

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

12FE4M5

PARRY FOR CONGRESS

ADDRESS (number and street) ▼

PO BOX 188

Check if different than previously reported. (ACC)

WASECA

MN

56093

2. **FEC IDENTIFICATION NUMBER** ▼

C C00503706

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

MN

01

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

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

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

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

Election on  /  /  in the State of

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

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

Election on  /  /  in the State of

5. Covering Period

/  /

through

/  /

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

Type or Print Name of Treasurer Dale DeRaad

Signature of Treasurer Dale DeRaad

[Electronically Filed]

Date

/  /

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**PARRY FOR CONGRESS**

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

	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))....	52611.20	102305.10
(b) Total Contribution Refunds (from Line 20(d)) .....	650.00	900.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	51961.20	101405.10
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	57762.86	70796.83
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.19
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	57762.86	70796.64
8. Cash on Hand at Close of Reporting Period (from Line 27).....	30608.46	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**PARRY FOR CONGRESS**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	43970.44	83319.44
(ii) Unitemized.....	8640.76	18135.66
(iii) TOTAL of contributions from individuals ▶	52611.20	101455.10
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	850.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	52611.20	102305.10
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.19
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	52611.20	102305.29

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	57762.86	70796.83
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	650.00	900.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	650.00	900.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	58412.86	71696.83

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	36410.12
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	52611.20
25. SUBTOTAL (add Line 23 and Line 24).....	89021.32
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	58412.86
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	30608.46

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 67
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

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

Mailing Address 224 Southwest 1st Avenue

City Rochester State MN Zip Code 55902

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

Name of Employer Residences of Old City Hall Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **363.63**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2012

**Transaction ID : SA11AI.5412**

Amount of Each Receipt this Period  
**363.63**

In-kind - Food and Beverage Provided

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

Mailing Address 1853 Edgewood Road

City Winona State MN Zip Code 55987

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

Name of Employer DCM Tech Occupation Executive

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1100.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2012

**Transaction ID : SA11AI.4837**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Samuel Arsers**

Mailing Address 1812 Southridge Rd

City New Ulm State MN Zip Code 56073-3825

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

Name of Employer Monument Brass Occupation Principal

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 12 / 2012

**Transaction ID : SA11AI.4838**

Amount of Each Receipt this Period  
**100.00**

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

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

**563.63**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 67
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

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

Mailing Address 1900 Clubhouse Drive

City State Zip Code  
Lake City MN 55041

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

Name of Employer Occupation  
The Jewel Golf Club Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
360.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 25 / 2012

**Transaction ID : SA11AI.5400**

Amount of Each Receipt this Period  
360.00

In-kind - Golf Tournament Prizes

**B.** Full Name (Last, First, Middle Initial)  
**Bill Bodein**

Mailing Address 1202 28th St. NE

City State Zip Code  
Austin MN 55912

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

Name of Employer Occupation  
Austin Country Club General Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 25 / 2012

**Transaction ID : SA11AI.5380**

Amount of Each Receipt this Period  
400.00

In-kind - Golf Tournament Prizes

**C.** Full Name (Last, First, Middle Initial)  
**Jeff Carney**

Mailing Address PO Box 188

City State Zip Code  
Waseca MN 56093

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

Name of Employer Occupation  
Carney Auto Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 01 / 2012

**Transaction ID : SA11AI.5035**

Amount of Each Receipt this Period  
500.00

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

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

1260.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 67
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Jeff Carney</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 25 / 2012
Mailing Address PO Box 188		<b>Transaction ID : SA11AI.5286</b>
City Waseca	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer Carney Auto	Occupation Owner	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 510.00	

Full Name (Last, First, Middle Initial) <b>B. Carney Auto, Inc</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 27 / 2012
Mailing Address 26008 US Hwy 218		<b>Transaction ID : SA11AI.5234</b>
City Austin	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>C. Mark Davis</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 07 / 2012
Mailing Address 37045 Hwy 169		<b>Transaction ID : SA11AI.4854</b>
City St. Peter	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Davisco Food International	Occupation President	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5510.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 67
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

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

Mailing Address 37045 Hwy 169

City St. Peter State MN Zip Code 56082

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

Name of Employer Davisco Food International Occupation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 07 / 2012

**Transaction ID : SA11AI.5482**

Amount of Each Receipt this Period  
-2500.00

Reattribute:

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

Mailing Address 37045 Hwy 169

City St Peter State MN Zip Code 56082

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

Name of Employer None Occupation Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 07 / 2012

**Transaction ID : SA11AI.5483**

Amount of Each Receipt this Period  
2500.00

Reattribute: From Mark Davis

**C.** Full Name (Last, First, Middle Initial)  
**Dale DeRaad**

Mailing Address 212 15th Ave NE

City Waseca State MN Zip Code 56093

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

Name of Employer De Raad & Goetz Occupation CPA

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 02 / 2012

**Transaction ID : SA11AI.4859**

Amount of Each Receipt this Period  
250.00

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 67
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

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

Mailing Address 212 15th Ave NE

City Waseca State MN Zip Code 56093

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

Name of Employer De Raad & Goetz Occupation CPA

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
430.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2012

**Transaction ID : SA11AI.4858**

Amount of Each Receipt this Period  
180.00

**B.** Full Name (Last, First, Middle Initial)  
**Dan Dols**

Mailing Address 6900 Canby Trail

City Northfield State MN Zip Code 55057

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

Name of Employer Willingers Golf Club Occupation Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
360.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2012

**Transaction ID : SA11AI.5398**

Amount of Each Receipt this Period  
360.00

In-kind - Golf Tournament Prizes

**C.** Full Name (Last, First, Middle Initial)  
**Randall Doyal**

Mailing Address 500 Kim Lane

City Owatonna State MN Zip Code 55060

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

Name of Employer Al-Corn Clean Fuel Occupation CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
225.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 15 / 2012

**Transaction ID : SA11AI.4865**

Amount of Each Receipt this Period  
125.00

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

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

665.00

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

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

FOR LINE NUMBER: PAGE 10 OF 67  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

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

Mailing Address 1545 Nottingham Dr

City North Mankato State MN Zip Code 56003

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

Name of Employer El Microcircuits Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 18 / 2012

**Transaction ID : SA11Al.4870**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Robert Fayfield**

Mailing Address PO Box 34

City Minneapolis State MN Zip Code 55440-0034

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

Name of Employer Banner Engineering Occupation Chief Executive

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 25 / 2012

**Transaction ID : SA11Al.4874**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**John FitzSimmons**

Mailing Address County Road 1

City Good Thunder State MN Zip Code 56037

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

Name of Employer Protein Sources Occupation Feed Mill Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2012

**Transaction ID : SA11Al.4879**

Amount of Each Receipt this Period  
 500.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 67
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

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

Mailing Address 72515 237th ST

City Dassel State MN Zip Code 55325

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

Name of Employer Protein Sources Occupation Farm Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2012

