	/ Y	YNA Y	0.00 % (apr) Yes X No	
	List All Endorsers or Guarantors	(if any) to	o Loan Source				
	1. Full Name (Last, First, Middle I				Name of Employer		
	Mailing Address				Occupation		
					Amount		
	City	State	ZIP Code		Guaranteed Outstanding:	9 9	
	2. Full Name (Last, First, Middle In	itial)			Name of Employer		
	Mailing Address				Occupation		
					Amount		
•	City	State	ZIP Code		Guaranteed Outstanding:	. , ,	
	3. Full Name (Last, First, Middle In	itial)			Name of Employer		
	Mailing Address				Occupation		
					Amount		
	City	State	ZIP Code		Guaranteed Outstanding:	7	
	4. Full Name (Last, First, Middle In	itial)			Name of Employer		
	Mailing Address				Occupation		
					Amount		
	City	State	ZIP Code		Guaranteed Outstanding:	9 9	
			·				
SI	UBTOTALS This Period This Page (optional)			······	5000.00	
т	OTALS This Period (last page in this	s line only	y)		······		
С	carry outstanding balance only to LI	NE 3. Sch	nedule D. for this	s line. If	no Schedule D. carrv fo	prward to appropriate line of Summary.	
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Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4468
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Floation: 2042
Gerson, David, Adam, ,	viidule iriitiai)	☐ Memo Item
Mailing Address PO Box 1465		Other (specify) ———————————————————————————————————
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
5.00	9	0.00 5.00
TERMS Date Incurred	[Date Due Interest Rate Secured: (If none, enter 0)
M 07M / D24D / Y Ž01Ž Y	M M / D D	y YNA Y 0.00
List All Endorsers or Guarantors (if any) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	·	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional		5.00
TOTALS This Period (last page in this line of	nly)	······
Carry outstanding balance only to LINE 3, S	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

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FOR LINE NUMBER: (check only one)

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				,, , , , , ,	13b	
NAME OF COMMITTEE (In Full)			Tra	ansaction ID : SC/10.4128		
Gerson for Congress						
LOAN SOURCE Full Name (Last, First, Mic	ddle Initial)		☐ Memo	Item Election: 2012		
Gerson, David, Adam, ,				x Primary		
NA-US A-I-I				General		
Mailing Address PO Box 1465				Other (specify)		
City	State	ZIP Code		Personal Funds of the Cand	lidate	
Burnsville	MN	55337		T Grownar Furnas of the Guille		
Original Amount of Loan	Cumulative Pay	yment To Da	ite	Balance Outstanding at Close of This F	eriod'	
5000.00		7	0.00	5000.00		
TERMS Date Incurred	С	Date Due	Interest (If none,	et Rate Secured:		
M07 ^M / D26 ^D / Y Z01Z Y	M M / D D	/ Y Y	NA Y	0.00 % (apr) Yes	No	
List All Endorsers or Guarantors (if any) t	o Loan Source					
1. Full Name (Last, First, Middle Initial)		N	ame of Employer			
Mailing Address		C	occupation			
		A	mount			
City	ZIP Code		uaranteed utstanding:			
2. Full Name (Last, First, Middle Initial)	2. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address		C	ccupation			
			mount			
City	ZIP Code		uaranteed outstanding:	y		
3. Full Name (Last, First, Middle Initial)		٨	Name of Employer			
Mailing Address		C	occupation			
		Α	mount			
City State	ZIP Code		uaranteed outstanding:			
4. Full Name (Last, First, Middle Initial)		N	ame of Employer			
Mailing Address		С	ccupation			
		A	mount			
City	ZIP Code	G	duaranteed outstanding:	7		
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				y y		
Carry outstanding balance only to LINE 3. Sci	hadula D for this	s line If no	Schedule D. carn	v forward to appropriate line of Summ	arv	

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

FOR LINE NUMBER: (check only one)

