

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

Kristi for Congress

ADDRESS (number and street)

PO Box 852

Check if different than previously reported. (ACC)

Sioux Falls

SD

57101

2. FEC IDENTIFICATION NUMBER ▼

C C00476853

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

SD

00

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

M M / D D / Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y
07 / 01 / 2014

through

M M / D D / Y Y Y Y
09 / 30 / 2014

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 Ted Husted

Signature of Treasurer Ted Husted

[Electronically Filed]

Date

M M / D D / Y Y Y Y
10 / 15 / 2014

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

Office Use Only								
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Kristi 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))....	370363.66	2179393.43
(b) Total Contribution Refunds (from Line 20(d))	2275	15660
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	368088.66	2163733.43
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	215192.35	1222184.89
(b) Total Offsets to Operating Expenditures (from Line 14).....	210	3284.18
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	214982.35	1218900.71
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1059790.15	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0	

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

Kristi for Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	177759.66	1191879.12
(ii) Unitemized.....	29204	226067.43
(iii) TOTAL of contributions from individuals ▶	206963.66	1417946.55
(b) Political Party Committees.....	1150	2395.57
(c) Other Political Committees (such as PACs).....	162250	759051.31
(d) The Candidate.....	0	0
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	370363.66	2179393.43
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0	31.25
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0	0
(b) All Other Loans.....	0	0
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0	0
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	210	3284.18
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	310.89	1800.9
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	370884.55	2184509.76

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	215192.35	1222184.89
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	0
(b) Of All Other Loans	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	2275	15510
(b) Political Party Committees.....	0	150
(c) Other Political Committees (such as PACs).....	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	2275	15660
21. OTHER DISBURSEMENTS	70650	228104
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	288117.35	1465948.89

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	977022.95
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	370884.55
25. SUBTOTAL (add Line 23 and Line 24).....	1347907.5
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	288117.35
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1059790.15

**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 297
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Northwest Beverage

Full Name (Last, First, Middle Initial)
Northwest Beverage

Mailing Address PO Box 398

City Mobridge State SD Zip Code 57601-0398

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 0

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : A-CF33115

Amount of Each Receipt this Period
 500

Refund issued 9/30/14

B. Schlomer Construction

Full Name (Last, First, Middle Initial)
Schlomer Construction

Mailing Address 812 7th Avenue W

City Mobridge State SD Zip Code 57601-1916

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 0

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2014

Transaction ID : A-CF33144

Amount of Each Receipt this Period
 500

Refund issued 9/30/14

C. William H. Adam

Full Name (Last, First, Middle Initial)
William H. Adam

Mailing Address 2105 Mustang Lane

City Spearfish State SD Zip Code 57783-9593

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 495

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 28 / 2014

Transaction ID : A-CF31995

Amount of Each Receipt this Period
 50

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 6 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
William H. Adam

Mailing Address 2105 Mustang Lane

City Spearfish State SD Zip Code 57783-9593

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **495**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 02 / 2014

Transaction ID : A-CF32537

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
Alton W. Almquist

Mailing Address 3942 Cowell Boulevard

City Davis State CA Zip Code 95618-4391

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **305**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 08 / 2014

Transaction ID : A-CF32825

Amount of Each Receipt this Period
40

C. Full Name (Last, First, Middle Initial)
Allison G Alvine

Mailing Address 2901 E Old Orchard Trl

City Sioux Falls State SD Zip Code 57103

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

Name of Employer Arthritis Foundation Occupation Volunteer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 07 / 2014

Transaction ID : A-CF32472

Amount of Each Receipt this Period
500

SUBTOTAL of Receipts This Page (optional).....	590.00
TOTAL 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 7 OF 297
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Greg F Alvine		Date of Receipt MM / DD / YYYY 09 / 07 / 2014
Mailing Address 2901 E Old Orchard Trl		Transaction ID : A-CF32473
City Sioux Falls	State SD	
Zip Code 57103		Amount of Each Receipt this Period 500
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer CORE Orthopedics	Occupation Orthopedic surgeon	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

Full Name (Last, First, Middle Initial) B. Jerri Andersen		Date of Receipt MM / DD / YYYY 09 / 02 / 2014
Mailing Address PO Box 340		Transaction ID : A-CF32640
City Arlington	State SD	
Zip Code 57212-0340		Amount of Each Receipt this Period 100
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100
Name of Employer Self-Employed	Occupation Insurance Agent	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 390	

Full Name (Last, First, Middle Initial) C. LaRaye E. Andersen		Date of Receipt MM / DD / YYYY 09 / 02 / 2014
Mailing Address 1902 Peninah Street		Transaction ID : A-CF32468
City Yankton	State SD	
Zip Code 57078-1841		Amount of Each Receipt this Period 25
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 255	

SUBTOTAL of Receipts This Page (optional).....	625.00
TOTAL 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 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Lynn A. Anderson

Mailing Address 2513 W Brentridge Circle

City State Zip Code
Sioux Falls SD 57108-1518

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
 M M / D D / Y Y Y Y
07 / 15 / 2014

Transaction ID : A-CF31856

Amount of Each Receipt this Period
1000

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

Mailing Address 844 Pompeska Drive

City State Zip Code
Watertown SD 57201-5463

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

Name of Employer Occupation
Self-Employed Contractor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
09 / 23 / 2014

Transaction ID : A-CF32943

Amount of Each Receipt this Period
250

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

Mailing Address PO Box 260

City State Zip Code
Mc Intosh SD 57641-0260

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

Name of Employer Occupation
Self-Employed Rancher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
630

Date of Receipt
 M M / D D / Y Y Y Y
08 / 14 / 2014

Transaction ID : A-CF32278

Amount of Each Receipt this Period
100

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

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

1350.00

**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 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Robert E Artlip

Mailing Address 3908 W Chicago Street

City State Zip Code
Rapid City SD 57702-0242

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
205

Date of Receipt
 M M / D D / Y Y Y Y
08 / 04 / 2014

Transaction ID : A-CF32096

Amount of Each Receipt this Period
45

B. Full Name (Last, First, Middle Initial)
Robert E Artlip

Mailing Address 3908 W Chicago Street

City State Zip Code
Rapid City SD 57702-0242

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
205

Date of Receipt
 M M / D D / Y Y Y Y
09 / 02 / 2014

Transaction ID : A-CF32538

Amount of Each Receipt this Period
60

C. Full Name (Last, First, Middle Initial)
Darla L. Assman

Mailing Address 28636 283rd Avenue

City State Zip Code
Mission SD 57555-5927

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

Name of Employer Occupation
Assman Land and Cattle Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
09 / 15 / 2014

Transaction ID : A-CF32855

Amount of Each Receipt this Period
1000

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

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

1105.00

**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 10 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Michael Au

Mailing Address 172 E 64th Street

City State Zip Code
New York NY 10065-7478

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

Name of Employer Occupation
Intrepid Capital Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
08 / 11 / 2014

Transaction ID : A-CF32244

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
R. Martin Badgley

Mailing Address 50 Paradise Drive

City State Zip Code
Watertown SD 57201-5400

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

Name of Employer Occupation
Dynamie Engineering Machinist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
09 / 02 / 2014

Transaction ID : A-CF32641

Amount of Each Receipt this Period
200

C. Full Name (Last, First, Middle Initial)
Angie E. Bahr

Mailing Address 925 N Division Avenue

City State Zip Code
Madison SD 57042-1827

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

Name of Employer Occupation
Madison Lawn Care, Inc. Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750

Date of Receipt
 M M / D D / Y Y Y Y
08 / 28 / 2014

Transaction ID : A-CF32382

Amount of Each Receipt this Period
500

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

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

1200.00

**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 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Warren William Bailey

Mailing Address 800 W Peak Vista Place

City Tucson State AZ Zip Code 85737-9467

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **240**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : A-CF32826

Amount of Each Receipt this Period
35

B. Full Name (Last, First, Middle Initial)
Johnnie C. Baker

Mailing Address PO Box 163

City Wrightsville Beach State NC Zip Code 28480-0163

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

Name of Employer Environmental Chemists Inc Occupation Chemist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 11 / 2014

Transaction ID : A-CF32245

Amount of Each Receipt this Period
75

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

Mailing Address 27941 Sd Highway 1804

City Platte State SD Zip Code 57369-6430

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 28 / 2014

Transaction ID : A-CF31997

Amount of Each Receipt this Period
50

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

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

160.00

**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 12 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Charles H. Balcom

Mailing Address 41205 258th Street

City Mitchell State SD Zip Code 57301-7506

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

Name of Employer Consultants, Ltd Occupation Financial Planner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **900**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 08 / 2014

Transaction ID : A-CF32189

Amount of Each Receipt this Period
300

B. Full Name (Last, First, Middle Initial)
Joan Ballantyne

Mailing Address PO Box 734

City Cherokee State IA Zip Code 51012-0734

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

Name of Employer Self-Employed Occupation Real Estate Sales

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 05 / 2014

Transaction ID : A-CF32572

Amount of Each Receipt this Period
55

C. Full Name (Last, First, Middle Initial)
Joseph P. Baratta

Mailing Address 345 Park Avenue

City New York State NY Zip Code 10154-0004

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

Name of Employer Blackstone Occupation Finance Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 17 / 2014

Transaction ID : A-CF32882

Amount of Each Receipt this Period
2600

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

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

2955.00

**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 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Arden J. Barlow

Mailing Address 3809 S Slaten Park Drive

City State Zip Code
Sioux Falls SD 57103-4636

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
435

Date of Receipt
 M M / D D / Y Y Y Y
09 / 03 / 2014

Transaction ID : A-CF32618

Amount of Each Receipt this Period
30

B. Full Name (Last, First, Middle Initial)
Hugh Bartels

Mailing Address 1244 N Maple

City State Zip Code
Watertown SD 57201-1271

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

Name of Employer Occupation
Reliabank Banker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350

Date of Receipt
 M M / D D / Y Y Y Y
09 / 23 / 2014

Transaction ID : A-CF32944

Amount of Each Receipt this Period
200

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

Mailing Address 5445 Pine Tree Drive

City State Zip Code
Rapid City SD 57702-9267

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

Name of Employer Occupation
Self-Employed Accountant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
07 / 08 / 2014

Transaction ID : A-CF31767

Amount of Each Receipt this Period
500

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

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

730.00

**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 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Robert N. Beck

Mailing Address **PO Box 467**

City **Thomsons Station** State **TN** Zip Code **37179**

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

Name of Employer **Beck Consulting Group LLC** Occupation **Organization Consultant**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1091**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 01 / 2014

Transaction ID : A-CF32087

Amount of Each Receipt this Period
25

B. Full Name (Last, First, Middle Initial)
Robert N. Beck

Mailing Address **PO Box 467**

City **Thomsons Station** State **TN** Zip Code **37179**

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

Name of Employer **Beck Consulting Group LLC** Occupation **Organization Consultant**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1091**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 20 / 2014

Transaction ID : A-CF32821

Amount of Each Receipt this Period
50

C. Full Name (Last, First, Middle Initial)
Robert N. Beck

Mailing Address **PO Box 467**

City **Thomsons Station** State **TN** Zip Code **37179**

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

Name of Employer **Beck Consulting Group LLC** Occupation **Organization Consultant**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1091**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 25 / 2014

Transaction ID : A-CF33018

Amount of Each Receipt this Period
50

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

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

125.00

**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 15 OF 297
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) Grace D. Beezer		Date of Receipt M M / D D / Y Y Y Y 08 / 14 / 2014
Mailing Address 6316 26th Avenue NW		Transaction ID : A-CF32279
City Seattle	State WA	Zip Code 98107-2427
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 60	
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 330	

Full Name (Last, First, Middle Initial) Grace D. Beezer		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address 6316 26th Avenue NW		Transaction ID : A-CF32828
City Seattle	State WA	Zip Code 98107-2427
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50	
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 330	