**Transaction ID : SA11AI.4881**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Paul Fitzsimmons**

Mailing Address 54440 148th St

City Good Thunder State MN Zip Code 56037

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

Name of Employer Protein Sources Occupation AG Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2012

**Transaction ID : SA11AI.5410**

Amount of Each Receipt this Period  
 1284.38

In-kind - Food and Beverage Paid For

**C.** Full Name (Last, First, Middle Initial)  
**Paul Fitzsimmons**

Mailing Address 54440 148th St

City Good Thunder State MN Zip Code 56037

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

Name of Employer Protein Sources Occupation AG Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2012

**Transaction ID : SA11AI.4884**

Amount of Each Receipt this Period  
 1000.00

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

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

2784.38

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 67
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

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

Mailing Address County Road 1

City State Zip Code  
Good Thunder MN 56037

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

Name of Employer Occupation  
Protein Sources Farm Management

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2012

**Transaction ID : SA11AI.4886**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**William FitzSimmons**

Mailing Address County Road 1

City State Zip Code  
Good Thunder MN 56037

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

Name of Employer Occupation  
Protein Sources Farm Management

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2012

**Transaction ID : SA11AI.4888**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Bernard Gaytko**

Mailing Address 14648 Rice Lake Drive

City State Zip Code  
Waseca MN 56093

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

Name of Employer Occupation  
First National Bank CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
590.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2012

**Transaction ID : SA11AI.4896**

Amount of Each Receipt this Period  
340.00

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

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

1340.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 67
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Roger Goetz, Jr.**

Mailing Address 212 15th Ave NE

City Waseca State MN Zip Code 56093

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

Name of Employer Goetz Jr Roger H CPA Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2012

**Transaction ID : SA11AI.4900**

Amount of Each Receipt this Period  
 205.00

**B.** Full Name (Last, First, Middle Initial)  
**Benjamin Golnik**

Mailing Address 1192 Portland Ave

City St. Paul State MN Zip Code 55104

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

Name of Employer Golnik Strategies LLC Occupation Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2012

**Transaction ID : SA11AI.4902**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Shad Gordon**

Mailing Address 3151 Wilds Ridge Road

City Prior Lake State MN Zip Code 55372

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

Name of Employer The Wilds Golf Club Occupation Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2012

**Transaction ID : SA11AI.5404**

Amount of Each Receipt this Period  
 360.00  
 In-kind - Golf Tournament Prizes

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

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

1065.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 67
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Justine Haselow</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 27 / 2012	
Mailing Address 6408 Interlachen Blvd		<b>Transaction ID : SA11AI.5487</b>	
City Edina	State MN	Zip Code 55436	Amount of Each Receipt this Period _____ 800.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer None	Occupation Retired		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 800.00		

Full Name (Last, First, Middle Initial) <b>B. Greg Jensen</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 03 / 2012	
Mailing Address 111 E. Clark		<b>Transaction ID : SA11AI.4926</b>	
City Albert Lea	State MN	Zip Code 56007	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Auctioneer & Real Estate	Occupation Owner		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Douglas Jones</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 27 / 2012	
Mailing Address PO Box 26		<b>Transaction ID : SA11AI.4929</b>	
City Nerstrand	State MN	Zip Code 55053	Amount of Each Receipt this Period _____ 513.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer None	Occupation Retired		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1512.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 1813.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 67
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Richard Kakeldy</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 27 / 2012	
Mailing Address 1400 Madison Ave Suite 628		<b>Transaction ID : SA11AI.5362</b>	
City Mankato State MN Zip Code 56001	Amount of Each Receipt this Period 525.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Kakeldy & Koberoski Partner		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 525.00		

Full Name (Last, First, Middle Initial) <b>B. Bruce Kaskubar</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 26 / 2012	
Mailing Address 5905 Chateau Rd NW		<b>Transaction ID : SA11AI.4930</b>	
City Rochester State MN Zip Code 55901	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Self IT Consultant		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) <b>C. Morris Lanning</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 02 / 2012	
Mailing Address PO Box 36		<b>Transaction ID : SA11AI.4934</b>	
City Moorhead State MN Zip Code 56561	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation None Retired		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	875.00
<b>TOTAL</b> This Period (last page this line number only).....	[ ]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 67
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

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

Mailing Address 16396 Millford Dr

City Eden Prairie State MN Zip Code 55347

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

Name of Employer Golf Professional Occupation Edina Country Club

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2012

**Transaction ID : SA11AI.5371**

Amount of Each Receipt this Period  
 500.00

In-kind - Golf Tournament Prizes

**B.** Full Name (Last, First, Middle Initial)  
**Chris Laughlin**

Mailing Address 1991 Lemond Road

City Owatonna State MN Zip Code 55060

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

Name of Employer Golf Professional Occupation Owatonna Country Club

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2012

**Transaction ID : SA11AI.5369**

Amount of Each Receipt this Period  
 1000.00

In-kind - Golf Tournament Prizes

**C.** Full Name (Last, First, Middle Initial)  
**Kenneth Lenz**

Mailing Address 34664 139th St

City Waseca State MN Zip Code 56093

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

Name of Employer Lenz Bus Service Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 09 / 2012

**Transaction ID : SA11AI.4936**

Amount of Each Receipt this Period  
 250.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 67
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

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

Mailing Address 34664 139th St

City Waseca State MN Zip Code 56093

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

Name of Employer Lenz Bus Service Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2012

**Transaction ID : SA11AI.4937**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Patrick Noble**

Mailing Address 3627 N. County Road 45

City Owatonna State MN Zip Code 55060

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

Name of Employer Noble RV Occupation Co-owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **650.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2012

**Transaction ID : SA11AI.4956**

Amount of Each Receipt this Period  
**650.00**

**C.** Full Name (Last, First, Middle Initial)  
**Willard Oberton**

Mailing Address 121 Jay Bee Dr

City Winona State MN Zip Code 55987

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

Name of Employer Fastenal Co Leasing Occupation Chief Executive Officer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 19 / 2012

**Transaction ID : SA11AI.4958**

Amount of Each Receipt this Period  
**2500.00**

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

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

**3250.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 67
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

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

Mailing Address 15132 380th ave

City Springfield State MN Zip Code 56087

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

Name of Employer F & M Bank Occupation Banker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2012

**Transaction ID : SA11AI.4960**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Michael Pappas**

Mailing Address 4841 Lake Ave

City White Bear Lake State MN Zip Code 55110

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

Name of Employer None Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 18 / 2012

**Transaction ID : SA11AI.4963**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Jerry Pappenfuss**

Mailing Address PO Box 767

City Winona State MN Zip Code 55987

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

Name of Employer KWNO Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 01 / 2012

**Transaction ID : SA11AI.5037**

Amount of Each Receipt this Period  
 1000.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 67
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

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

Mailing Address 975 Somerby PKWY LN NE

City Byron State MN Zip Code 55902

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

Name of Employer Somerby Golf Club Occupation General Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2012