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			Detailed Guillinary I	age	13b
NAME OF COMMITTEE (In Full)			Trans	action ID : SC/10.4389	
Gerson for Congress					
LOAN SOURCE Full Name (Last, First, Mic	ddle Initial)		☐ Memo Itei	m Election: 2012	
Gerson, David, Adam, ,			_	x Primary	
				General	
Mailing Address PO Box 1465				Other (specify)	
City	State	ZIP Code)		
Burnsville	MN	55337		Personal Funds of the	Candidate
Original Amount of Loan	Cumulative Pay	yment To D	ate Ba	alance Outstanding at Close of T	his Period
5000.00	,	, ,	0.00	5000	0.00
TERMS Date Incurred	D	Date Due	Interest Ra		i:
M08M / D01D / Y Ž01Ž Y	M M / D D	/ Y Y		0.00 % (apr) Yes	x No
List All Endorsers or Guarantors (if any) to	o Loan Source				
1. Full Name (Last, First, Middle Initial)		1	Name of Employer		
Mailing Address		(Occupation		
			Amount		_
City State	ZIP Code	I	Guaranteed Outstanding:	y y	
2. Full Name (Last, First, Middle Initial)		1	Name of Employer		
Mailing Address		(Occupation		
		7	Amount		
City State	ZIP Code		Guaranteed Outstanding:	7 7 7 7 7	
3. Full Name (Last, First, Middle Initial)	-	1	Name of Employer		
Mailing Address		(Occupation		
			Amount		
City	ZIP Code		Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Initial)		1	Name of Employer		
Mailing Address			Occupation		
			Amount		
City State	ZIP Code		Guaranteed Outstanding:	7 7	
	l				
SUBTOTALS This Period This Page (optional).			······································	5000).00
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Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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NAME OF COMMITTEE (In Gerson for Congres			Transa	action ID : SC/10.4129		
Gerson, David, Ac	•	ddle Initial)	☐ Memo Iter	m Election: 2012 x Primary General		
Mailing Address PO Box 1465				Other (specify) ▼		
City	City State ZIP 0			Personal Funds of the Candidate		
Burnsville		MN	55337			
Original Amount of Loa		Cumulative Page		alance Outstanding at Close of This Period		
	5000.00	9	0.00	5000.00		
TERMS Date Inco	urred		Date Due Interest Ra (If none, ent			
M08M / D10D /	^Y Ž01Ž ^Y	M M / D D	/ Y YNAY Y	0.00 % (apr) Yes X No		
List All Endorsers or G		o Loan Source				
1. Full Name (Last, First	st, Middle Initial)		Name of Employer			
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:	2		
2. Full Name (Last, First	t, Middle Initial)		Name of Employer	Name of Employer		
Mailing Address			Occupation			
Cit.	04-4-	71D O1-	Amount Guaranteed			
City	State	ZIP Code	Outstanding:	y		
3. Full Name (Last, First	t, Middle Initial)		Name of Employer			
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed			
·			Outstanding:	9 9		
4. Full Name (Last, First	i, ivilaale initial)		Name of Employer			
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed			
Oity	State	ZIF Code	Outstanding:	9 9		
SUBTOTALS This Period T	This Page (optional)			5000.00		
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Carry outstanding balance	oniv to LINE 3. Sch	ieauie D, for this	s line. It no Schedule D, carry fo	rward to appropriate line of Summary.		

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

FOR LINE NUMBER: (check only one)

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4470
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Election: 0040
Gerson, David, Adam, ,	viidale Illitial)	☐ Memo Item
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
6.00		0.00 6.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
^M 08 ^M / □10 □ / □ Ž01Ž □ Y	M M / D D	/ Y YNA Y 0.00 % (apr) Yes X 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
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	·	Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (options	al)	
CODICIALS THIS FEHOU THIS FAGE (OPHONE	٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠	6.00
TOTALS This Period (last page in this line of	only)	······································
Carry outstanding balance only to LINE 3,	Schedule D, for thi	s 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)