Full Name (Last, First, Middle Initial) Sam Benne		Date of Receipt M M / D D / Y Y Y Y 08 / 19 / 2014
Mailing Address 3918 Mary Drive		Transaction ID : A-CF32343
City Rapid City	State SD	Zip Code 57702-2236
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000	
Name of Employer First American Title	Occupation President	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

SUBTOTAL of Receipts This Page (optional).....	1110.00
TOTAL 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 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Vernell C. Benson

Mailing Address PO Box 453

City State Zip Code
Vermillion SD 57069-0453

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
305

Date of Receipt
 M M / D D / Y Y Y Y
08 / 06 / 2014

Transaction ID : A-CF32141

Amount of Each Receipt this Period
15

B. Full Name (Last, First, Middle Initial)
Vernell C. Benson

Mailing Address PO Box 453

City State Zip Code
Vermillion SD 57069-0453

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
305

Date of Receipt
 M M / D D / Y Y Y Y
09 / 03 / 2014

Transaction ID : A-CF32620

Amount of Each Receipt this Period
15

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

Mailing Address PO Box 453

City State Zip Code
Vermillion SD 57069-0453

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
305

Date of Receipt
 M M / D D / Y Y Y Y
09 / 22 / 2014

Transaction ID : A-CF32926

Amount of Each Receipt this Period
10

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

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

40.00

**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 297
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Lyle L. Berg

Mailing Address 42856 142nd Street

City Webster State SD Zip Code 57274-5510

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

Name of Employer Self-Employed Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 11 / 2014

Transaction ID : A-CF31819

Amount of Each Receipt this Period
 100

B. Full Name (Last, First, Middle Initial)
Lyle L. Berg

Mailing Address 42856 142nd Street

City Webster State SD Zip Code 57274-5510

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

Name of Employer Self-Employed Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 02 / 2014

Transaction ID : A-CF32540

Amount of Each Receipt this Period
 100

C. Full Name (Last, First, Middle Initial)
Richard Y. Bershon

Mailing Address 27322 Estates Road

City Hot Springs State SD Zip Code 57747-7537

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3082**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 02 / 2014

Transaction ID : A-CF32642

Amount of Each Receipt this Period
 900

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

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

1100.00

**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 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Jerome Bieber

Mailing Address 108 W Logan Avenue
Uve

City State Zip Code
Gettysburg SD 57442-1534

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
325

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 02 / 2014

Transaction ID : A-CF32541

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
Wayne K. Bierman

Mailing Address 1411 Dick Drive

City State Zip Code
Aberdeen SD 57401-7629

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
382

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 28 / 2014

Transaction ID : A-CF33019

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
Mark A. Bierschbach

Mailing Address PO Box 592

City State Zip Code
Milbank SD 57252-0592

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

Name of Employer Occupation
Self-Employed Dentist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
625

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 23 / 2014

Transaction ID : A-CF32945

Amount of Each Receipt this Period
125

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

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

275.00

**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 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Elmer A. Bietz

Mailing Address 28443 415th Avenue

City State Zip Code
Tripp SD 57376-6312

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
09 / 11 / 2014

Transaction ID : A-CF32780

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
David H. Billion

Mailing Address 3401 W 41st Street

City State Zip Code
Sioux Falls SD 57106-0710

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

Name of Employer Occupation
Billion Automotive President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
 M M / D D / Y Y Y Y
07 / 24 / 2014

Transaction ID : A-CF31934

Amount of Each Receipt this Period
2000

C. Full Name (Last, First, Middle Initial)
Ronald E. Bishop

Mailing Address 18700 Lanteen Brook Court

City State Zip Code
Cornelius NC 28031-5529

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
09 / 03 / 2014

Transaction ID : A-CF32622

Amount of Each Receipt this Period
50

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

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

2150.00

**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 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Scott Blackstock

Mailing Address PO Box 311

City Thomaston State GA Zip Code 30286-0004

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

Name of Employer Title Wave Auto Spa Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5100**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 01 / 2014

Transaction ID : A-CF32060

Amount of Each Receipt this Period
2500

B. Full Name (Last, First, Middle Initial)
George W. Blair

Mailing Address 13079 Pleasant Valley Road

City Sturgis State SD Zip Code 57785-6678

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 02 / 2014

Transaction ID : A-CF32643

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Kenneth B. Blair

Mailing Address 113 Iron Bridge Road

City Sarver State PA Zip Code 16055-8651

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 10 / 2014

Transaction ID : A-CF32673

Amount of Each Receipt this Period
75

SUBTOTAL of Receipts This Page (optional).....	3075.00
TOTAL 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 21 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Thomas Samuel Bohnet

Mailing Address 4608 Sd Highway 314

City Yankton State SD Zip Code 57078-6335

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

Name of Employer Self-Employed Occupation Business Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **266**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 24 / 2014

Transaction ID : A-CF33026

Amount of Each Receipt this Period
 250

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

Mailing Address 20210 322nd Avenue

City Harrold State SD Zip Code 57536-6206

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

Name of Employer Tumbleweed Lodge Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 15 / 2014

Transaction ID : A-CF32856

Amount of Each Receipt this Period
 250

C. Full Name (Last, First, Middle Initial)
Robert W Bond

Mailing Address 5109 Stoney Creek Drive

City Rapid City State SD Zip Code 57702-9261

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1375**

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 25 / 2014

Transaction ID : A-CF32366

Amount of Each Receipt this Period
 750

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

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

1250.00

**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 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Clayton E. Borchardt

Mailing Address **PO Box 274**

City **Brookings** State **SD** Zip Code **57006-0274**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 30 / 2014

Transaction ID : A-CF32027

Amount of Each Receipt this Period
25

B. Full Name (Last, First, Middle Initial)
Clayton E. Borchardt

Mailing Address **PO Box 274**

City **Brookings** State **SD** Zip Code **57006-0274**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 05 / 2014

Transaction ID : A-CF32604

Amount of Each Receipt this Period
25

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

Mailing Address **6825 150th Avenue NE**

City **Redmond** State **WA** Zip Code **98052-4721**

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

Name of Employer **Information Requested** Occupation **Information Requested**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **220**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 04 / 2014

Transaction ID : A-CF32099

Amount of Each Receipt this Period
60

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

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

110.00

**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 23 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Anthony W. Bour

Mailing Address 705 W Ralph Rogers Road

City State Zip Code
Sioux Falls SD 57108-2879

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

Name of Employer Occupation
Showplace Wood Products Management

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3600

Date of Receipt
 M M / D D / Y Y Y Y
09 / 19 / 2014

Transaction ID : A-CF32902

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Judy Boyle

Mailing Address 950 Spyglass Circle

City State Zip Code
Dakota Dunes SD 57049-5101

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
07 / 14 / 2014

Transaction ID : A-CF31840

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Dale E. Bradshaw

Mailing Address 125 Summerwood Drive

City State Zip Code
Watertown SD 57201-5475

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
900

Date of Receipt
 M M / D D / Y Y Y Y
09 / 02 / 2014

Transaction ID : A-CF32644

Amount of Each Receipt this Period
100

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

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

1600.00

**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 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
John L. Brandt

Mailing Address 2129 12th Avenue E

City Hibbing State MN Zip Code 55746-1836

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **330**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : A-CF32688

Amount of Each Receipt this Period
 20

B. Full Name (Last, First, Middle Initial)
Hugh D Brechtel

Mailing Address 4660 Twilight Dr.

City Rapid City State SD Zip Code 57703

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

Name of Employer SDARNG Occupation Computer Programmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 04 / 2014

Transaction ID : A-CF32091

Amount of Each Receipt this Period
 250

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

Mailing Address 3220 E Old Orchard Trail

City Sioux Falls State SD Zip Code 57103-4861

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4100**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 24 / 2014

Transaction ID : A-CF32957

Amount of Each Receipt this Period
 500

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

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

770.00

**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 25 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Bonnie L. Brouillard

Mailing Address **PO Box 592**

City **Custer** State **SD** Zip Code **57730-0592**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 14 / 2014

Transaction ID : A-CF31841

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Corey W. Brown

Mailing Address **316 S Potter Street**

City **Gettysburg** State **SD** Zip Code **57442-1549**

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

Name of Employer **State of SD** Occupation **Legislator**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 29 / 2014

Transaction ID : A-CF33127

Amount of Each Receipt this Period
500

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

Mailing Address **1115 W Havens Avenue # 23**

City **Mitchell** State **SD** Zip Code **57301-4108**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 04 / 2014

Transaction ID : A-CF32101

Amount of Each Receipt this Period
150

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

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

750.00

**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 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Tamara R. Buche

Mailing Address 704 E Clearwater Place

City State Zip Code
Sioux Falls SD 57108-8286

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

Name of Employer Occupation
GF Buche Co Grocer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
08 / 26 / 2014

Transaction ID : A-CF32376

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Michael T. Buckingham

Mailing Address 5569 Blue Stem Court

City State Zip Code
Rapid City SD 57702-8202

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

Name of Employer Occupation
NAU Holdings, Inc. President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
 M M / D D / Y Y Y Y
07 / 11 / 2014

Transaction ID : A-CF31820

Amount of Each Receipt this Period
2000

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

Mailing Address 4140 Gilgo Beach

City State Zip Code
Gilgo Beach NY 11702-4634

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

Name of Employer Occupation
Burke & Quick Partners LLC CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600

Date of Receipt
 M M / D D / Y Y Y Y
07 / 27 / 2014

Transaction ID : A-CF31949

Amount of Each Receipt this Period
2600

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

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

5600.00

**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 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Neal E. Busch

Mailing Address **PO Box 416**

City **Yankton** State **SD** Zip Code **57078-0416**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **530**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 15 / 2014

Transaction ID : A-CF31858

Amount of Each Receipt this Period
35

B. Full Name (Last, First, Middle Initial)
Neal E. Busch

Mailing Address **PO Box 416**

City **Yankton** State **SD** Zip Code **57078-0416**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **530**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 12 / 2014

Transaction ID : A-CF32273

Amount of Each Receipt this Period
50

C. Full Name (Last, First, Middle Initial)
Neal E. Busch

Mailing Address **PO Box 416**

City **Yankton** State **SD** Zip Code **57078-0416**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **530**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 15 / 2014

Transaction ID : A-CF32857

Amount of Each Receipt this Period
50

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

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

135.00

**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 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
James M. Butler

Mailing Address 2506 Oak Avenue

City Northbrook State IL Zip Code 60062-5224

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 11 / 2014

Transaction ID : A-CF32247

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Darrell D. Butterwick

Mailing Address PO Box 25604

City Saint Paul State MN Zip Code 55125-0604

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **950**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 04 / 2014

Transaction ID : A-CF32103

Amount of Each Receipt this Period
100

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

Mailing Address 1003 Southport Loop

City Bismarck State ND Zip Code 58504-7029

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

Name of Employer Self-Employed Occupation Real Estate Sales

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 17 / 2014

Transaction ID : A-CF32883

Amount of Each Receipt this Period
300

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

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

650.00

**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 29 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Dean R. Bymers

Mailing Address **PO Box 68**

City **Raymond** State **SD** Zip Code **57258-0068**

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

Name of Employer **Self-Employed** Occupation **Farmer**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **580**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 11 / 2014

Transaction ID : A-CF32248

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
Floyd A. Cammack

Mailing Address **17027 Old Stoneville Road**

City **Stoneville** State **SD** Zip Code **57787-7108**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **360**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 14 / 2014

Transaction ID : A-CF32280

Amount of Each Receipt this Period
40

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

Mailing Address **876 S Lake Drive**

City **Watertown** State **SD** Zip Code **57201-5458**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1450**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 18 / 2014