**Transaction ID : SA11AI.5402**

Amount of Each Receipt this Period  
 500.00

In-kind - Golf Tournament Prizes

**B.** Full Name (Last, First, Middle Initial)  
**Julie Rosen**

Mailing Address 105 Cedar Bluff Dr

City Fairmont State MN Zip Code 56031

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

Name of Employer Rosen's Inc Occupation CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2012

**Transaction ID : SA11AI.4976**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Paul Rosenau**

Mailing Address PO Box 188

City Waseca State MN Zip Code 56093

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

Name of Employer None Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2012

**Transaction ID : SA11AI.5030**

Amount of Each Receipt this Period  
 5000.00

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 67
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

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

Mailing Address PO Box 188

City Waseca State MN Zip Code 56093

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

Name of Employer None Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 30 / 2012

**Transaction ID : SA11AI.5228**

Amount of Each Receipt this Period  
 -2500.00

Redesignate:  
**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Paul Rosenau**

Mailing Address PO Box 188

City Waseca State MN Zip Code 56093

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

Name of Employer None Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 30 / 2012

**Transaction ID : SA11AI.5229**

Amount of Each Receipt this Period  
 2500.00

Redesignate: From Primary  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Susan Rosenau**

Mailing Address 36850 Lake Knoll Dr

City Waseca State MN Zip Code 56093

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

Name of Employer University of Minnesota Occupation Admin Specialist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 30 / 2012

**Transaction ID : SA11AI.5226**

Amount of Each Receipt this Period  
 5000.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 67
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

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

Mailing Address 36850 Lake Knoll Dr

City Waseca State MN Zip Code 56093

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

Name of Employer University of Minnesota Occupation Admin Specialist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2012

**Transaction ID : SA11AI.5231**

Amount of Each Receipt this Period  
 -2500.00

Redesignate:  
**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Susan Rosenau**

Mailing Address 36850 Lake Knoll Dr

City Waseca State MN Zip Code 56093

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

Name of Employer University of Minnesota Occupation Admin Specialist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2012

**Transaction ID : SA11AI.5232**

Amount of Each Receipt this Period  
 2500.00

Redesignate: From Primary  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Douglas Ruth**

Mailing Address 689 Woodhill Pl

City Owatonna State MN Zip Code 55060

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

Name of Employer None Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2012

**Transaction ID : SA11AI.4977**

Amount of Each Receipt this Period  
 100.00

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

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

100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 67
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Bron Scherer</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 30 / 2012
Mailing Address 617 Turnberry Ct		<b>Transaction ID : SA11AI.4980</b>
City Northfield	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self Employed	Occupation CPA	Election Cycle-to-Date 1250.00
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>B. Donald Schiefelbein</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 16 / 2012
Mailing Address 34897 717th Ave		<b>Transaction ID : SA11AI.4982</b>
City Kimball	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Schiefelbein Farms	Occupation Farmer	Election Cycle-to-Date 250.00
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>C. Frank Schiefelbein</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 04 / 2012
Mailing Address 74208 360th St		<b>Transaction ID : SA11AI.4984</b>
City Kimball	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self Employed	Occupation Farmer	Election Cycle-to-Date 250.00
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 67
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

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

Mailing Address 13084 750th St

City: Blooming Prairie State: MN Zip Code: 55917

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

Name of Employer: None Occupation: Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 320.00

Date of Receipt: 06 / 27 / 2012

**Transaction ID : SA11AI.4986**

Amount of Each Receipt this Period: 320.00

**B.** Full Name (Last, First, Middle Initial)  
**James Schumann**

Mailing Address 12120 County Road 9

City: Eyota State: MN Zip Code: 55934

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

Name of Employer: Schumann Farms Occupation: Partner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 350.00

Date of Receipt: 06 / 27 / 2012

**Transaction ID : SA11AI.4993**

Amount of Each Receipt this Period: 250.00

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

Mailing Address 2423 12th Ave NW

City: Rochester State: MN Zip Code: 55901-1596

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

Name of Employer: Self Employer Occupation: Running State Senate

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 06 / 27 / 2012

**Transaction ID : SA11AI.4999**

Amount of Each Receipt this Period: 100.00

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

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

670.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 67
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

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

Mailing Address 219 E Taylor Run Pkwy

City: Alexandria State: VA Zip Code: 22314

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

Name of Employer: East Meridian Strategies Occupation: Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 750.00

Date of Receipt: 06 / 20 / 2012

**Transaction ID : SA11AI.5000**

Amount of Each Receipt this Period: 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Kristina Seppala**

Mailing Address 219 E Taylor Run Pkwy

City: Alexandria State: VA Zip Code: 22314

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

Name of Employer: East Meridian Strategies Occupation: Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 898.74

Date of Receipt: 06 / 25 / 2012

**Transaction ID : SA11AI.5414**

Amount of Each Receipt this Period: 148.74

In-kind - Mileage

**C.** Full Name (Last, First, Middle Initial)  
**Kristina Seppala**

Mailing Address 219 E Taylor Run Pkwy

City: Alexandria State: VA Zip Code: 22314

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

Name of Employer: East Meridian Strategies Occupation: Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1084.43

Date of Receipt: 06 / 25 / 2012

**Transaction ID : SA11AI.5416**

Amount of Each Receipt this Period: 185.69

In-kind - Food and Beverage Provided

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

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

834.43

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 67
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

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

Mailing Address 305 Smith Court

City State Zip Code  
Mapleton MN 56065

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

Name of Employer Occupation  
Protein Sources Farm Management

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 30 / 2012

**Transaction ID : SA11AI.5009**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Bob Stark**

Mailing Address 2015 Lestview Drive

City State Zip Code  
Hastings MN 55033

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

Name of Employer Occupation  
Hastings Golf Club General Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 25 / 2012

**Transaction ID : SA11AI.5388**

Amount of Each Receipt this Period  
300.00

In-kind - Golf Tournament Prizes

**C.** Full Name (Last, First, Middle Initial)  
**Jeffrey Stewart**

Mailing Address 114 22nd St NW

City State Zip Code  
Owatonna MN 55060

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

Name of Employer Occupation  
Linder Farm Network Salesman

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 12 / 2012

**Transaction ID : SA11AI.5014**

Amount of Each Receipt this Period  
250.00

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

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

1050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 67
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

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

Mailing Address 5481 East Rose Street

City Owatonna State MN Zip Code 55060

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

Name of Employer SWEDIN CORP Occupation Consulting

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 18 / 2012

**Transaction ID : SA11AI.5015**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Michael Veldman**

Mailing Address PO BOX 102

City Hollandale State MN Zip Code 56045

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

Name of Employer Ag Power Enterprises, Inc. Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2012