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4130
LOAN SOURCE Full Name (Last, First, M	Middle Initial)	Memo Item Election: 2012
Gerson, David, Adam, ,	madio miliary	Memo Item Clection: 2012
Mailing Address PO Box 1465		Other (specify) ▼
City	State	ZIP Code Second Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
1000.00	,	0.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M08M / D17D / Y Ž01Ž Y	M M / D D	/ Y YNAY Y 0.00 % (apr) Yes X 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
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	1	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional	l)·····	1000.00
TOTALS This Period (last page in this line o	nly)	······································
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s 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)

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Transaction ID: SC/10.4131 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 1000.00 0.00 1000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 ^D20^D ^M80^M Ž01Ž YNA Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code 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 Detailed Summary Page

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FOR LINE NUMBER:
(check only one)

						130		
AME OF COMMITTEE (In Full) Gerson for Congress					Transa	ction ID : SC/10.4442		
LOAN SOURCE Full Name (Last,	First, Mid	ddle Initial)			Memo Item	Election: 2014		
Gerson, David, Adam, ,					Primary General			
Mailing Address PO Box 1465						Other (specify) Other (specify)		
City		State	ZIP Cod	le				
Burnsville		MN	55337			Personal Funds of the Candidate		
Original Amount of Loan		Cumulative Pay	yment To	Date	Bal	ance Outstanding at Close of This Perio		
7 7 479	.33		,	0.00		479.33		
TERMS Date Incurred		D	Date Due		Interest Rat (If none, enter			
M02M / D22D / Y Z013	Υ	M M / D D	/ Y 1/	/Ĭ/20Ž0 ^Ÿ	0	% (apr) Yes X No		
List All Endorsers or Guarantors	(if any) t	o Loan Source						
1. Full Name (Last, First, Middle Ir	nitial)			Name of Em	ployer			
Mailing Address				Occupation				
	Γ_	T		Amount Guaranteed				
City	State	ZIP Code Outstanding				9 9		
2. Full Name (Last, First, Middle Ini	2. Full Name (Last, First, Middle Initial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:		, , , , , , , ,		
3. Full Name (Last, First, Middle Ini	tial)			Name of Em				
Mailing Address				Occupation				
				Amount				
City	State	ZIP Code		Guaranteed Outstanding:		7		
4. Full Name (Last, First, Middle Ini	tial)	!		Name of Employer				
Mailing Address				Occupation				
0.11	<u>.</u> .	T=15 0 .		Amount Guaranteed				
City	State	ZIP Code		Outstanding:		7		
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	NE 3, Scl	nedule D, for this	s line. If n	o Schedule	D, carry for	ward to appropriate line of Summary.		

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

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NAME OF COMMITTEE (In Full) Transaction ID: SC/10.4444 Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 3000.00 0.00 3000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 ^D25^D M 02M ž013 Y 1/1/2020 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code 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 Detailed Summary Page

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OF

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	ME OF COMMITTEE (In Full) Serson for Congress				Trans	saction ID : SC/10.4464			
Ц		=							
	LOAN SOURCE Full Name (Last, Gerson, David, Adam, ,	First, Mic	ldle Initial)		☐ Memo Ite	Election: 2014 X Primary			
	Mailing Address PO Box 1465					General Other (specify) ▼			
	City State ZIP C				de				
	Burnsville	MN 5533				Personal Funds of the Candidate			
Original Amount of Loan Cumulative Payment To				yment To	Date B	alance Outstanding at Close of This Period			
	3000	0.00	,		0.00	3000.00			
	TERMS Date Incurred		C	ate Due	Interest R (If none, er				
	^M 03 ^M / D26 ^D / Y Ž013́	Υ	M M / D D	/ Y	/Ť/20Ž0 ^Y	0.00 % (apr) Yes X No			
	List All Endorsers or Guarantors	(if anv) to	o Loan Source						
	1. Full Name (Last, First, Middle I				Name of Employer				
	Mailing Address				Occupation				
					Amount				
	City	State	ZIP Code		Guaranteed Outstanding:				
	2. Full Name (Last, First, Middle Initial)				Name of Employer				
	Mailing Address				Occupation				
					Amount				
	City State ZIP Code				Guaranteed Outstanding:				
	3. Full Name (Last, First, Middle In	itial)			Name of Employer				
	Mailing Address				Occupation				
		·			Amount				
	City	State	ZIP Code		Guaranteed Outstanding:	7			
	4. Full Name (Last, First, Middle In	itial)			Name of Employer				
	Mailing Address				Occupation				
		_			Amount				
	City	State	ZIP Code		Guaranteed Outstanding:	7			
SI	UBTOTALS This Period This Page (optional)			<u> </u>	3000.00			
T	OTALS This Period (last page in this	s line only	y)		······				
С	carry outstanding balance only to LI	NE 3, Sch	nedule D, for this	s line. If	no Schedule D, carry fo	orward to appropriate line of Summary.			
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Use separate schedule(s) for each category of the Detailed Summary Page