Transaction ID : A-CF32333

Amount of Each Receipt this Period
500

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

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

590.00

**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 30 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Lorraine Carlson

Mailing Address 876 S Lake Drive

City Watertown State SD Zip Code 57201-5458

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1450**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 15 / 2014

Transaction ID : A-CF32858

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Martha B. Carlson

Mailing Address 11 S Riverview Heights

City Sioux Falls State SD Zip Code 57105-0260

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 31 / 2014

Transaction ID : A-CF32033

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Greg R. Carmon

Mailing Address 25941 482nd Avenue

City Brandon State SD Zip Code 57005-6607

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

Name of Employer Midwest Railcar Repair, Inc. Occupation Railroad Car Repair

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 07 / 2014

Transaction ID : A-CF32466

Amount of Each Receipt this Period
1000

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

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

1600.00

**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 31 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Dave Carpenter

Mailing Address 4006 Wineberry Lane

City State Zip Code
Rapid City SD 57703-6925

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

Name of Employer Occupation
National Weather Service Meteorologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300

Date of Receipt
 M M / D D / Y Y Y Y
07 / 08 / 2014

Transaction ID : A-CF31769

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Michael D. Cartney

Mailing Address 1020 11th Street NE

City State Zip Code
Watertown SD 57201-6741

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

Name of Employer Occupation
Lake Area Technician Institu Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : A-CF33091

Amount of Each Receipt this Period
200

C. Full Name (Last, First, Middle Initial)
John Cervin Jr.

Mailing Address 815A Hilltop Ave Extension

City State Zip Code
Abingdon MD 21009-1306

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
775

Date of Receipt
 M M / D D / Y Y Y Y
08 / 03 / 2014

Transaction ID : A-CF32080

Amount of Each Receipt this Period
100

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL 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 32 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
John Cervin Jr.

Mailing Address 815A Hilltop Ave Extension

City Abingdon State MD Zip Code 21009-1306

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **775**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : A-CF32675

Amount of Each Receipt this Period
75

B. Full Name (Last, First, Middle Initial)
Charles R. Childerston

Mailing Address 1604 E 56th Street

City Sioux Falls State SD Zip Code 57103-5468

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 02 / 2014

Transaction ID : A-CF32645

Amount of Each Receipt this Period
100

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

Mailing Address PO Box 1046

City Hot Springs State SD Zip Code 57747-1046

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

Name of Employer Federal DOT Occupation Safety Inspector

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 02 / 2014

Transaction ID : A-CF32511

Amount of Each Receipt this Period
50

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

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

225.00

**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 33 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Anthony S. Cleberg

Mailing Address 5135 Carriage Hills Drive

City State Zip Code
Rapid City SD 57702-9279

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

Name of Employer Occupation
Black Hills Corp. CFO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3600

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 04 / 2014

Transaction ID : A-CF32104

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Lon Clemensen

Mailing Address 746 S El Dorado Drive

City State Zip Code
Sioux Falls SD 57108-8474

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

Name of Employer Occupation
LifeScape Healthcare

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
230

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 04 / 2014

Transaction ID : A-CF32105

Amount of Each Receipt this Period
50

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

Mailing Address 746 S El Dorado Drive

City State Zip Code
Sioux Falls SD 57108-8474

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

Name of Employer Occupation
LifeScape Healthcare

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
230

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : A-CF33081

Amount of Each Receipt this Period
50

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

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

1100.00

**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 34 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
James Cope

Mailing Address 805 W 3rd Street

City Yankton State SD Zip Code 57078-3702

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 11 / 2014

Transaction ID : A-CF32249

Amount of Each Receipt this Period
100

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

Mailing Address 805 W 3rd Street

City Yankton State SD Zip Code 57078-3702

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 25 / 2014

Transaction ID : A-CF32997

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
John Malphus Corothers USN (Ret)

Mailing Address 47617 181st Street

City Clear Lake State SD Zip Code 57226-5402

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **975**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 31 / 2014

Transaction ID : A-CF32034

Amount of Each Receipt this Period
100

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

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

300.00

**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 35 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
John Malphus Corothers USN (Ret)

Mailing Address 47617 181st Street

City Clear Lake	State SD	Zip Code 57226-5402
--------------------	-------------	------------------------

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **975**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 05 / 2014

Transaction ID : A-CF32574

Amount of Each Receipt this Period
 100

B. Full Name (Last, First, Middle Initial)
Keith A Crago

Mailing Address 5114 16th Avenue W

City Williston	State ND	Zip Code 58801-7018
-------------------	-------------	------------------------

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

Name of Employer Montana Dakota Utilities	Occupation Electrical Engineer Associate
--	---

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1150**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : A-CF32729

Amount of Each Receipt this Period
 75

C. Full Name (Last, First, Middle Initial)
Keith A Crago

Mailing Address 5114 16th Avenue W

City Williston	State ND	Zip Code 58801-7018
-------------------	-------------	------------------------

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

Name of Employer Montana Dakota Utilities	Occupation Electrical Engineer Associate
--	---

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1150**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 28 / 2014

Transaction ID : A-CF33020

Amount of Each Receipt this Period
 100

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

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

275.00

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

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

FOR LINE NUMBER: PAGE 36 OF 297
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
James P. Cronin

Mailing Address PO Box 14

City State Zip Code
Gettysburg SD 57442-0014

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

Name of Employer Occupation
C&B Operators Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
 09 29 2014

Transaction ID : A-CF33128

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Justin R. Cronin

Mailing Address PO Box 42

City State Zip Code
Gettysburg SD 57442-0042

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

Name of Employer Occupation
SD House of Representatives Legislator/Business Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1076.25

Date of Receipt
 M M / D D / Y Y Y Y
 09 25 2014

Transaction ID : A-IF33121

Amount of Each Receipt this Period
76.25

Inkind: Food/Beverage

C. Full Name (Last, First, Middle Initial)
Justin R. Cronin

Mailing Address PO Box 42

City State Zip Code
Gettysburg SD 57442-0042

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

Name of Employer Occupation
SD House of Representatives Legislator/Business Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1076.25

Date of Receipt
 M M / D D / Y Y Y Y
 09 29 2014

Transaction ID : A-CF33129

Amount of Each Receipt this Period
1000

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

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

1326.25

**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 37 OF 297
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) Michael Cronin		Date of Receipt M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address 206 S Broadway Street		Transaction ID : A-CF33130
City Gettysburg	State SD	Zip Code 57442-1504
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000	
Name of Employer Cronin Farms	Occupation Farmer/Rancher	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

Full Name (Last, First, Middle Initial) L. Byron Culver		Date of Receipt M M / D D / Y Y Y Y 09 / 24 / 2014
Mailing Address PO Box 876		Transaction ID : A-CF32958
City Rancho Santa Fe	State CA	Zip Code 92067-0876
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100	
Name of Employer Culver & Associates	Occupation Real Estate Counsel	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 700	

Full Name (Last, First, Middle Initial) David E. Dalrymple		Date of Receipt M M / D D / Y Y Y Y 08 / 06 / 2014
Mailing Address 8 Strawberry Bank Road Apt. 1		Transaction ID : A-CF32144
City Nashua	State NH	Zip Code 03062-2763
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25	
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400	

SUBTOTAL of Receipts This Page (optional).....	1125.00
TOTAL 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 38 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Betty A. Davidson

Mailing Address 114 6th Street SE

City Watertown State SD Zip Code 57201-4418

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

Name of Employer Premier Bank Card Occupation Collections

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 24 / 2014

Transaction ID : A-CF31935

Amount of Each Receipt this Period
300

B. Full Name (Last, First, Middle Initial)
Karen Day

Mailing Address 400 Parkwood Drive Apt. 322

City Pierre State SD Zip Code 57501-3373

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **375**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 06 / 2014

Transaction ID : A-CF32194

Amount of Each Receipt this Period
50

C. Full Name (Last, First, Middle Initial)
Darold R. Dean

Mailing Address 4608 S Twin Ridge Road

City Sioux Falls State SD Zip Code 57105-7163

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

Name of Employer Dizco, Inc Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 24 / 2014

Transaction ID : A-CF32959

Amount of Each Receipt this Period
500

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

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

850.00

**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 39 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Sandra K. Dean

Mailing Address 1245 N 10th Street
Apt. M30

City Spearfish State SD Zip Code 57783-1585

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **275**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 08 / 2014

Transaction ID : A-CF31754

Amount of Each Receipt this Period
 15

B. Full Name (Last, First, Middle Initial)
Sandra K. Dean

Mailing Address 1245 N 10th Street
Apt. M30

City Spearfish State SD Zip Code 57783-1585

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **275**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 06 / 2014

Transaction ID : A-CF32195

Amount of Each Receipt this Period
 15

C. Full Name (Last, First, Middle Initial)
Sandra K. Dean

Mailing Address 1245 N 10th Street
Apt. M30

City Spearfish State SD Zip Code 57783-1585

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **275**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 08 / 2014

Transaction ID : A-CF32691

Amount of Each Receipt this Period
 15

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

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

45.00

**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 40 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Sandra K. Dean

Mailing Address 1245 N 10th Street
Apt. M30

City Spearfish State SD Zip Code 57783-1585

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **275**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : A-CF32676

Amount of Each Receipt this Period
30

B. Full Name (Last, First, Middle Initial)
Kathryn M. Dennis

Mailing Address 4780 Cliff Dr

City Rapid City State SD Zip Code 57702

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **800**

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 14 / 2014

Transaction ID : A-CF32281

Amount of Each Receipt this Period
200

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

Mailing Address 26 W Del Ray Avenue

City Alexandria State VA Zip Code 22301-1524

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

Name of Employer Altria Client Services Occupation Director, Government Affairs

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 22 / 2014

Transaction ID : A-CF31907

Amount of Each Receipt this Period
500

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

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

730.00

**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 41 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Joe Dobbs

Mailing Address 6668 Berwick Court

City State Zip Code
Rapid City SD 57702-9558

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400

Date of Receipt
 M M / D D / Y Y Y Y
09 / 08 / 2014

Transaction ID : A-CF32730

Amount of Each Receipt this Period
200

B. Full Name (Last, First, Middle Initial)
Ronald B. Dodge II

Mailing Address 2318 Thornhill Drive

City State Zip Code
Colorado Springs CO 80920-5325

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
360

Date of Receipt
 M M / D D / Y Y Y Y
07 / 14 / 2014

Transaction ID : A-CF31843

Amount of Each Receipt this Period
50

C. Full Name (Last, First, Middle Initial)
W. Stephen Doshier

Mailing Address 3302 Snowmass Court

City State Zip Code
Rapid City SD 57702-4834

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

Name of Employer Occupation
Hills Materials Co. Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
340

Date of Receipt
 M M / D D / Y Y Y Y
08 / 15 / 2014

Transaction ID : A-CF32298

Amount of Each Receipt this Period
25

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

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

275.00

**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 42 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
W. Stephen Doshier

Mailing Address 3302 Snowmass Court

City State Zip Code
Rapid City SD 57702-4834

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

Name of Employer Occupation
Hills Materials Co. Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
340

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 24 / 2014

Transaction ID : A-CF32961

Amount of Each Receipt this Period
25

B. Full Name (Last, First, Middle Initial)
Benjamin T. Doughty

Mailing Address 2705 Cameron Drive

City State Zip Code
Rapid City SD 57702-5284

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
800

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 28 / 2014

Transaction ID : A-CF31999

Amount of Each Receipt this Period
50

C. Full Name (Last, First, Middle Initial)
Benjamin T. Doughty

Mailing Address 2705 Cameron Drive

City State Zip Code
Rapid City SD 57702-5284

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
800

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 08 / 2014

Transaction ID : A-CF32719

Amount of Each Receipt this Period
50

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

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

125.00

**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 43 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Donald A. Drake II