**Transaction ID : SA11AI.5021**

Amount of Each Receipt this Period  
**300.00**

**C.** Full Name (Last, First, Middle Initial)  
**Tom Visna**

Mailing Address 73671 170th Ave

City Hayfield State MN Zip Code 55940

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

Name of Employer Oaks Golf Club Occupation Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **220.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2012

**Transaction ID : SA11AI.5378**

Amount of Each Receipt this Period  
**200.00**  
 In-kind - Golf Tournament Prizes

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

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

**600.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 67
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

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

Mailing Address 3004 Lake Chapeau Dr

City: Albert Lea State: MN Zip Code: 56007

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

Name of Employer: Vogt Distributing Occupation: Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 240.00

Date of Receipt: 06 / 25 / 2012

**Transaction ID : SA11AI.5406**

Amount of Each Receipt this Period: 240.00

In-kind - Golf Tournament Prizes

**B.** Full Name (Last, First, Middle Initial)  
**Gerald Vogt**

Mailing Address 3004 Lake Chapeau Dr

City: Albert Lea State: MN Zip Code: 56007

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

Name of Employer: Vogt Distributing Occupation: Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1240.00

Date of Receipt: 06 / 29 / 2012

**Transaction ID : SA11AI.5023**

Amount of Each Receipt this Period: 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Joseph Weis**

Mailing Address 2227 7th St. N.W.

City: Rochester State: MN Zip Code: 55901

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

Name of Employer: Weis Builders, INC Occupation: Chairman Emeritus

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 06 / 27 / 2012

**Transaction ID : SA11AI.5025**

Amount of Each Receipt this Period: 250.00

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

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

1490.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 67
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. John Wilkus</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 30 / 2012
Mailing Address 611 8th Ave SE		<b>Transaction ID : SA11AI.5028</b>
City Waseca	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Minnesota Gold Prospectors	Occupation President	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00	

Full Name (Last, First, Middle Initial) <b>B. Ken Wilmes</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 15 / 2012
Mailing Address 58928 211 Lane		<b>Transaction ID : SA11AI.5408</b>
City Mankato	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
Name of Employer Inudstrial Fabrication Service	Occupation Owner	In-kind - Food and Beverage Paid
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1600.00	

Full Name (Last, First, Middle Initial) <b>C. Mike Zinni</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 25 / 2012
Mailing Address PO Box 3122		<b>Transaction ID : SA11AI.5386</b>
City Mankato	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Mankato Golf Club	Occupation Manager	In-kind - Golf Tournament Prizes
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1850.00
<b>TOTAL</b> This Period (last page this line number only).....	43970.44