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Transaction ID: SC/10.4502 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 4000.00 0.00 4000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D 18D M 04M ž013 1/1/20 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code 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

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OF

AME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4545
LOAN SOURCE Full Name (Last, First, M Gerson, David, Adam, ,	Memo Item Election: 2014 X Primary General	
Mailing Address PO Box 1465		Other (specify) ▼
City	State	ZIP Code ** Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	ment To Date Balance Outstanding at Close of This Period
4000.00		0.00 4000.00
TERMS Date Incurred	Γ	ate Due Interest Rate Secured: (If none, enter 0)
M05 ^M / D13 ^D / Y Ž013 Y	M M / D D	/ Y 1ÿ1/2ŏ Y 0.00
List All Endorsers or Guarantors (if any)	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City	ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed
	ZIP Code	Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed
City	ZIP Code	Outstanding:
SUBTOTALS This Period This Page (optional)	4000.00
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Carry outstanding balance only to LINE 3 S	chedule D. for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4591
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item Clection: 2014	
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
5000.00	,	0.00 5000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M06 ^M / D10 ^D / Y Z013 Y	M M / D D	/ Y 1/1/20 Y 0.00 % (apr) Yes X 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
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	·	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optiona	N	
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TOTALS This Period (last page in this line o	nly)	······································
Carry outstanding balance only to LINE 3, S	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4622
LOAN SOURCE Full Name (Last, First, N	liddle Initial)	Floation: 2044
Gerson, David, Adam, ,	☐ Memo Item	
Mailing Address PO Box 1465	Other (specify) ———————————————————————————————————	
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
131.12		0.00 131.12
TERMS Date Incurred	[Date Due Interest Rate Secured: (If none, enter 0)
M06 ^M / D30 ^D / Y Ž013 Y	M M / D D	/ Y 1/1/20 Y 0.00
List All Endorsers or Guarantors (if any)	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	·	Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City State	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	,	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional		
GODICIALS THIS PERIOD THIS Page (optional)	131.12
TOTALS This Period (last page in this line or	nly)	
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5169
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item Clection: 2014	
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
5000.00		0.00 5000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured:
M07 ^M / D05 ^D / Y 2013 Y	M M / D D	0.00 % (apr) Yes X 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
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	1	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (option		
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Carry outstanding balance only to LINE 3,	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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OF