Mailing Address 5100 S Western Avenue

City State Zip Code
Sioux Falls SD 57108-2677

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

Name of Employer Occupation
Drake Orthodontists Orthodontist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
520

Date of Receipt
 M M / D D / Y Y Y Y
07 / 25 / 2014

Transaction ID : A-CF31940

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Nancy Ward Dunham

Mailing Address 3133 Heidiway Lane

City State Zip Code
Rapid City SD 57702-5296

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4600

Date of Receipt
 M M / D D / Y Y Y Y
09 / 05 / 2014

Transaction ID : A-CF32568

Amount of Each Receipt this Period
2000

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

Mailing Address 807 Hillcrest Grand Avenue

City State Zip Code
Yankton SD 57078-5118

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
09 / 02 / 2014

Transaction ID : A-CF32646

Amount of Each Receipt this Period
1000

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

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

3500.00

**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 44 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Janice Eframson

Mailing Address 138 Eframson Drive

City State Zip Code
Bryant SD 57221-2051

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
310

Date of Receipt
 M M / D D / Y Y Y Y
09 / 05 / 2014

Transaction ID : A-CF32605

Amount of Each Receipt this Period
15

B. Full Name (Last, First, Middle Initial)
Stephen E. Egger

Mailing Address 3100 S Bishop Jones Place

City State Zip Code
Sioux Falls SD 57103-4669

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : A-CF33092

Amount of Each Receipt this Period
250

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

Mailing Address 22543 Sd Highway 25

City State Zip Code
Howard SD 57349-6617

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

Name of Employer Occupation
Miner County, SD County Treasurer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225

Date of Receipt
 M M / D D / Y Y Y Y
09 / 02 / 2014

Transaction ID : A-CF32545

Amount of Each Receipt this Period
75

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

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

340.00

**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 45 OF 297
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) Ronald K. Einspahr		Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2014
Mailing Address 1127 Copper Mountain Road		Transaction ID : A-CF32252
City Brookings	State SD	Zip Code 57006-4634
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50	
Name of Employer Einspahr Auto Plaza Inc	Occupation Automobile Dealer	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250	

Full Name (Last, First, Middle Initial) Richard Ekstrum		Date of Receipt M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 25691 362nd Avenue		Transaction ID : A-CF32000
City Kimball	State SD	Zip Code 57355-7005
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 150	
Name of Employer Self-Employed	Occupation Farmer	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250	

Full Name (Last, First, Middle Initial) David L. Elson		Date of Receipt M M / D D / Y Y Y Y 09 / 24 / 2014
Mailing Address 513 E Plum Creek Road		Transaction ID : A-CF32962
City Sioux Falls	State SD	Zip Code 57105-6950
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100	
Name of Employer Avera Health	Occupation Physician	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700	

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL 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 46 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Lucille Emerson

Mailing Address **PO Box 345**

City **Philip** State **SD** Zip Code **57567-0345**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 28 / 2014

Transaction ID : A-CF32001

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
William N Eubank

Mailing Address **979 Kerry Lane**

City **Watertown** State **SD** Zip Code **57201-5497**

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

Name of Employer **Eubank Inc.** Occupation **President**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 04 / 2014

Transaction ID : A-CF32442

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Dennis A. Everson

Mailing Address **811 W 3rd Street**

City **Yankton** State **SD** Zip Code **57078-3702**

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

Name of Employer **First National Bank** Occupation **President**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 04 / 2014

Transaction ID : A-CF32107

Amount of Each Receipt this Period
100

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

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

700.00

**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 47 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Dennis A. Everson

Mailing Address 811 W 3rd Street

City Yankton State SD Zip Code 57078-3702

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

Name of Employer First National Bank Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 05 / 2014

Transaction ID : A-CF32576

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Sandy S Farner

Mailing Address 6205 S Doral Trail

City Sioux Falls State SD Zip Code 57108-2430

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 24 / 2014

Transaction ID : A-CF32963

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Frank L. Farrar

Mailing Address PO Box 1029

City Britton State SD Zip Code 57430-1029

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

Name of Employer Self-Employed Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3500**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 02 / 2014

Transaction ID : A-CF32647

Amount of Each Receipt this Period
1000

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

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

1600.00

**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 48 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Jerome Feltman

Mailing Address 1200 S Courtland Street

City Chamberlain State SD Zip Code 57325-1723

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

Name of Employer Self-Employed Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **370**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 05 / 2014

Transaction ID : A-CF32577

Amount of Each Receipt this Period
 40

B. Full Name (Last, First, Middle Initial)
Joan Ferguson

Mailing Address 30394 266th Street

City Witten State SD Zip Code 57584-6810

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

Name of Employer Self-Employed Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2014

Transaction ID : A-CF32860

Amount of Each Receipt this Period
 1000

C. Full Name (Last, First, Middle Initial)
Manuel A. Fernandez

Mailing Address 4090 SW 121st Avenue

City Miami State FL Zip Code 33175-3554

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

Name of Employer Akerman Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **370**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 07 / 2014

Transaction ID : A-CF32179

Amount of Each Receipt this Period
 50

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

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

1090.00

**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 49 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Manuel A. Fernandez

Mailing Address 4090 SW 121st Avenue

City Miami State FL Zip Code 33175-3554

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

Name of Employer Akerman Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **370**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 18 / 2014

Transaction ID : A-CF32815

Amount of Each Receipt this Period
 50

B. Full Name (Last, First, Middle Initial)
Corey R. Fiedler

Mailing Address 5212 S Briarwood Avenue

City Sioux Falls State SD Zip Code 57108-5110

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : A-CF33131

Amount of Each Receipt this Period
 500

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

Mailing Address 3725 E Fox Run Place

City Sioux Falls State SD Zip Code 57103-7196

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

Name of Employer Self-Employed Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 31 / 2014

Transaction ID : A-CF32036

Amount of Each Receipt this Period
 150

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

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

700.00

**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 50 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Patty Foster

Mailing Address 5509 N Castle Drive

City: Sioux Falls State: SD Zip Code: 57107-0804

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

Name of Employer: Retired Occupation: Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **350**

Date of Receipt: 09 / 22 / 2014

Transaction ID : A-CF32927

Amount of Each Receipt this Period: **100**

B. Full Name (Last, First, Middle Initial)
Jason G. Frazier

Mailing Address PO Box 428

City: Mobridge State: SD Zip Code: 57601-0428

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

Name of Employer: Self-Employed Occupation: Plumbing Contractor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **500**

Date of Receipt: 09 / 29 / 2014

Transaction ID : A-CF33132

Amount of Each Receipt this Period: **500**

C. Full Name (Last, First, Middle Initial)
Jeff D. Frey

Mailing Address 12532 290th Avenue

City: Mobridge State: SD Zip Code: 57601-5007

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

Name of Employer: Self-Employed Occupation: Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **500**

Date of Receipt: 09 / 29 / 2014

Transaction ID : A-CF33133

Amount of Each Receipt this Period: **500**

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

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

1100.00

**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 51 OF 297
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) Harold Fromm		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2014	
Mailing Address 314 N Berry Pine Road		Transaction ID : A-CF32731	
City Rapid City	State SD	Zip Code 57702-1859	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250	
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750		

Full Name (Last, First, Middle Initial) Bush Fullerton		Date of Receipt M M / D D / Y Y Y Y 08 / 15 / 2014	
Mailing Address 1260 McDonald Drive		Transaction ID : A-CF32300	
City Huron	State SD	Zip Code 57350-3521	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100	
Name of Employer Overbuilt Inc	Occupation Business Manager		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600		

Full Name (Last, First, Middle Initial) Ronald Geffre		Date of Receipt M M / D D / Y Y Y Y 08 / 28 / 2014	
Mailing Address 11247 370th Avenue		Transaction ID : A-CF32388	
City Leola	State SD	Zip Code 57456-7304	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 90	
Name of Employer Self-Employed	Occupation Farmer-Rancher		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 240		

SUBTOTAL of Receipts This Page (optional).....	440.00
TOTAL This Period (last page this line number only).....	440.00

**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 52 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Dean L. Gibson

Mailing Address 723 Fox Run Drive

City State Zip Code
Rapid City SD 57701-2336

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

Name of Employer Occupation
Rushmore Ambulatory surgery Center Nurse Anesthetist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
201

Date of Receipt
 M M / D D / Y Y Y Y
09 / 24 / 2014

Transaction ID : A-CF32964

Amount of Each Receipt this Period
25

B. Full Name (Last, First, Middle Initial)
David M. Giovannini

Mailing Address 1303 N Lincoln Street

City State Zip Code
Aberdeen SD 57401-2026

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

Name of Employer Occupation
Molded Fiber Glass Sr. Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : A-CF33120

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Alan L. Gobczynski

Mailing Address 1632 Cedar Drive

City State Zip Code
Aberdeen SD 57401-1121

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
270

Date of Receipt
 M M / D D / Y Y Y Y
07 / 28 / 2014

Transaction ID : A-CF31973

Amount of Each Receipt this Period
30

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

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

1055.00

**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 53 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Alan L. Gobczynski

Mailing Address 1632 Cedar Drive

City Aberdeen State SD Zip Code 57401-1121

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **270**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 02 / 2014

Transaction ID : A-CF32487

Amount of Each Receipt this Period
25

B. Full Name (Last, First, Middle Initial)
Richard H Goebel

Mailing Address PO Box 1117

City Spearfish State SD Zip Code 57783

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 04 / 2014

Transaction ID : A-CF32451

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
John A Goeman

Mailing Address 500 N Egan Avenue

City Madison State SD Zip Code 57042-1619

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 11 / 2014

Transaction ID : A-CF32254

Amount of Each Receipt this Period
500

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

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

775.00

**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 54 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Charles F. Gorder Sr.

Mailing Address 5526 Toyon Road

City San Diego State CA Zip Code 92115-1020

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 06 / 2014

Transaction ID : A-CF32197

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Charles F. Gorder Sr.

Mailing Address 5526 Toyon Road

City San Diego State CA Zip Code 92115-1020

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 08 / 2014

Transaction ID : A-CF32732

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Richard J. Gowen

Mailing Address 1609 Palo Verde Drive

City Rapid City State SD Zip Code 57701-4461

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

Name of Employer SD Science & Technology Auth Occupation President/CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 19 / 2014

Transaction ID : A-CF32344

Amount of Each Receipt this Period
1000

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

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

1500.00

**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 55 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Linda Mickelson Graham

Mailing Address 4001 S Cliff Avenue

City: Sioux Falls State: SD Zip Code: 57103-4528

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

Name of Employer: Self-Employed Occupation: Graham Companies

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **1500**

Date of Receipt: **08 / 05 / 2014**

Transaction ID : A-CF32134

Amount of Each Receipt this Period: **500**

B. Full Name (Last, First, Middle Initial)
Linda Mickelson Graham

Mailing Address 4001 S Cliff Avenue

City: Sioux Falls State: SD Zip Code: 57103-4528

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

Name of Employer: Self-Employed Occupation: Graham Companies

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **1500**

Date of Receipt: **08 / 20 / 2014**

Transaction ID : A-CF32352

Amount of Each Receipt this Period: **500**

C. Full Name (Last, First, Middle Initial)
Mark S. Graham

Mailing Address 4 S Pintail Place

City: Sioux Falls State: SD Zip Code: 57105-0151

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

Name of Employer: Retired Occupation: Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **1000**

Date of Receipt: **08 / 06 / 2014**

Transaction ID : A-CF32198

Amount of Each Receipt this Period: **1000**

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 56 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Kevin E Gresham

Mailing Address 7520 Moon Rock Rd

City Austin State TX Zip Code 78739

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

Name of Employer E.ON North America Occupation VP, External Affairs

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 18 / 2014

Transaction ID : A-CF32919

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Ronald L. Grey

Mailing Address 761 Fordland Avenue

City La Verne State CA Zip Code 91750-3823

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

Name of Employer Self-Employed Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **205**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : A-CF33160