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 67		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Jeff Allman</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2012
Mailing Address 224 Southwest 1st Avenue		Amount of Each Disbursement this Period 363.63 <b>Transaction ID : SB17.5413</b>
City Rochester	State MN Zip Code 55902	
Purpose of Disbursement In-kind - Food and Beverage Provided		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Best Western</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address 1111 Range St		Amount of Each Disbursement this Period 105.63 <b>Transaction ID : SB17.5045</b>
City MANKATO	State MN Zip Code 56003	
Purpose of Disbursement Lodging		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Kent Blaschko</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2012
Mailing Address 1900 Clubhouse Drive		Amount of Each Disbursement this Period 360.00 <b>Transaction ID : SB17.5401</b>
City Lake City	State MN Zip Code 55041	
Purpose of Disbursement In-kind - Golf Tournament Prizes		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	829.26
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 67			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Bill Bodein</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2012		
Mailing Address 1202 28th St. NE			Amount of Each Disbursement this Period 400.00		
City Austin	State MN	Zip Code 55912	Transaction ID : SB17.5381		
Purpose of Disbursement In-kind - Golf Tournament Prizes		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>B. By the Way</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2012		
Mailing Address 123 E Elm Ave			Amount of Each Disbursement this Period 123.00		
City Waseca	State MN	Zip Code 56058	Transaction ID : SB17.5052		
Purpose of Disbursement Transportation: Fuel		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>c. By the Way</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2012		
Mailing Address 123 E Elm Ave			Amount of Each Disbursement this Period 94.00		
City Waseca	State MN	Zip Code 56058	Transaction ID : SB17.5053		
Purpose of Disbursement Transportation: Fuel		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	617.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 67			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>A. By the Way</b>		M M / D D / Y Y Y Y 04 / 24 / 2012	
Mailing Address 123 E Elm Ave		Amount of Each Disbursement this Period	
City Waseca State MN Zip Code 56058		118.00	
Purpose of Disbursement Transportation: Fuel		Transaction ID : SB17.5054	
Candidate Name		Category/Type	
Office Sought:	House Senate President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>B. By the Way</b>		M M / D D / Y Y Y Y 05 / 07 / 2012	
Mailing Address 123 E Elm Ave		Amount of Each Disbursement this Period	
City Waseca State MN Zip Code 56058		111.00	
Purpose of Disbursement Transportation: Fuel		Transaction ID : SB17.5055	
Candidate Name		Category/Type	
Office Sought:	House Senate President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>c. By the Way</b>		M M / D D / Y Y Y Y 05 / 30 / 2012	
Mailing Address 123 E Elm Ave		Amount of Each Disbursement this Period	
City Waseca State MN Zip Code 56058		112.00	
Purpose of Disbursement Transportation: Fuel		Transaction ID : SB17.5056	
Candidate Name		Category/Type	
Office Sought:	House Senate President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	341.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 67	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. By the Way</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2012
Mailing Address 123 E Elm Ave		Amount of Each Disbursement this Period 123.00 <b>Transaction ID : SB17.5057</b>
City Waseca State MN Zip Code 56058	Purpose of Disbursement Transportation: Fuel	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Cardinals FEC Compliance Services, PLC</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2012
Mailing Address PO Box 4182		Amount of Each Disbursement this Period 344.00 <b>Transaction ID : SB17.5061</b>
City Saint Paul State MN Zip Code 55104	Purpose of Disbursement FEC Reporting Services	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Casey's</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address 521 Woodkey St W		Amount of Each Disbursement this Period 76.45 <b>Transaction ID : SB17.5062</b>
City Northfield State MN Zip Code 55057	Purpose of Disbursement Transportation: Fuel	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	543.45
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 67			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Casey's</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address 521 Woodkey St W		Amount of Each Disbursement this Period 20.84
City Northfield	State MN	
Zip Code 55057	Purpose of Disbursement Transportation: Fuel	Transaction ID : SB17.5063
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Clear Lake Press</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2012
Mailing Address 300 16th Ave Southeast		Amount of Each Disbursement this Period 283.22
City Waseca	State MN	
Zip Code 56058	Purpose of Disbursement Printing Fees	Transaction ID : SB17.5066
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Graeme Cohen</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2012
Mailing Address 7E Lancaster Ave #240		Amount of Each Disbursement this Period 500.00
City Los Angeles	State CA	
Zip Code 91303	Purpose of Disbursement Computer Repair Services	Transaction ID : SB17.5442
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	804.06
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 67			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Elisabeth DeBeck</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address 2123 Pleasant Ave S Apt 3		Amount of Each Disbursement this Period 141.69 <b>Transaction ID : SB17.5322</b>
City Minneapolis	State MN	
Zip Code 55404	Purpose of Disbursement Expense Reimbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Office Max</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address 1201 S Broadway		Amount of Each Disbursement this Period 141.69 <b>Transaction ID : SB17.5322.0</b> <b>[MEMO ITEM]</b>
City Rochester	State MN	
Zip Code 55904	Purpose of Disbursement Office Supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Elisabeth DeBeck</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2012
Mailing Address 2123 Pleasant Ave S Apt 3		Amount of Each Disbursement this Period 201.00 <b>Transaction ID : SB17.5323</b>
City Minneapolis	State MN	
Zip Code 55404	Purpose of Disbursement Expense Reimbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	342.69
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 67	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Office Max</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2012
Mailing Address 1201 S Broadway		Amount of Each Disbursement this Period 201.00
City Rochester	State MN Zip Code 55904	
Purpose of Disbursement Office Supplies	Category/Type	<b>Transaction ID : SB17.5323.0</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Dan Dols</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2012
Mailing Address 6900 Canby Trail		Amount of Each Disbursement this Period 360.00
City Northfield	State MN Zip Code 55057	
Purpose of Disbursement In-kind - Golf Tournament Prizes	Category/Type	<b>Transaction ID : SB17.5399</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Donation Pages</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2012
Mailing Address 1101 Pennsylvania Ave NW		Amount of Each Disbursement this Period 566.05
City Washington	State DC Zip Code 20004	
Purpose of Disbursement Credit Card Fees	Category/Type	<b>Transaction ID : SB17.5489</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	926.05
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 67			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Downtowner</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2012
Mailing Address 253 7th St W		Amount of Each Disbursement this Period 28.45
City SAINT PAUL State MN Zip Code 55102	Purpose of Disbursement Food and Beverage	
Candidate Name	Category/Type	<b>Transaction ID : SB17.5077</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Downtowner</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2012
Mailing Address 253 7th St W		Amount of Each Disbursement this Period 32.27
City SAINT PAUL State MN Zip Code 55102	Purpose of Disbursement Food and Beverage	
Candidate Name	Category/Type	<b>Transaction ID : SB17.5078</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. East Meridian Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2012
Mailing Address 219 East Taylor Run Pkwy		Amount of Each Disbursement this Period 10000.00
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Management Consulting	
Candidate Name	Category/Type	<b>Transaction ID : SB17.5237</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	10060.72
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 67	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Faribault Heritage Celebration</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2012
Mailing Address 530 Wilson Ave NW		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : SB17.5084</b>
City FARIBAULT	State MN	
Zip Code 55021	Purpose of Disbursement Parade Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Paul Fitzsimmons</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2012
Mailing Address 54440 148th St		Amount of Each Disbursement this Period 1284.38 <b>Transaction ID : SB17.5411</b>
City Good Thunder	State MN	
Zip Code 56037	Purpose of Disbursement In-kind - Food and Beverage Paid For	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Ford Credit</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2012
Mailing Address 1001 Hoffman Dr		Amount of Each Disbursement this Period 525.95 <b>Transaction ID : SB17.5089</b>
City Owatonna	State MN	
Zip Code 55060	Purpose of Disbursement Vehicle Lease	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2060.33
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 67			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Ford Credit</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2012
Mailing Address 1001 Hoffman Dr		Amount of Each Disbursement this Period 7.00
City Owatonna State MN Zip Code 55060	Purpose of Disbursement Bank Charges	
Candidate Name	Category/Type	<b>Transaction ID : SB17.5092</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Ford Credit</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2012
Mailing Address 1001 Hoffman Dr		Amount of Each Disbursement this Period 525.95
City Owatonna State MN Zip Code 55060	Purpose of Disbursement Vehicle Lease	
Candidate Name	Category/Type	<b>Transaction ID : SB17.5090</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Ford Credit</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2012
Mailing Address 1001 Hoffman Dr		Amount of Each Disbursement this Period 7.00
City Owatonna State MN Zip Code 55060	Purpose of Disbursement Bank Charges	
Candidate Name	Category/Type	<b>Transaction ID : SB17.5093</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	539.95
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 39 OF 67	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Doug Gardner</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2012	
Mailing Address 5500 Nathan Lane N #3			Amount of Each Disbursement this Period 435.09	
City Plymouth	State MN	Zip Code 55442	Transaction ID : SB17.5329	
Purpose of Disbursement Expense Reimbursement		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. Superamerica</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2012	
Mailing Address 23087 State Highway 13			Amount of Each Disbursement this Period 51.57	
City Albert Lea	State MN	Zip Code 56007	Transaction ID : SB17.5329.3	
Purpose of Disbursement Food and Beverage		Category/ Type		
Candidate Name			[MEMO ITEM]	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>c. Superamerica</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2012	
Mailing Address 23087 State Highway 13			Amount of Each Disbursement this Period 51.44	
City Albert Lea	State MN	Zip Code 56007	Transaction ID : SB17.5329.7	
Purpose of Disbursement Transportation: Fuel		Category/ Type		
Candidate Name			[MEMO ITEM]	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	435.09
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 67	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Superamerica</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2012
Mailing Address 23087 State Highway 13		Amount of Each Disbursement this Period 45.52
City Albert Lea	State MN	
Zip Code 56007	Purpose of Disbursement Transportation: Fuel	Transaction ID : SB17.5329.9
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Superamerica</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2012
Mailing Address 23087 State Highway 13		Amount of Each Disbursement this Period 50.29
City Albert Lea	State MN	
Zip Code 56007	Purpose of Disbursement Transportation: Fuel	Transaction ID : SB17.5329.10
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Doug Gardner</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2012