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AME OF COMMITTEE (In Full) Gerson for Congress					Trans	saction	ID : SC/10.51	70	
LOAN SOURCE Full Name (Last, First Gerson, David, Adam, , Mailing Address PO Box 1465	st, Midd	le Initial)			Memo Ite	Elec X	ction: 2014 Primary General Other (spec		
PO BOX 1465							•		
City	S	State	ZIP Co	de		×	Personal F	unds of th	ne Candidate
Burnsville		MN	55337						
Original Amount of Loan 5000.00		Cumulative Pay	ment To	Date 0.00	77.0	Salance (Outstanding a		f This Period
TERMS Date Incurred		D	ate Due		Interest F	loto	7	Coou	rod:
	M			V V V	Interest F (If none, er	nter 0)	_	Secu	rea:
M07 ^M / D29 ^D / Y Ž013 Y	IVI	M / D D	/ Y	1)1/20 Y		0.00	% (apr)	Y	Yes X No
List All Endorsers or Guarantors (if a	any) to	Loan Source							
1. Full Name (Last, First, Middle Initia	al)			Name of Em	ployer				
Mailing Address				Occupation					
				Amount	-				
City	ate	ZIP Code	Guaranteed Outstanding:						
2. Full Name (Last, First, Middle Initial	1)			Name of Employer					
Mailing Address	Mailing Address			Occupation					
				Amount Guaranteed					
City	ate	ZIP Code	Guaranteed Outstanding:					-	
3. Full Name (Last, First, Middle Initial	1)			Name of Em	ıployer				
Mailing Address				Occupation					
		I		Amount					—
City	ate	ZIP Code		Guaranteed Outstanding:		7	7		
4. Full Name (Last, First, Middle Initial	l)			Name of Em	ployer				
Mailing Address			Occupation						
0.1		710.0.1		Amount Guaranteed		-			$\overline{}$
City	ate	ZIP Code		Outstanding:		7	7	W	
SUBTOTALS This Period This Page (opti	ional)							5(000.00
TOTALS This Period (last page in this lin	ne only).				▶		7	7	
Carry outstanding balance only to LINE	3, Sched	dule D, for this	line. If	no Schedule	D, carry f	orward	to appropria	ite line of	Summary.

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Transaction ID: SC/10.5172 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 ^D19^D ^M80^M ž013 1/1/20 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code 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 Detailed Summary Page

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5173
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item Election: 2014	
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
5000.00		0.00 5000.00
TERMS Date Incurred	Г	Date Due Interest Rate Secured: (If none, enter 0)
M09M / D12D / Y Ž01Š Y	M M / D D	/
List All Endorsers or Guarantors (if any	/) to Loan Source	
Full Name (Last, First, Middle Initial)	,	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	1	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	•	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5174
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item Election: 2014	
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
3000.00		0.00 3000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M09M / D30D / Y 2013 Y	M M / D D	/ Y 1ÿ1/2ŏ Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any) to Loan Source	
Full Name (Last, First, Middle Initial)	,	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	•	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
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Carry outstanding balance only to LINE 3,	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5202
LOAN SOURCE Full Name (Last, First, N	liddle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item Election: 2014	
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
5000.00	,	0.00 5000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured:
M10M / D04D / Y Ž013 Y	M M / D D	/ Y 1ÿ1/2ŏ Y 0.00 % (apr) Yes X 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	ZIP Code	Outstanding:
2. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)	•	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	· '	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
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(check only one)

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		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5203
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item Clection: 2014	
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
5000.00		0.00 5000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M10 ^M / D16 ^D / Y Ž01Š	M M / D D	/ Y 1ÿ1/2ŏ Y 0.00 % (apr) Yes X 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
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)	·	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	<u>'</u>	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
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Carry outstanding balance only to LINE 3,	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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Transaction ID: SC/10.5204 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) M 10^M 0.00 ^D23^D ž013 1/1/20 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code 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 Detailed Summary Page

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5205
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item Clection: 2014	
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
5000.00	,	0.00 5000.00
TERMS Date Incurred	[Date Due Interest Rate Secured: (If none, enter 0)
M11M / D04D / Y Ž01Š Y	M M / D D	/ Y 1//1/20 Y 0.00 % (apr) Yes X 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
City State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
CURTOTAL C. This Desired This Desire (asking		
SUBTOTALS This Period This Page (optional	11)	5000.00
TOTALS This Period (last page in this line of	only)	······
Carry outstanding balance only to LINE 3,	Schedule D, for thi	s 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)

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5206
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item Election: 2014	
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
4000.00	,	0.00 4000.00
TERMS Date Incurred]	Date Due Interest Rate Secured: (If none, enter 0)
M11M / D13D / Y 2013 Y	M M / D D	/ Y 1//1/20 Y 0.00 % (apr) Yes X 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
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optiona)	4000.00
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TOTALS This Period (last page in this line of	ly)	······································
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s 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)