Amount of Each Receipt this Period
35

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

Mailing Address PO Box 250

City Platte State SD Zip Code 57369-0250

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

Name of Employer Self-Employed Occupation Dentist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : A-CF32770

Amount of Each Receipt this Period
200

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

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

735.00

**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 57 OF 297
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Mark E Griffin		Date of Receipt M M / D D / Y Y Y Y 07 / 21 / 2014	
Mailing Address 35 S Riverview Heights		Transaction ID : A-CF31900	
City Sioux Falls	State SD	Zip Code 57105-0271	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500	
Name of Employer Lewis Drug	Occupation Pres/CEO		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5100		

Full Name (Last, First, Middle Initial) B. Mark E Griffin		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address 35 S Riverview Heights		Transaction ID : A-CF33094	
City Sioux Falls	State SD	Zip Code 57105-0271	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000	
Name of Employer Lewis Drug	Occupation Pres/CEO		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5100		

Full Name (Last, First, Middle Initial) C. Olive L. Grimsrud		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2014	
Mailing Address 1020 E 6th Street		Transaction ID : A-CF32735	
City Webster	State SD	Zip Code 57274-1612	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60	
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 390		

SUBTOTAL of Receipts This Page (optional).....	1560.00
TOTAL This Period (last page this line number only).....	[Empty Box]

**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 58 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
John C. Gross

Mailing Address **PO Box 238**

City **Madison** State **SD** Zip Code **57042-0238**

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

Name of Employer **Self-Employed** Occupation **Agriculture**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 28 / 2014

Transaction ID : A-CF32389

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Ralph D. Gross

Mailing Address **101 E 5th Street
Apt. 4**

City **Freeman** State **SD** Zip Code **57029-2093**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 28 / 2014

Transaction ID : A-CF32002

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
Lowell J. Grunwald

Mailing Address **507 W Orchard Avenue**

City **Indianola** State **IA** Zip Code **50125-1155**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **375**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 07 / 2014

Transaction ID : A-CF32221

Amount of Each Receipt this Period
50

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

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

650.00

**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 59 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Gretchen O. Haahr

Mailing Address 216 Casino Road

City Storm Lake State IA Zip Code 50588-7766

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 18 / 2014

Transaction ID : A-CF32893

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
John A. Haefner

Mailing Address 30061 Tislo Place

City Mound City State SD Zip Code 57646-6807

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

Name of Employer Self-Employed Occupation Farmer/Rancher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 17 / 2014

Transaction ID : A-CF32887

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Curtis L. Hage

Mailing Address 48023 Oak Trail Place

City Sioux Falls State SD Zip Code 57108-8213

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

Name of Employer Home Federal Bank Occupation Chairman & CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 02 / 2014

Transaction ID : A-CF32648

Amount of Each Receipt this Period
500

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 60 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Otto Hagedorn

Mailing Address 46954 272nd Street

City Tea	State SD	Zip Code 57064-8101
-------------	-------------	------------------------

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

Name of Employer Lakota Events Hall	Occupation Owner
--	---------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 10 / 2014

Transaction ID : A-CF32771

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Jeff M. Hall

Mailing Address 38846 124th Street

City Aberdeen	State SD	Zip Code 57401-8141
------------------	-------------	------------------------

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

Name of Employer Self-Employed	Occupation Farmer/Sand/Gravel Producer
-----------------------------------	---

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5100**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 17 / 2014

Transaction ID : A-CF32888

Amount of Each Receipt this Period
2000

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

Mailing Address 4225 Sonia Court

City Alexandria	State VA	Zip Code 22309-2347
--------------------	-------------	------------------------

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

Name of Employer Capitol Legislative Strat	Occupation Partner
---	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 22 / 2014

Transaction ID : A-CF31909

Amount of Each Receipt this Period
250

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

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

2350.00

**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 61 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Dean R. Hamm

Mailing Address 7900 Sheridan Lake Road

City State Zip Code
Rapid City SD 57702-9050

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250

Date of Receipt
 M M / D D / Y Y Y Y
09 / 02 / 2014

Transaction ID : A-CF32547

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Martin Hammon

Mailing Address 9910 Victoria Lake Road

City State Zip Code
Rapid City SD 57702-9069

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

Name of Employer Occupation
Rapid Fire Pro Inc. Fire Sprinkler Contractor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500

Date of Receipt
 M M / D D / Y Y Y Y
08 / 11 / 2014

Transaction ID : A-CF32255

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
James O. Hansen

Mailing Address 216 N Pierce Avenue

City State Zip Code
Pierre SD 57501-2924

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750

Date of Receipt
 M M / D D / Y Y Y Y
09 / 29 / 2014

Transaction ID : A-CF33048

Amount of Each Receipt this Period
250

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

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

850.00

**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 62 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
James R. Hanson

Mailing Address **PO Box 190**

City **Bison** State **SD** Zip Code **57620-0190**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 08 / 2014

Transaction ID : A-CF31773

Amount of Each Receipt this Period
50

Refund to be issued

B. Full Name (Last, First, Middle Initial)
Margaret L. Hanson

Mailing Address **240 Walnut Street**

City **Bristol** State **PA** Zip Code **19007-4929**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **650**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 07 / 2014

Transaction ID : A-CF32222

Amount of Each Receipt this Period
40

C. Full Name (Last, First, Middle Initial)
Margaret L. Hanson

Mailing Address **240 Walnut Street**

City **Bristol** State **PA** Zip Code **19007-4929**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **650**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 11 / 2014

Transaction ID : A-CF32785

Amount of Each Receipt this Period
40

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

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

130.00

**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 63 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Marian M. Hardy

Mailing Address 4604 E Belmont Street

City State Zip Code
Sioux Falls SD 57110-4205

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400

Date of Receipt
 M M / D D / Y Y Y Y
07 31 2014

Transaction ID : A-CF32037

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
J. Howard Harrison

Mailing Address PO Box 427

City State Zip Code
Mobridge SD 57601-0427

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
09 29 2014

Transaction ID : A-CF33134

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Melinda L. Harrison

Mailing Address PO Box 9777

City State Zip Code
Rapid City SD 57709-9777

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

Name of Employer Occupation
Self-Employed Mary Kay Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
08 28 2014

Transaction ID : A-CF32391

Amount of Each Receipt this Period
200

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

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

800.00

**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 64 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Melinda L. Harrison

Mailing Address **PO Box 9777**

City **Rapid City** State **SD** Zip Code **57709-9777**

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

Name of Employer **Self-Employed** Occupation **Mary Kay Director**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2014

Transaction ID : A-CF32737

Amount of Each Receipt this Period
200

B. Full Name (Last, First, Middle Initial)
Irene A. Hasz

Mailing Address **1116 W 6th Avenue**

City **Mitchell** State **SD** Zip Code **57301-1722**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **365**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 05 / 2014

Transaction ID : A-CF32579

Amount of Each Receipt this Period
60

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

Mailing Address **101 E 33rd Street**

City **Sioux Falls** State **SD** Zip Code **57105-4905**

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

Name of Employer **Valley Exchange Bank** Occupation **Banker**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : A-CF33095

Amount of Each Receipt this Period
250

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

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

510.00

**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 65 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Jay A Heezen

Mailing Address **PO Box 808**

City **Keystone** State **SD** Zip Code **57751-0808**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 31 / 2014

Transaction ID : A-CF32038

Amount of Each Receipt this Period
150

B. Full Name (Last, First, Middle Initial)
Jeffrey Heinemeyer

Mailing Address **27 Golf Drive**

City **Wentworth** State **SD** Zip Code **57075-7300**

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

Name of Employer **Heartland Consumer Power Dis** Occupation **Board Member**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 28 / 2014

Transaction ID : A-CF32392

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Edgar L. Hemmelman

Mailing Address **2013 Tiree Drive**

City **Fort Pierre** State **SD** Zip Code **57532-2099**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **575**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 05 / 2014

Transaction ID : A-CF32430

Amount of Each Receipt this Period
100

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

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

500.00

**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 66 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Gerald M. Henke

Mailing Address **PO Box 196**

City **Pickstown** State **SD** Zip Code **57367-0196**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **275**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 02 / 2014

Transaction ID : A-CF32649

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Hellene O. Henrikson

Mailing Address **5226 N Via Agrifoglio**

City **Tucson** State **AZ** Zip Code **85750-6039**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 07 / 2014

Transaction ID : A-CF32223

Amount of Each Receipt this Period
75

C. Full Name (Last, First, Middle Initial)
Lawrence D Herges

Mailing Address **5038 Autumn Place**

City **Rapid City** State **SD** Zip Code **57702-9275**

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

Name of Employer **U.S. Air Force** Occupation **Architect**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 08 / 2014

Transaction ID : A-CF31755

Amount of Each Receipt this Period
100

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

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

275.00

**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 67 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Lawrence D Herges

Mailing Address 5038 Autumn Place

City State Zip Code
Rapid City SD 57702-9275

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

Name of Employer Occupation
U.S. Air Force Architect

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300

Date of Receipt
 M M / D D / Y Y Y Y
09 / 08 / 2014

Transaction ID : A-CF32739

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Patrick R. Hermanson

Mailing Address 1809 Grandview Street

City State Zip Code
Pierre SD 57501-5767

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

Name of Employer Occupation
Self-Employed Dentist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
08 / 22 / 2014

Transaction ID : A-CF32359

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Glen W. Herrick

Mailing Address 6308 S Callington Circle

City State Zip Code
Sioux Falls SD 57108-6370

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

Name of Employer Occupation
Meta Financial Group Banker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750

Date of Receipt
 M M / D D / Y Y Y Y
09 / 24 / 2014

Transaction ID : A-CF32965

Amount of Each Receipt this Period
250

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 68 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Steven C. Hey

Mailing Address 5100 W 8th Street

City State Zip Code
Sioux Falls SD 57107-0518

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

Name of Employer Occupation
School Bus Inc Management

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5100

Date of Receipt
 M M / D D / Y Y Y Y
07 / 20 / 2014

Transaction ID : A-CF31882

Amount of Each Receipt this Period
2600

B. Full Name (Last, First, Middle Initial)
Gail Higgins

Mailing Address 2050 Valencia Drive

City State Zip Code
Northbrook IL 60062-7057

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

Name of Employer Occupation
Self-Employed Optician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400

Date of Receipt
 M M / D D / Y Y Y Y
08 / 07 / 2014

Transaction ID : A-CF32175

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
Jennifer N Higgins

Mailing Address 305 S Payne Street
Apt. 306

City State Zip Code
Alexandria VA 22314-5927

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

Name of Employer Occupation
Chamber Hill Strategies Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
07 / 22 / 2014

Transaction ID : A-CF31910

Amount of Each Receipt this Period
250

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

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

2950.00

**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 69 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Arthur R. Hilsinger

Mailing Address 8 Jackson Pond Road

City State Zip Code
Dedham MA 02026-5524

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
08 / 29 / 2014

Transaction ID : A-CF32312

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
William A. Hinks

Mailing Address 2208 W Cherrywood Circle

City State Zip Code
Sioux Falls SD 57108-3152

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

Name of Employer Occupation
Furniture Mart Inc. Sioux Falls Retail Sales Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
09 / 05 / 2014

Transaction ID : A-CF32581

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Earl J. Hinricher

Mailing Address 40473 221st Street

City State Zip Code
Forestburg SD 57314-6802

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

Name of Employer Occupation
Haven Regional Medical Cen Pharmacist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
09 / 08 / 2014

Transaction ID : A-CF32740

Amount of Each Receipt this Period
250

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

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

1000.00

**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 70 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Theodore J Hofer