Mailing Address 5500 Nathan Lane N #3		Amount of Each Disbursement this Period 1600.00
City Plymouth	State MN	
Zip Code 55442	Purpose of Disbursement Management Consulting	Transaction ID : SB17.5333
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1600.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 67			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Doug Gardner</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2012		
Mailing Address 5500 Nathan Lane N #3			Amount of Each Disbursement this Period 2203.00		
City Plymouth	State MN	Zip Code 55442	Transaction ID : SB17.5336		
Purpose of Disbursement Management Consulting		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Doug Gardner</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2012		
Mailing Address 5500 Nathan Lane N #3			Amount of Each Disbursement this Period 500.00		
City Plymouth	State MN	Zip Code 55442	Transaction ID : SB17.5330		
Purpose of Disbursement Management Consulting		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>c. Doug Gardner</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012		
Mailing Address 5500 Nathan Lane N #3			Amount of Each Disbursement this Period 1800.00		
City Plymouth	State MN	Zip Code 55442	Transaction ID : SB17.5335		
Purpose of Disbursement Management Consulting		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4503.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 67	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Doug Gardner</b>		Date of Disbursement MM / DD / YYYY 06 / 07 / 2012
Mailing Address 5500 Nathan Lane N #3		Amount of Each Disbursement this Period 375.73
City Plymouth	State MN	
Zip Code 55442	Purpose of Disbursement Expense Reimbursement	Transaction ID : SB17.5328
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Kwik Trip</b>		Date of Disbursement MM / DD / YYYY 05 / 03 / 2012
Mailing Address 501 Elm Ave W		Amount of Each Disbursement this Period 51.38
City Waseca	State MN	
Zip Code 56093	Purpose of Disbursement Transportation: Fuel	Transaction ID : SB17.5328.0
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Superamerica</b>		Date of Disbursement MM / DD / YYYY 05 / 09 / 2012
Mailing Address 23087 State Highway 13		Amount of Each Disbursement this Period 47.00
City Albert Lea	State MN	
Zip Code 56007	Purpose of Disbursement Transportation: Fuel	Transaction ID : SB17.5328.2
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	375.73
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 43 OF 67	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Superamerica</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2012
Mailing Address 23087 State Highway 13		Amount of Each Disbursement this Period 54.98
City Albert Lea	State MN	
Zip Code 56007	Purpose of Disbursement Transportation: Fuel	[MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Superamerica</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2012
Mailing Address 23087 State Highway 13		Amount of Each Disbursement this Period 54.96
City Albert Lea	State MN	
Zip Code 56007	Purpose of Disbursement Transportation: Fuel	[MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Golnik Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2012
Mailing Address 1192 Portland Ave		Amount of Each Disbursement this Period 10000.00
City SAINT PAUL	State MN	
Zip Code 55104	Purpose of Disbursement Management Consulting	[MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	10000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 67			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Shad Gordon</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2012		
Mailing Address 3151 Wilds Ridge Road			Amount of Each Disbursement this Period 360.00		
City Prior Lake	State MN	Zip Code 55372	Transaction ID : SB17.5405		
Purpose of Disbursement In-kind - Golf Tournament Prizes		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Green Mill</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2012		
Mailing Address 2218 East Main St			Amount of Each Disbursement this Period 20.97		
City Albert Lea	State MN	Zip Code 56007	Transaction ID : SB17.5100		
Purpose of Disbursement Food and Beverage		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>C. Green Mill</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2012		
Mailing Address 2218 East Main St			Amount of Each Disbursement this Period 44.49		
City Albert Lea	State MN	Zip Code 56007	Transaction ID : SB17.5101		
Purpose of Disbursement Food and Beverage		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	425.46
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 67			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Holiday</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2012
Mailing Address 420 N Main St		Amount of Each Disbursement this Period 111.00
City Le Sueur	State MN	
Zip Code 56058	Purpose of Disbursement Transportation: Fuel	<b>Transaction ID : SB17.5104</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Holiday Inn</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2012
Mailing Address 1025 Highway 61 E		Amount of Each Disbursement this Period 118.67
City WINONA	State MN	
Zip Code 55987	Purpose of Disbursement Lodging	<b>Transaction ID : SB17.5108</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Hy-Vee</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2012
Mailing Address 1230 North State St		Amount of Each Disbursement this Period 191.11
City WASECA	State MN	
Zip Code 56093	Purpose of Disbursement Transportation: Fuel	<b>Transaction ID : SB17.5112</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	420.78
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 67			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Kwik Trip</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2012
Mailing Address 501 Elm Ave W		Amount of Each Disbursement this Period 124.70
City Waseca	State MN	
Zip Code 56093		
Purpose of Disbursement Transportation: Fuel		Category/ Type
Candidate Name		
Office Sought:	Disbursement For: 2012	
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Kwik Trip</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2012
Mailing Address 501 Elm Ave W		Amount of Each Disbursement this Period 8.97
City Waseca	State MN	
Zip Code 56093		
Purpose of Disbursement Food and Beverage		Category/ Type
Candidate Name		
Office Sought:	Disbursement For: 2012	
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. Kwik Trip</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2012
Mailing Address 501 Elm Ave W		Amount of Each Disbursement this Period 115.03
City Waseca	State MN	
Zip Code 56093		
Purpose of Disbursement Transportation: Fuel		Category/ Type
Candidate Name		
Office Sought:	Disbursement For: 2012	
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	248.70
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 67	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Kwik Trip</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address 501 Elm Ave W		Amount of Each Disbursement this Period 92.75
City Waseca	State MN	
Zip Code 56093	Purpose of Disbursement Transportation: Fuel	Transaction ID : SB17.5119
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Kwik Trip</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address 501 Elm Ave W		Amount of Each Disbursement this Period 66.63
City Waseca	State MN	
Zip Code 56093	Purpose of Disbursement Transportation: Fuel	Transaction ID : SB17.5120
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Kwik Trip</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address 501 Elm Ave W		Amount of Each Disbursement this Period 10.00
City Waseca	State MN	
Zip Code 56093	Purpose of Disbursement Food and Beverage	Transaction ID : SB17.5121
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	169.38
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 67			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Kwik Trip</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 501 Elm Ave W		Amount of Each Disbursement this Period 61.22
City Waseca	State MN	
Zip Code 56093	Purpose of Disbursement Transportation: Fuel	Transaction ID : SB17.5122
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Kwik Trip</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2012
Mailing Address 501 Elm Ave W		Amount of Each Disbursement this Period 112.00
City Waseca	State MN	
Zip Code 56093	Purpose of Disbursement Transportation: Fuel	Transaction ID : SB17.5477
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Kwik Trip</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2012
Mailing Address 501 Elm Ave W		Amount of Each Disbursement this Period 72.00
City Waseca	State MN	
Zip Code 56093	Purpose of Disbursement Transportation: Fuel	Transaction ID : SB17.5123
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	245.22
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 67			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Kwik Trip</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2012
Mailing Address 501 Elm Ave W		Amount of Each Disbursement this Period 102.50 <b>Transaction ID : SB17.5124</b>
City Waseca	State MN	
Purpose of Disbursement Transportation: Fuel		Category/ Type
Candidate Name		
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Kwik Trip</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2012
Mailing Address 501 Elm Ave W		Amount of Each Disbursement this Period 122.88 <b>Transaction ID : SB17.5125</b>
City Waseca	State MN	
Purpose of Disbursement Transportation: Fuel		Category/ Type
Candidate Name		
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. Kwik Trip</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2012
Mailing Address 501 Elm Ave W		Amount of Each Disbursement this Period 10.00 <b>Transaction ID : SB17.5126</b>
City Waseca	State MN	
Purpose of Disbursement Food and Beverage		Category/ Type
Candidate Name		
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	235.38
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 67			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Kwik Trip</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2012
Mailing Address 501 Elm Ave W		Amount of Each Disbursement this Period 56.00 <b>Transaction ID : SB17.5127</b>
City Waseca	State MN	
Purpose of Disbursement Transportation: Fuel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. Kwik Trip</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2012
Mailing Address 501 Elm Ave W		Amount of Each Disbursement this Period 10.00 <b>Transaction ID : SB17.5128</b>
City Waseca	State MN	
Purpose of Disbursement Food and Beverage		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>C. Kwik Trip</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2012
Mailing Address 501 Elm Ave W		Amount of Each Disbursement this Period 99.00 <b>Transaction ID : SB17.5129</b>
City Waseca	State MN	
Purpose of Disbursement Transportation: Fuel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	165.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 67			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Kwik Trip</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2012
Mailing Address 501 Elm Ave W		Amount of Each Disbursement this Period 10.00 <b>Transaction ID : SB17.5130</b>
City Waseca	State MN	
Zip Code 56093	Purpose of Disbursement Food and Beverage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Marty Lass</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2012
Mailing Address 16396 Millford Dr		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.5372</b>
City Eden Prairie	State MN	
Zip Code 55347	Purpose of Disbursement In-kind - Golf Tournament Prizes	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Chris Laughlin</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2012
Mailing Address 1991 Lemond Road		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB17.5370</b>
City Owatonna	State MN	
Zip Code 55060	Purpose of Disbursement In-kind - Golf Tournament Prizes	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1510.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 67		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Office Max</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2012
Mailing Address 1201 S Broadway		Amount of Each Disbursement this Period 80.15
City Rochester	State MN Zip Code 55904	
Purpose of Disbursement Office Supplies	Candidate Name	Transaction ID : SB17.5143
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Office Max</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2012
Mailing Address 1201 S Broadway		Amount of Each Disbursement this Period 167.77
City Rochester	State MN Zip Code 55904	
Purpose of Disbursement Office Supplies	Candidate Name	Transaction ID : SB17.5144
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>c. P-2-B Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2012
Mailing Address 4750 E 53rd St Ste 206		Amount of Each Disbursement this Period 1372.32
City Minneapolis	State MN Zip Code 55417	
Purpose of Disbursement Campaign Yard Signs and Placards	Candidate Name	Transaction ID : SB17.5332
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1620.24
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 67			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
**A. P-2-B Strategies**