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5207
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item Clection: 2014	
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
3000.00	,	0.00 3000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M11M / D19D / Y 2013 Y	M M / D D	/ Y 1/√1/20 Y 0.00
List All Endorsers or Guarantors (if any)	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	1	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)	0000 00
		, , , , ,
TOTALS This Period (last page in this line or	ıly)	—————————————————————————————————————
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

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Transaction ID: SC/10.5208 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 4000.00 0.00 4000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 M 1 1 M ^D29^D ž013 1/1/20 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code 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)

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			Detailed Guillinary I	age	13b
NAME OF COMMITTEE (In Full)			Trans	action ID : SC/10.5209	
Gerson for Congress					
LOAN SOURCE Full Name (Last, First, Mi	ddle Initial)		☐ Memo Iter	m Election: 2014	
Gerson, David, Adam, ,				x Primary	
				General	
Mailing Address PO Box 1465				Other (specify)	
City	State	ZIP Code	9	X Personal Funds of the	Candidate
Burnsville	MN	55337		r craoriai i unua or une	Januluate
Original Amount of Loan	Cumulative Pa	yment To D	ate Ba	alance Outstanding at Close of T	his Period
4000.00			0.00	4000	0.00
9 9	7	7		1 1	
TERMS Date Incurred		Date Due	Interest Ra (If none, en		l:
M12M / D09D / Y Ž013 Y	M M / D D) / Y 1)	/1/2Ŏ ^Y	0.00 % (apr) Yes	x No
List All Endorsers or Guarantors (if any)	to Loan Source				
1. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address		(Occupation		
0.1	710.0		Amount Guaranteed		7
City	ZIP Code		Outstanding:	7 7	_
2. Full Name (Last, First, Middle Initial)		1	Name of Employer		
Mailing Address		(Occupation		
		7	Amount		
City	ZIP Code		Guaranteed Outstanding:	y y y	
3. Full Name (Last, First, Middle Initial)		ı	Name of Employer		
Mailing Address		(Occupation		
			Amount		_
City State	ZIP Code		Guaranteed		
		(Outstanding:	, , , , , , , , , , , , , , , , , , , ,	
4. Full Name (Last, First, Middle Initial)		1	Name of Employer		
Mailing Address		(Occupation		
			Amount		_
City	ZIP Code	(Guaranteed		
		(Outstanding:	, , , , , , , , , , , , , , , , , , , ,	
SUBTOTALS This Period This Page (optional)				4000	0.00
TOTALS This Period (last page in this line onl	v)				
The state of the s	,,			7 7	
Carry outstanding balance only to LINE 3, Sc	hedule D, for this	s line. If no	Schedule D, carry fo	orward to appropriate line of Su	ımmary.

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

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		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5210
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item Clection: 2014	
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
3000.00		0.00 3000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M12M / D16D / Y Ž013 Y	M M / D D	/ Y 1ÿ1/2ŏ Y 0.00
List All Endorsers or Guarantors (if any	/) to Loan Source	
Full Name (Last, First, Middle Initial)	,	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	-	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (option		
CODICIALS THIS FEHOU THIS FAGE (OPLION	ai)	3000.00
TOTALS This Period (last page in this line	only)	······································
Carry outstanding balance only to LINE 3,	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

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OF

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Transaction ID: SC/10.5542 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 3000.00 0.00 3000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D08D M01M ž014 1/1/20 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code 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 Detailed Summary Page

FOR LINE NUMBER: (check only one)