Mailing Address **PO Box 331**

City **Bridgewater** State **SD** Zip Code **57319-0331**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 08 / 2014

Transaction ID : A-CF31756

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Theodore J Hofer

Mailing Address **PO Box 331**

City **Bridgewater** State **SD** Zip Code **57319-0331**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 28 / 2014

Transaction ID : A-CF32003

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
Theodore J Hofer

Mailing Address **PO Box 331**

City **Bridgewater** State **SD** Zip Code **57319-0331**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 02 / 2014

Transaction ID : A-CF32549

Amount of Each Receipt this Period
100

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

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

300.00

**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 71 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Robert T. Hoffmann

Mailing Address 288 S Lake Drive

City State Zip Code
Watertown SD 57201-5431

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200

Date of Receipt
 M M / D D / Y Y Y Y
08 / 19 / 2014

Transaction ID : A-CF32345

Amount of Each Receipt this Period
2600

B. Full Name (Last, First, Middle Initial)
Philip N. Hogen

Mailing Address 1295 Bandana Boulevard N
Office BLDG

City State Zip Code
Saint Paul MN 55108-5126

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

Name of Employer Occupation
Self-Employed Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
510

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : A-CF33071

Amount of Each Receipt this Period
255

C. Full Name (Last, First, Middle Initial)
Maxine J. Hogstad

Mailing Address 809 N Broadway

City State Zip Code
Watertown SD 57201-1434

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
566

Date of Receipt
 M M / D D / Y Y Y Y
07 / 08 / 2014

Transaction ID : A-CF31774

Amount of Each Receipt this Period
75

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

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

2930.00

**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 72 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Daniel C. Holland

Mailing Address 378 Wildflower Road

City Yankton State SD Zip Code 57078-6770

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **900**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 29 / 2014

Transaction ID : A-CF31951

Amount of Each Receipt this Period
 100

B. Full Name (Last, First, Middle Initial)
Daniel C. Holland

Mailing Address 378 Wildflower Road

City Yankton State SD Zip Code 57078-6770

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **900**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : A-CF32680

Amount of Each Receipt this Period
 100

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

Mailing Address 804 Firesteel Drive

City Mitchell State SD Zip Code 57301-2168

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3100**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 02 / 2014

Transaction ID : A-CF32650

Amount of Each Receipt this Period
 500

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

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

700.00

**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 73 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Ricky A Hoogendoorn

Mailing Address 709 E 61st Street

City State Zip Code
Sioux Falls SD 57108-4621

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

Name of Employer Occupation
YRC Freight Director Customer Service

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400

Date of Receipt
 M M / D D / Y Y Y Y
08 / 15 / 2014

Transaction ID : A-CF32297

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Lindsay D Hooper

Mailing Address 3733 N Tazewell Street

City State Zip Code
Arlington VA 22207-4572

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

Name of Employer Occupation
Capitol Tax Partners Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
09 / 24 / 2014

Transaction ID : A-CF32966

Amount of Each Receipt this Period
500

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

Mailing Address 46092 238th Street

City State Zip Code
Wentworth SD 57075-7307

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

Name of Employer Occupation
Howe Heating & Plumbing President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : A-CF33162

Amount of Each Receipt this Period
500

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

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

1250.00

**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 74 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Jamie Huizenga

Mailing Address 509 N Grand Avenue

City Pierre State SD Zip Code 57501-2014

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

Name of Employer Nagel Agency, Inc. Occupation Insurance Agent

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **525**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 01 / 2014

Transaction ID : A-CF32065

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
Thietje Anderson Hunt

Mailing Address 4916 Springtree Court

City Rapid City State SD Zip Code 57702-9246

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

Name of Employer Self-Employed Occupation Financial Planner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 05 / 2014

Transaction ID : A-CF32584

Amount of Each Receipt this Period
200

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

Mailing Address PO Box 1

City Wall State SD Zip Code 57790-0001

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

Name of Employer Wall Drug Store, Inc. Occupation Chairman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4000**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 29 / 2014

Transaction ID : A-CF33050

Amount of Each Receipt this Period
1000

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

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

1250.00

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

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

FOR LINE NUMBER: PAGE 75 OF 297
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Lori Ibarolle

Mailing Address 2401 Burleigh St

City Yankton State SD Zip Code 57078

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 21 / 2014

Transaction ID : A-CF31948

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Donald O. Jacobs

Mailing Address 26635 466th Avenue

City Sioux Falls State SD Zip Code 57106-6904

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **255**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 29 / 2014

Transaction ID : A-CF31961

Amount of Each Receipt this Period
50

C. Full Name (Last, First, Middle Initial)
Donald O. Jacobs

Mailing Address 26635 466th Avenue

City Sioux Falls State SD Zip Code 57106-6904

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **255**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 02 / 2014

Transaction ID : A-CF32458

Amount of Each Receipt this Period
20

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

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

320.00

**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 76 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Garry W. Jacobson

Mailing Address 1116 W Goldthread Circle

City State Zip Code
Sioux Falls SD 57108-2824

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

Name of Employer Occupation
Malloy Electric & Bearing Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5100

Date of Receipt
 M M / D D / Y Y Y Y
09 / 05 / 2014

Transaction ID : A-CF32570

Amount of Each Receipt this Period
2500

B. Full Name (Last, First, Middle Initial)
David J. Jencks

Mailing Address 6544 Killarney Park Drive

City State Zip Code
Wentworth SD 57075-7314

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

Name of Employer Occupation
Jencks & Jencks DC Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250

Date of Receipt
 M M / D D / Y Y Y Y
08 / 28 / 2014

Transaction ID : A-CF32393

Amount of Each Receipt this Period
500

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

Mailing Address 5204 S Jasmine Circle

City State Zip Code
Sioux Falls SD 57108-2892

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
08 / 28 / 2014

Transaction ID : A-CF32394

Amount of Each Receipt this Period
500

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

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

3500.00

**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 77 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
William M. Jencks

Mailing Address 1055 N 5th Street
Unit 70

City Jacksonville State OR Zip Code 97530-9653

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **375**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 06 / 2014

Transaction ID : A-CF32151

Amount of Each Receipt this Period
25

B. Full Name (Last, First, Middle Initial)
Ronald R. Jenkins

Mailing Address 1517 Ridge Lane

City Mitchell State SD Zip Code 57301-2144

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **800**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 29 / 2014

Transaction ID : A-CF33052

Amount of Each Receipt this Period
200

C. Full Name (Last, First, Middle Initial)
Brad K. Jensen

Mailing Address 1116 9th Avenue W

City Mobridge State SD Zip Code 57601-1521

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

Name of Employer Larry Jensen Motors Inc Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 29 / 2014

Transaction ID : A-CF33135

Amount of Each Receipt this Period
250

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

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

475.00

**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 78 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Eldon S. Jensen

Mailing Address 301 7th Avenue W

City Lemmon State SD Zip Code 57638-1716

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2850**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : A-CF33073

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Mary Jean Jensen

Mailing Address 301 7th Avenue W

City Lemmon State SD Zip Code 57638-1716

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2350**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : A-CF33072

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Paul Eric Johnson

Mailing Address 309 W Pinehurst Trail

City North Sioux City State SD Zip Code 57049-5234

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

Name of Employer Midlands Clinic PC Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 03 / 2014

Transaction ID : A-CF32628

Amount of Each Receipt this Period
500

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

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

1000.00

**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 79 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Peggy J. Johnstone

Mailing Address 3222 Wonderland Drive

City State Zip Code
Rapid City SD 57702-6908

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
550

Date of Receipt
 M M / D D / Y Y Y Y
08 / 25 / 2014

Transaction ID : A-CF32369

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Gene Jones Jr.

Mailing Address 2 S Wedgeon Place

City State Zip Code
Sioux Falls SD 57105-0149

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

Name of Employer Occupation
Maguire Iron Inc Management

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
 M M / D D / Y Y Y Y
09 / 10 / 2014

Transaction ID : A-CF32772

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Ralph D. Jones

Mailing Address PO Box 228

City State Zip Code
Midland SD 57552-0228

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

Name of Employer Occupation
Self-Employed Rancher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1580

Date of Receipt
 M M / D D / Y Y Y Y
09 / 10 / 2014

Transaction ID : A-CF32773

Amount of Each Receipt this Period
500

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

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

1600.00

**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 80 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Warren L. Jones

Mailing Address 3119 Turtle Creek Court

City State Zip Code
Rapid City SD 57703-6439

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
235

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 28 2014

Transaction ID : A-CF32005

Amount of Each Receipt this Period
40

B. Full Name (Last, First, Middle Initial)
Mary I. Jorgensen

Mailing Address 31248 265th Street

City State Zip Code
Ideal SD 57541-6715

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

Name of Employer Occupation
Jorgensen Land& Cattle Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 23 2014

Transaction ID : A-CF32946

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Verle W. Jucht

Mailing Address 25875 475th Avenue

City State Zip Code
Renner SD 57055-6505

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
541

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 10 2014

Transaction ID : A-CF32681

Amount of Each Receipt this Period
100

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

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

640.00

**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 81 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Ronald Juhnke

Mailing Address 615 S Jefferson Avenue

City Pierre State SD Zip Code 57501-4118

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 25 / 2014

Transaction ID : A-CF32370

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Clyde H Jundt

Mailing Address 618 N Oneida Avenue

City Pierre State SD Zip Code 57501-1640

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 28 / 2014

Transaction ID : A-CF31979

Amount of Each Receipt this Period
25

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

Mailing Address 1312 Mitchell Boulevard

City Mitchell State SD Zip Code 57301-4239

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

Name of Employer State of SD Dept of Correc. Occupation Cabinet Secretary

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 18 / 2014

Transaction ID : A-CF32335

Amount of Each Receipt this Period
200

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

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

475.00

**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 82 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Steven R. Kalkman

Mailing Address 2926 Stockade Drive

City State Zip Code
Rapid City SD 57702-5249

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

Name of Employer Occupation
Ford Lincoln Mercury Finance Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
09 / 05 / 2014

Transaction ID : A-CF32586

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Tom J. Kauer

Mailing Address 27143 316th Ave

City State Zip Code
Winner SD 57580

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

Name of Employer Occupation
Statewide Ag Insurance Insurance Agent

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1360

Date of Receipt
 M M / D D / Y Y Y Y
09 / 22 / 2014

Transaction ID : A-IF33153

Amount of Each Receipt this Period
360

Inkind: Catering

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

Mailing Address 3408 W Ralph Rgrs Road
Apt. B104

City State Zip Code
Sioux Falls SD 57108-2658

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300

Date of Receipt
 M M / D D / Y Y Y Y
09 / 26 / 2014

Transaction ID : A-CF33006

Amount of Each Receipt this Period
100

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

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

1460.00

**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 83 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Milton L Keim

Mailing Address 2505 Chokecherry Circle

City Spearfish State SD Zip Code 57783-3800

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 21 / 2014

Transaction ID : A-CF31902

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
Milton L Keim

Mailing Address 2505 Chokecherry Circle

City Spearfish State SD Zip Code 57783-3800

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 05 / 2014

Transaction ID : A-CF32587

Amount of Each Receipt this Period
100

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

Mailing Address 221 Platt Street

City Rapid City State SD Zip Code 57702-2158

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **205**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 24 / 2014

Transaction ID : A-CF31936

Amount of Each Receipt this Period
25

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

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

175.00

**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 84 OF 297
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) Clare Kerr		Date of Receipt M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address PO Box 42		Transaction ID : A-CF31800
City Estelline	State SD	Zip Code 57234-0042
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100
Name of Employer Self-Employed	Occupation Farmer	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400	

Full Name (Last, First, Middle Initial) Clare Kerr		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address PO Box 42		Transaction ID : A-CF32931
City Estelline	State SD	Zip Code 57234-0042
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100
Name of Employer Self-Employed	Occupation Farmer	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400	

Full Name (Last, First, Middle Initial) Brenda Kettering		Date of Receipt M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address PO Box 113		Transaction ID : A-CF33136
City Mobridge	State SD	Zip Code 57601-0113
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Mobridge School District	Occupation Teacher	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL 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 85 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Troy Keys

Mailing Address 1105 Twin Oaks Drive

City Madison	State SD	Zip Code 57042-3713
-----------------	-------------	------------------------

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

Name of Employer Madison Family Dental	Occupation Dentist
---	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 29 / 2014

Transaction ID : A-CF32315

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Timothy E. King Jr.