Mailing Address 4750 E 53rd St Ste 206

City Minneapolis State MN Zip Code 55417

Purpose of Disbursement Campaign Yard Signs and Placards

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement 06 / 22 / 2012

Amount of Each Disbursement this Period 1725.50

Transaction ID : SB17.5334

Full Name (Last, First, Middle Initial)  
**B. Kathy Parry**

Mailing Address 32832 161st St

City Waseca State MN Zip Code 56093

Purpose of Disbursement Expense Reimbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement 04 / 30 / 2012

Amount of Each Disbursement this Period 345.87

Transaction ID : SB17.5327

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

Mailing Address 2103 North State St

City Waseca State MN Zip Code 56093

Purpose of Disbursement Office Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement 04 / 30 / 2012

Amount of Each Disbursement this Period 88.92

Transaction ID : SB17.5327.0

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... 2071.37

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 67			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Walmart</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2012
Mailing Address 2103 North State St		Amount of Each Disbursement this Period 31.05
City Waseca State MN Zip Code 56093	Purpose of Disbursement Office Supplies	
Candidate Name		Transaction ID : SB17.5327.1
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. Kurt Pitcher</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2012
Mailing Address 975 Somerby PKWY LN NE		Amount of Each Disbursement this Period 500.00
City Byron State MN Zip Code 55902	Purpose of Disbursement In-kind - Golf Tournament Prizes	
Candidate Name		Transaction ID : SB17.5403
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>c. Secretary of State</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address 180 State Office Building 100 Rev Dr Martin Luther King Jr B		Amount of Each Disbursement this Period 300.00
City Saint Paul State MN Zip Code 55155	Purpose of Disbursement State Registration Fees	
Candidate Name		Transaction ID : SB17.5325
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	800.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 67		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Kristina Seppala</b>		Date of Disbursement MM / DD / YYYY 06 / 25 / 2012
Mailing Address 219 E Taylor Run Pkwy		Amount of Each Disbursement this Period 976.63 <b>Transaction ID : SB17.5417</b>
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement In-kind - Food and Beverage Provided	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Signs of Momentum</b>		Date of Disbursement MM / DD / YYYY 04 / 26 / 2012
Mailing Address 300 West St		Amount of Each Disbursement this Period 650.09 <b>Transaction ID : SB17.5161</b>
City BRAINERD	State MN	
Zip Code 56401	Purpose of Disbursement Office Supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Sportsmans</b>		Date of Disbursement MM / DD / YYYY 05 / 01 / 2012
Mailing Address 1818 North State St		Amount of Each Disbursement this Period 140.85 <b>Transaction ID : SB17.5321</b>
City Waseca	State MN	
Zip Code 56093	Purpose of Disbursement Transportation:Fuel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	976.63
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 67			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

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

Mailing Address 1818 North State St

City Waseca State MN Zip Code 56093

Purpose of Disbursement Transportation:Fuel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 06 / 15 / 2012

Amount of Each Disbursement this Period: 74.00

Transaction ID : SB17.5318

Full Name (Last, First, Middle Initial)  
**B. Bob Stark**

Mailing Address 2015 Lestview Drive

City Hastings State MN Zip Code 55033

Purpose of Disbursement In-kind - Golf Tournament Prizes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 06 / 25 / 2012

Amount of Each Disbursement this Period: 300.00

Transaction ID : SB17.5389

Full Name (Last, First, Middle Initial)  
**c. That Other Computer Store**

Mailing Address 207 N State St

City WASECA State MN Zip Code 56093

Purpose of Disbursement Office Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 05 / 03 / 2012