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5543
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item Clection: 2014	
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
5000.00		0.00 5000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M01M / D16D / Y Z014 Y	M M / D D	/ Y 1ў1/2Ŏ Y 0.00 % (apr) Yes ▼ No
List All Endorsers or Guarantors (if any)	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
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Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5544
LOAN SOURCE Full Name (Last, First, M	iddle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item Clection: 2014	
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code Second Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
10000.00		0.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M02M / D26D / Y Ž014 Y	M M / D D	/
List All Endorsers or Guarantors (if any)	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
Oit.	71D O- 1-	Amount Guaranteed
City State	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
- In		Amount Guaranteed
City	ZIP Code	Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
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Carry outstanding balance only to LINE 3, Se	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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		135
AME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5587
LOAN SOURCE Full Name (Last, First, Gerson, David, Adam, , Mailing Address PO Box 1465	Middle Initial)	☐ Memo Item Election: 2014 ## Primary General Other (specify) ▼
City	State MN	ZIP Code F5227 Personal Funds of the Candidate
Burnsville		55337
Original Amount of Loan	Cumulative Pa	
391.00		0.00 391.00
TERMS Date Incurred]	Date Due Interest Rate Secured: (If none, enter 0)
M10 ^M / D28 ^D / Y Z014 Y	M M / D D	/ YNAY Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if an	y) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	!	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
CURTOTAL C This Deviced This Dags (antice	-1)	
SUBTOTALS This Period This Page (option	aı,	391.00
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Carry outstanding balance only to LINE 3,	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

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		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5608
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2016
Gerson, David, Adam, ,	Memo Item Clection: 2016	
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
3500.00	ļ ,	0.00 3500.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M03M / D04D / Y Ž01Š Y	M M / D D	/ Y YNAY Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any	to Loan Source	
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	·	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
4. Full Name (Last, First, Middle Initial)	<u> </u>	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
CURTOTAL C This Deviced This Degre (entires	n	
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	ME OF COMMITTEE (In Full) Serson for Congress				Trans	saction ID: SC/10.5867	
Ľ							
	LOAN SOURCE Full Name (Last, Gerson, David, Adam, ,	First, Mic	ldle Initial)		☐ Memo Ite	Election: 2016 Primary	
						General	
	Mailing Address PO Box 1465					Other (specify)	
City			State ZIP Code		de	Personal Funds of the Candidate	
	Burnsville MN 5533 Original Amount of Loan Cumulative Payment 7 5000.00			55337	37 Personal Funds of the C		
				yment To	Date E	Balance Outstanding at Close of This Period	
					0.00	5000.00	
	TERMS Date Incurred Date Dut			Date Due	Interest F (If none, e		
	M08M / D12D / Y Z015 Y M M / D D / Y				YNA Y	0.00 % (apr) Yes No	
	List All Endorsers or Guarantors	(if any) to	o Loan Source				
	Full Name (Last, First, Middle Initial)				Name of Employer		
	Mailing Address				Occupation		
					Amount		
	City	State	ZIP Code		Guaranteed Outstanding:	9 9	
	Full Name (Last, First, Middle Initial) Mailing Address				Name of Employer		
					Occupation		
					Amount		
	City	State	ZIP Code		Guaranteed Outstanding:	, , , , , , , , ,	
	3. Full Name (Last, First, Middle Initial)				Name of Employer		
	Mailing Address				Occupation		
					Amount		
	City	State	ZIP Code		Guaranteed Outstanding:		
	4. Full Name (Last, First, Middle Initial)				Name of Employer		
	Mailing Address				Occupation		
					Amount		
	City	State	ZIP Code		Guaranteed Outstanding:	7	
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SI	UBTOTALS This Period This Page (optional)			······	5000.00	
T	OTALS This Period (last page in this	line only	y)		······	7 7 7	
_	Carry outstanding balance only to LI	NE 3, Sch	edule D, for this	s line. If	no Schedule D, carry f	orward to appropriate line of Summary.	
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Transaction ID: SC/10.5980 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2016 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 10000.00 0.00 10000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D08D M09M Ž015 YNA Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code 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.

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		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.6013
LOAN SOURCE Full Name (Last, First, N	liddle Initial)	Memo Item Election: 2016
Gerson, David, Adam, ,	Memo Item Election: 2016	
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
33932.59		28539.64 5392.95
TERMS Date Incurred]	Date Due Interest Rate Secured: (If none, enter 0)
M09M / D30D / Y Ž01Š Y	M M / D D	/ Y YNAY Y 0.00 % (apr) Yes X 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
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)	5392.95
TOTALS This Period (last page in this line or	nly)	171460.36
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.