Mailing Address 5788 Clarkson Drive

City East Petersburg	State PA	Zip Code 17520-1542
-------------------------	-------------	------------------------

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

Name of Employer King Assoc. Ltd	Occupation Shipping Manager
-------------------------------------	--------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 05 / 2014

Transaction ID : A-CF32131

Amount of Each Receipt this Period
100

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

Mailing Address 2 S Riverview Heights

City Sioux Falls	State SD	Zip Code 57105-0254
---------------------	-------------	------------------------

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

Name of Employer Kirby Financial	Occupation Investor
-------------------------------------	------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4200

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 20 / 2014

Transaction ID : A-CF31884

Amount of Each Receipt this Period
1000

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

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

1600.00

**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 86 OF 297
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) Delores Kirby		Date of Receipt MM / DD / YYYY 08 / 11 / 2014
Mailing Address 18329 447th Avenue		Transaction ID : A-CF32257
City Hayti	State SD	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25
Name of Employer Retired	Occupation Retired	Amount of Each Receipt this Period 275
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) Delores Kirby		Date of Receipt MM / DD / YYYY 09 / 29 / 2014
Mailing Address 18329 447th Avenue		Transaction ID : A-CF33053
City Hayti	State SD	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50
Name of Employer Retired	Occupation Retired	Amount of Each Receipt this Period 275
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) Maynard A. Klingbeil		Date of Receipt MM / DD / YYYY 09 / 02 / 2014
Mailing Address 31038 185th Street		Transaction ID : A-CF32651
City Onida	State SD	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200
Name of Employer Self-Employed	Occupation Farmer	Amount of Each Receipt this Period 700
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

SUBTOTAL of Receipts This Page (optional).....	275.00
TOTAL 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 87 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Karen J. Klingberg

Mailing Address 23901 Sun Country Lane

City State Zip Code
Rapid City SD 57702-7427

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2014

Transaction ID : A-CF32041

Amount of Each Receipt this Period
25

B. Full Name (Last, First, Middle Initial)
Karen J. Klingberg

Mailing Address 23901 Sun Country Lane

City State Zip Code
Rapid City SD 57702-7427

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		08		2014

Transaction ID : A-CF32843

Amount of Each Receipt this Period
25

C. Full Name (Last, First, Middle Initial)
Lester A. Klinkel

Mailing Address 1531 Iowa Avenue SE

City State Zip Code
Huron SD 57350-4052

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		29		2014

Transaction ID : A-CF32313

Amount of Each Receipt this Period
100

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

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

150.00

**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 88 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Elaine H. Kohl

Mailing Address 21776 472nd Avenue

City State Zip Code
Brookings SD 57006-7095

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
07 / 22 / 2014

Transaction ID : A-CF31912

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Dave F Konechne

Mailing Address 104 Capitol Hill Drive

City State Zip Code
Pierre SD 57501-2304

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

Name of Employer Occupation
Konechne Engineering Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400

Date of Receipt
 M M / D D / Y Y Y Y
07 / 28 / 2014

Transaction ID : A-CF32007

Amount of Each Receipt this Period
100

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

Mailing Address 1161 Sanctuary Drive

City State Zip Code
Fairborn OH 45324-4387

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

Name of Employer Occupation
Sinclair Community College Mathematics Professor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300

Date of Receipt
 M M / D D / Y Y Y Y
08 / 07 / 2014

Transaction ID : A-CF32225

Amount of Each Receipt this Period
25

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

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

225.00

**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 89 OF 297
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) John A Lake		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 29 / 2014
Mailing Address 1105 E Garfield Avenue		Transaction ID : A-CF33137
City Gettysburg	State SD	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer Self-Employed	Occupation Farmer/Rancher	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000	

Full Name (Last, First, Middle Initial) Edward J. Lammers		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 02 / 2014
Mailing Address 2505 Capitol Street Apt. 303		Transaction ID : A-CF32652
City Yankton	State SD	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150
Name of Employer Self-Employed	Occupation Farmer	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600	

Full Name (Last, First, Middle Initial) Cammy S Lantis		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 06 / 2014
Mailing Address PO Box 699		Transaction ID : A-CF32199
City Spearfish	State SD	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Lantis Enterprises Inc.	Occupation VP Risk Management	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

SUBTOTAL of Receipts This Page (optional).....	1650.00
TOTAL 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 90 OF 297
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) Richard D Larsen		Date of Receipt M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 5588 Barberry Circle		Transaction ID : A-CF32653
City Rapid City	State SD	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300	

Full Name (Last, First, Middle Initial) Wallace L Larsen		Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 2328 Callaway Court		Transaction ID : A-CF32042
City Pierre	State SD	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300	

Full Name (Last, First, Middle Initial) Wallace L Larsen		Date of Receipt M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 2328 Callaway Court		Transaction ID : A-CF32654
City Pierre	State SD	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300	

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL 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 91 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Eleanora H Larson

Mailing Address 3969 Ridgewood Way

City West Linn State OR Zip Code 97068-1653

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **215**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 14 / 2014

Transaction ID : A-CF32287

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
Ronald L. Larson

Mailing Address 10536 Hlousek Lane

City Belle Fourche State SD Zip Code 57717-8700

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **435**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 11 / 2014

Transaction ID : A-CF32239

Amount of Each Receipt this Period
25

C. Full Name (Last, First, Middle Initial)
Ronald L. Larson

Mailing Address 10536 Hlousek Lane

City Belle Fourche State SD Zip Code 57717-8700

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **435**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 08 / 2014

Transaction ID : A-CF32844

Amount of Each Receipt this Period
25

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 92 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Scott R Lawrence

Mailing Address 204 E 29th Street

City State Zip Code
Sioux Falls SD 57105-3919

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

Name of Employer Occupation
Lawrence And Schiller President And CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
 M M / D D / Y Y Y Y
08 / 28 / 2014

Transaction ID : A-CF32396

Amount of Each Receipt this Period
1500

B. Full Name (Last, First, Middle Initial)
Mark G Leddy

Mailing Address 14346 Sd Highway 15

City State Zip Code
Milbank SD 57252-5415

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

Name of Employer Occupation
Valley Queen Cheese Factory, Inc. Cheese Manufacturing

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200

Date of Receipt
 M M / D D / Y Y Y Y
07 / 24 / 2014

Transaction ID : A-CF31943

Amount of Each Receipt this Period
2600

C. Full Name (Last, First, Middle Initial)
Max L. Leget

Mailing Address 435 Prentis Avenue

City State Zip Code
Vermillion SD 57069-2515

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1450

Date of Receipt
 M M / D D / Y Y Y Y
07 / 28 / 2014

Transaction ID : A-CF32010

Amount of Each Receipt this Period
300

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

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

4400.00

**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 93 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Max L. Leget

Mailing Address 435 Prentis Avenue

City State Zip Code
Vermillion SD 57069-2515

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1450

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 05 / 2014

Transaction ID : A-CF32588

Amount of Each Receipt this Period
150

B. Full Name (Last, First, Middle Initial)
Carolyn J. Leman

Mailing Address 955 Quail Hollow Circle

City State Zip Code
Dakota Dunes SD 57049-5138

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 05 / 2014

Transaction ID : A-CF32436

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Herbert Alan Levin

Mailing Address 724 E Grinnell Drive

City State Zip Code
Burbank CA 91501-1720

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

Name of Employer Occupation
California DOJ Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1175

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 07 / 2014

Transaction ID : A-CF32176

Amount of Each Receipt this Period
100

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

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

1250.00

**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 94 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Herbert Alan Levin

Mailing Address 724 E Grinnell Drive

City Burbank State CA Zip Code 91501-1720

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

Name of Employer California DOJ Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1175**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : A-CF32677

Amount of Each Receipt this Period
 _____ 75

B. Full Name (Last, First, Middle Initial)
Les Lindskov

Mailing Address PO Box 17

City Isabel State SD Zip Code 57633-0017

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

Name of Employer Firesteel Creek Lodge Occupation Rancher/Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : A-CF33139

Amount of Each Receipt this Period
 _____ 1000

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

Mailing Address PO Box 326

City Martin State SD Zip Code 57551-0326

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 02 / 2014

Transaction ID : A-CF32552

Amount of Each Receipt this Period
 _____ 50

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

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

_____ 1125.00

**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 95 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Ella M. Loon

Mailing Address 1204 N Foster Street

City Mitchell State SD Zip Code 57301-2113

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 18 / 2014

Transaction ID : A-CF32337

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Jack H. Lovett

Mailing Address 5109 S Swift Park Drive

City Sioux Falls State SD Zip Code 57108-2655

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 08 / 2014

Transaction ID : A-CF32744

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
Leon W. Lowe

Mailing Address 540 Falcon Crest Drive Apt. 160

City Spearfish State SD Zip Code 57783-3254

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 18 / 2014

Transaction ID : A-CF32338

Amount of Each Receipt this Period
50

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 96 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Robert D Lowrey

Mailing Address 1108 W Goldthread Circle

City State Zip Code
Sioux Falls SD 57108-2824

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

Name of Employer Occupation
Northwestern Mutual Managing Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : A-CF33079

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Carol A Luebke

Mailing Address 28828 481st Avenue

City State Zip Code
Canton SD 57013-6147

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
800

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 02 / 2014

Transaction ID : A-CF32655

Amount of Each Receipt this Period
200

C. Full Name (Last, First, Middle Initial)
Jeffrey M. Mackinnon

Mailing Address 3753 Oliver Street NW

City State Zip Code
Washington DC 20015-2531

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

Name of Employer Occupation
Ryan McKinnon Vasapoli Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 24 / 2014

Transaction ID : A-CF32969

Amount of Each Receipt this Period
500

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

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

950.00

**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 97 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Leonard W Makens

Mailing Address 42563 168th Street

City State Zip Code
Clark SD 57225-5814

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
550

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 30 2014

Transaction ID : A-CF33080

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Jeffrey W Malone

Mailing Address 6305 S Callington Circle

City State Zip Code
Sioux Falls SD 57108-6370

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

Name of Employer Occupation
Malone Capital Management Portfolio Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 22 2014

Transaction ID : A-CF32933

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Evelyn M. Marciano

Mailing Address 12369 Sd Highway 1804

City State Zip Code
Mobridge SD 57601-5014

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 29 2014

Transaction ID : A-CF33140

Amount of Each Receipt this Period
500

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

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

1000.00

**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 98 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
J. J. Matthews

Mailing Address **PO Box 176**

City **Abilene** State **TX** Zip Code **79604-0176**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 10 / 2014

Transaction ID : A-CF31802

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Patrick J McCarthy

Mailing Address **47802 270th Street**

City **Sioux Falls** State **SD** Zip Code **57108-8223**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 28 / 2014

Transaction ID : A-CF32011

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
Donald K. McColley

Mailing Address **255 Texas Street
Apt. C448**

City **Rapid City** State **SD** Zip Code **57701-7325**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **375**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 05 / 2014

Transaction ID : A-CF32573

Amount of Each Receipt this Period
100

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

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

1200.00

**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 99 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Melbourne K. McCrea