Amount of Each Disbursement this Period: 224.17

Transaction ID : SB17.5173

**SUBTOTAL** of Disbursements This Page (optional)..... 598.17

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 67			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. That Other Computer Store</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2012
Mailing Address 207 N State St		Amount of Each Disbursement this Period 207.51 <b>Transaction ID : SB17.5174</b>
City WASECA State MN Zip Code 56093	Purpose of Disbursement Office Supplies	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Tri M Graphics</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2012
Mailing Address 625 E Main St		Amount of Each Disbursement this Period 3404.81 <b>Transaction ID : SB17.5179</b>
City Owatonna State MN Zip Code 55060	Purpose of Disbursement Campaign Materials Printing	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Tri M Graphics</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2012
Mailing Address 625 E Main St		Amount of Each Disbursement this Period 545.52 <b>Transaction ID : SB17.5180</b>
City Owatonna State MN Zip Code 55060	Purpose of Disbursement Campaign Materials Printing	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4157.84
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 67		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Tri M Graphics</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2012
Mailing Address 625 E Main St		Amount of Each Disbursement this Period 232.34
City Owatonna	State MN	
Zip Code 55060	Purpose of Disbursement Campaign Materials Printing	<b>Transaction ID : SB17.5181</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2012
Mailing Address 114 2nd St NE		Amount of Each Disbursement this Period 226.30
City Waseca	State MN	
Zip Code 56093	Purpose of Disbursement Shipping	<b>Transaction ID : SB17.5182</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 114 2nd St NE		Amount of Each Disbursement this Period 45.00
City Waseca	State MN	
Zip Code 56093	Purpose of Disbursement Postage	<b>Transaction ID : SB17.5183</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	503.64
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 67			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2012
Mailing Address 114 2nd St NE		Amount of Each Disbursement this Period 135.00
City Waseca	State MN	
Zip Code 56093	Purpose of Disbursement Shipping	<b>Transaction ID : SB17.5184</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2012
Mailing Address 114 2nd St NE		Amount of Each Disbursement this Period 180.00
City Waseca	State MN	
Zip Code 56093	Purpose of Disbursement Shipping	<b>Transaction ID : SB17.5185</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Verizon</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2012
Mailing Address 1800 North State St		Amount of Each Disbursement this Period 137.92
City Waseca	State MN	
Zip Code 56093	Purpose of Disbursement Telephone Services	<b>Transaction ID : SB17.5186</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	452.92
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 67			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Verizon</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2012
Mailing Address 1800 North State St		Amount of Each Disbursement this Period 142.25 <b>Transaction ID : SB17.5187</b>
City Waseca State MN Zip Code 56093	Purpose of Disbursement Telephone Services	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Verizon</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2012
Mailing Address 1800 North State St		Amount of Each Disbursement this Period 140.61 <b>Transaction ID : SB17.5188</b>
City Waseca State MN Zip Code 56093	Purpose of Disbursement Telephone Services	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Verizon</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2012
Mailing Address 1800 North State St		Amount of Each Disbursement this Period 250.80 <b>Transaction ID : SB17.5189</b>
City Waseca State MN Zip Code 56093	Purpose of Disbursement Telephone Services	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	533.66
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 61 OF 67	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Verizon</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2012
Mailing Address 1800 North State St		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : SB17.5190</b>
City Waseca State MN Zip Code 56093	Purpose of Disbursement Telephone Services	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Gerald Vogt</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2012
Mailing Address 3004 Lake Chapeau Dr		Amount of Each Disbursement this Period 240.00 <b>Transaction ID : SB17.5407</b>
City Albert Lea State MN Zip Code 56007	Purpose of Disbursement In-kind - Golf Tournament Prizes	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Walmart</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 20 / 2012
Mailing Address 2103 North State St		Amount of Each Disbursement this Period 52.47 <b>Transaction ID : SB17.5191</b>
City Waseca State MN Zip Code 56093	Purpose of Disbursement Parade Supplies	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	392.47
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 62 OF 67	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Walmart</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 20 / 2012
Mailing Address 2103 North State St		Amount of Each Disbursement this Period 84.18
City Waseca State MN Zip Code 56093	Purpose of Disbursement Parade Supplies	
Candidate Name		Transaction ID : SB17.5192
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Walmart</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2012
Mailing Address 2103 North State St		Amount of Each Disbursement this Period 26.65
City Waseca State MN Zip Code 56093	Purpose of Disbursement Parade Supplies	
Candidate Name		Transaction ID : SB17.5193
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. Walmart</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2012
Mailing Address 2103 North State St		Amount of Each Disbursement this Period 41.35
City Waseca State MN Zip Code 56093	Purpose of Disbursement Parade Supplies	
Candidate Name		Transaction ID : SB17.5194
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	152.18
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 67		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Walmart</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2012
Mailing Address 2103 North State St		Amount of Each Disbursement this Period 67.90
City Waseca State MN Zip Code 56093	Purpose of Disbursement Parade Supplies	
Candidate Name	Category/Type	<b>Transaction ID : SB17.5195</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Walmart</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2012
Mailing Address 2103 North State St		Amount of Each Disbursement this Period 63.01
City Waseca State MN Zip Code 56093	Purpose of Disbursement Parade Supplies	
Candidate Name	Category/Type	<b>Transaction ID : SB17.5196</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Walmart</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2012
Mailing Address 2103 North State St		Amount of Each Disbursement this Period 60.67
City Waseca State MN Zip Code 56093	Purpose of Disbursement Parade Supplies	
Candidate Name	Category/Type	<b>Transaction ID : SB17.5197</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	191.58
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 67		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Walmart</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2012
Mailing Address 2103 North State St		Amount of Each Disbursement this Period 111.56
City Waseca	State MN	
Zip Code 56093	Purpose of Disbursement Parade Supplies	<b>Transaction ID : SB17.5198</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Walmart</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2012
Mailing Address 2103 North State St		Amount of Each Disbursement this Period 100.89
City Waseca	State MN	
Zip Code 56093	Purpose of Disbursement Parade Supplies	<b>Transaction ID : SB17.5199</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Walmart</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2012
Mailing Address 2103 North State St		Amount of Each Disbursement this Period 51.49
City Waseca	State MN	
Zip Code 56093	Purpose of Disbursement Parade Supplies	<b>Transaction ID : SB17.5200</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	263.94
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 67			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Walmart</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2012
Mailing Address 2103 North State St		Amount of Each Disbursement this Period 54.06
City Waseca State MN Zip Code 56093	Purpose of Disbursement Parade Supplies	
Candidate Name	Category/Type	<b>Transaction ID : SB17.5201</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Walmart</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2012
Mailing Address 2103 North State St		Amount of Each Disbursement this Period 129.42
City Waseca State MN Zip Code 56093	Purpose of Disbursement Parade Supplies	
Candidate Name	Category/Type	<b>Transaction ID : SB17.5202</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Ken Wilmes</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2012
Mailing Address 58928 211 Lane		Amount of Each Disbursement this Period 1500.00
City Mankato State MN Zip Code 56001	Purpose of Disbursement In-kind - Food and Beverage Paid	
Candidate Name	Category/Type	<b>Transaction ID : SB17.5409</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1683.48
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 67		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Mike Zinni</b>		Date of Disbursement MM / DD / YYYY 06 / 25 / 2012
Mailing Address PO Box 3122		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : SB17.5387</b>
City Mankato State MN Zip Code 56001	Purpose of Disbursement In-kind - Golf Tournament Prizes Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	250.00
<b>TOTAL</b> This Period (last page this line number only).....	52046.37

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 67			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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

NAME OF COMMITTEE (In Full)  
**PARRY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Carney Auto, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2012
Mailing Address 26008 US Hwy 218		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB20A.5236</b>
City Austin State MN Zip Code 55912	Purpose of Disbursement Refund of Corporate Contribution Candidate Name Category/Type 010	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	500.00
<b>TOTAL</b> This Period (last page this line number only).....	500.00