Mailing Address 47148 145th Street

City State Zip Code
Twin Brooks SD 57269-5325

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

Name of Employer Occupation
Administrative Support Services Management

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250

Date of Receipt
 M M / D D / Y Y Y Y
07 / 10 / 2014

Transaction ID : A-CF31803

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Melbourne K. McCrea

Mailing Address 47148 145th Street

City State Zip Code
Twin Brooks SD 57269-5325

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

Name of Employer Occupation
Administrative Support Services Management

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250

Date of Receipt
 M M / D D / Y Y Y Y
08 / 06 / 2014

Transaction ID : A-CF32200

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
Melbourne K. McCrea

Mailing Address 47148 145th Street

City State Zip Code
Twin Brooks SD 57269-5325

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

Name of Employer Occupation
Administrative Support Services Management

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250

Date of Receipt
 M M / D D / Y Y Y Y
09 / 19 / 2014

Transaction ID : A-CF32903

Amount of Each Receipt this Period
100

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

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

300.00

**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 100 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Gary McFarlane

Mailing Address **PO Box 123**

City **Miller** State **SD** Zip Code **57362-0123**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **205**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 08 / 2014

Transaction ID : A-CF32745

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Jim Merges

Mailing Address **PO Box 153**

City **Colman** State **SD** Zip Code **57017-0153**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **625**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 03 / 2014

Transaction ID : A-CF32631

Amount of Each Receipt this Period
75

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

Mailing Address **933 Spyglass Circle**

City **Dakota Dunes** State **SD** Zip Code **57049-5101**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3600**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 10 / 2014

Transaction ID : A-CF31804

Amount of Each Receipt this Period
1000

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

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

1175.00

**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 101 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Bill Mitchell

Mailing Address 40009 101st Street

City Hecla	State SD	Zip Code 57446-5402
---------------	-------------	------------------------

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

Name of Employer Dakota Hunting Farms	Occupation Owner
--	---------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 08 / 2014

Transaction ID : A-CF32746

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Wayne A. Mitchell

Mailing Address 102 E 7th Street

City Dell Rapids	State SD	Zip Code 57022-1640
---------------------	-------------	------------------------

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 11 / 2014

Transaction ID : A-CF32262

Amount of Each Receipt this Period
50

C. Full Name (Last, First, Middle Initial)
Anthony S Moody

Mailing Address 7520 S Denton Ave

City Sioux Falls	State SD	Zip Code 57108
---------------------	-------------	-------------------

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

Name of Employer Department of Veterans Affairs	Occupation Rating Specialist
--	---------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 04 / 2014

Transaction ID : A-CF32449

Amount of Each Receipt this Period
250

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

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

800.00

**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 102 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Dwight F. Moose

Mailing Address 3426 Kyle Street

City State Zip Code
Rapid City SD 57701-7093

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
09 / 26 / 2014

Transaction ID : A-CF33007

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
Ronald Moquist

Mailing Address 1201 E Tomar Road

City State Zip Code
Sioux Falls SD 57105-7013

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

Name of Employer Occupation
Raven Industries President/CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3600

Date of Receipt
 M M / D D / Y Y Y Y
09 / 22 / 2014

Transaction ID : A-CF32934

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Maynard B. Morud

Mailing Address PO Box 491

City State Zip Code
Toronto SD 57268-0491

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
221

Date of Receipt
 M M / D D / Y Y Y Y
09 / 02 / 2014

Transaction ID : A-CF32554

Amount of Each Receipt this Period
60

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

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

1110.00

**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 103 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Linda J. Moses

Mailing Address 6630 Dark Canyon Road

City State Zip Code
Rapid City SD 57702-4777

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
09 / 29 / 2014

Transaction ID : A-CF33056

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Joseph Munro

Mailing Address 4816 Summerset Drive

City State Zip Code
Rapid City SD 57702-9243

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
325

Date of Receipt
 M M / D D / Y Y Y Y
07 / 28 / 2014

Transaction ID : A-CF32012

Amount of Each Receipt this Period
200

C. Full Name (Last, First, Middle Initial)
Michael L. Murphy

Mailing Address 4010 Lochwood Bend Court

City State Zip Code
Bee Cave TX 78738-5015

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : A-CF33084

Amount of Each Receipt this Period
100

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

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

800.00

**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 104 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Karen Muth

Mailing Address 1914 S Center Avenue

City State Zip Code
Sioux Falls SD 57105-2911

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : A-CF32747

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Anthony M Myers

Mailing Address 19 Vanad Drive

City State Zip Code
East Hills NY 11526

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

Name of Employer Occupation
Blackstone Investor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : A-CF32471

Amount of Each Receipt this Period
2600

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

Mailing Address 1104 College Street

City State Zip Code
Springfield SD 57062-2192

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

Name of Employer Occupation
Self-Employed Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1900

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 02 / 2014

Transaction ID : A-CF32657

Amount of Each Receipt this Period
300

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

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

3000.00

**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 105 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Darin Lee Namken

Mailing Address 1016 Heatherwood Avenue

City Madison State SD Zip Code 57042-0905

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

Name of Employer Bulldog Media Group Inc. Occupation Founder/President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 28 / 2014

Transaction ID : A-CF32397

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Maxine Namminga

Mailing Address 40632 315th Street

City Springfield State SD Zip Code 57062-6203

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

Name of Employer Self-Employed Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **210**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 03 / 2014

Transaction ID : A-CF32632

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
Jim D. Neiman

Mailing Address PO Box 102

City Hulett State WY Zip Code 82720-0102

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

Name of Employer Neiman Enterprises Occupation Self-Employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 24 / 2014

Transaction ID : A-CF32328

Amount of Each Receipt this Period
1000

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

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

1600.00

**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 106 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Allen G. Nelson

Mailing Address 333 West Boulevard
Lobby 4

City State Zip Code
Rapid City SD 57701-4124

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

Name of Employer Occupation
Bangs McCullen Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1600

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : A-CF32748

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Cheryl E. Nelson

Mailing Address PO Box 183

City State Zip Code
Gettysburg SD 57442-0183

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

Name of Employer Occupation
Self-Employed Farming

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : A-CF33141

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Robert R Nelson

Mailing Address 5132 S Cliff Avenue
101

City State Zip Code
Sioux Falls SD 57108-5437

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

Name of Employer Occupation
Avera Health Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : A-CF33076

Amount of Each Receipt this Period
100

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

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

700.00

**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 107 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Tami Nelson

Mailing Address 16470 310th Avenue

City State Zip Code
Gettysburg SD 57442-8735

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

Name of Employer Occupation
Self-Employed Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
09 / 29 / 2014

Transaction ID : A-CF33142

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Wendell Nelson

Mailing Address 602 4th Street SE

City State Zip Code
Lake Preston SD 57249-2113

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300

Date of Receipt
 M M / D D / Y Y Y Y
08 / 01 / 2014

Transaction ID : A-CF32068

Amount of Each Receipt this Period
100

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

Mailing Address 700 13th Street NW

City State Zip Code
Washington DC 20005

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

Name of Employer Occupation
Capitol Counsel LLC Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
09 / 08 / 2014

Transaction ID : A-CF32805

Amount of Each Receipt this Period
1000

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

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

1600.00

**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 108 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Reuben H. Nicolai

Mailing Address 4800 33rd Street S

City La Crosse State WI Zip Code 54601-2311

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

Name of Employer Self-Employed Occupation Farming

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1250**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 04 / 2014

Transaction ID : A-CF32116

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Phillip G. Noble

Mailing Address 1681 N Neel Street

City Rapid City State SD Zip Code 57703-6264

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **330**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 07 / 2014

Transaction ID : A-CF31749

Amount of Each Receipt this Period
50

C. Full Name (Last, First, Middle Initial)
Phillip G. Noble

Mailing Address 1681 N Neel Street

City Rapid City State SD Zip Code 57703-6264

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **330**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 11 / 2014

Transaction ID : A-CF32263

Amount of Each Receipt this Period
50

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

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

200.00

**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 109 OF 297
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) Phillip G. Noble		Date of Receipt M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 1681 N Neel Street		Transaction ID : A-CF32556
City Rapid City	State SD	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 330	

Full Name (Last, First, Middle Initial) Larry D. Nupen		Date of Receipt M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 613 N 2nd Street		Transaction ID : A-CF32013
City Aberdeen	State SD	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 690	

Full Name (Last, First, Middle Initial) Larry D. Nupen		Date of Receipt M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 613 N 2nd Street		Transaction ID : A-CF32521
City Aberdeen	State SD	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 690	

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL 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 110 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Richard L. Nutt

Mailing Address 31796 476th Avenue

City Elk Point State SD Zip Code 57025-6645

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 10 / 2014

Transaction ID : A-CF31805

Amount of Each Receipt this Period
1600

B. Full Name (Last, First, Middle Initial)
Lloyd B. O'Donnell

Mailing Address PO Box 22

City Morristown State SD Zip Code 57645-0022

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 08 / 2014

Transaction ID : A-CF32722

Amount of Each Receipt this Period
50

C. Full Name (Last, First, Middle Initial)
Thomas J. O'Meara

Mailing Address 4100 Tower Road

City Rapid City State SD Zip Code 57701-8905

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 28 / 2014

Transaction ID : A-CF31957

Amount of Each Receipt this Period
500

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

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

2150.00

**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 111 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Gordon Ode

Mailing Address 2600 N Powder House Road

City State Zip Code
Sioux Falls SD 57110-7309

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

Name of Employer Occupation
Self-Employed Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400

Date of Receipt
 M M / D D / Y Y Y Y
09 / 05 / 2014

Transaction ID : A-CF32434

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Richard R. Olander

Mailing Address 1742 N Fitzgerald Lane

City State Zip Code
Hanford CA 93230-7901

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2115

Date of Receipt
 M M / D D / Y Y Y Y
08 / 07 / 2014

Transaction ID : A-CF32228

Amount of Each Receipt this Period
200

C. Full Name (Last, First, Middle Initial)
Richard R. Olander

Mailing Address 1742 N Fitzgerald Lane

City State Zip Code
Hanford CA 93230-7901

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2115

Date of Receipt
 M M / D D / Y Y Y Y
09 / 08 / 2014

Transaction ID : A-CF32749

Amount of Each Receipt this Period
300

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 112 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Calvin M. Oliver

Mailing Address 1722 Tanner Bridge Road

City Jefferson City State MO Zip Code 65101-2846

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3460**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 08 / 2014

Transaction ID : A-CF31760

Amount of Each Receipt this Period
 350

B. Full Name (Last, First, Middle Initial)
Calvin M. Oliver

Mailing Address 1722 Tanner Bridge Road

City Jefferson City State MO Zip Code 65101-2846

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3460**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 11 / 2014

Transaction ID : A-CF32264

Amount of Each Receipt this Period
 350

C. Full Name (Last, First, Middle Initial)
Calvin M. Oliver

Mailing Address 1722 Tanner Bridge Road

City Jefferson City State MO Zip Code 65101-2846

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3460**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 14 / 2014

Transaction ID : A-CF32289

Amount of Each Receipt this Period
 175

SUBTOTAL of Receipts This Page (optional).....	875.00
TOTAL 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 113 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Calvin M. Oliver

Mailing Address 1722 Tanner Bridge Road

City Jefferson City State MO Zip Code 65101-2846

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3460**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 19 / 2014

Transaction ID : A-CF32904

Amount of Each Receipt this Period
 250

B. Full Name (Last, First, Middle Initial)
Gary G. Olson

Mailing Address PO Box 89125

City Sioux Falls State SD Zip Code 57109-9125

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 24 / 2014

Transaction ID : A-CF32971

Amount of Each Receipt this Period
 500

C. Full Name (Last, First, Middle Initial)
Kenneth W. Olson

Mailing Address 1425 18th Avenue NE

City Aberdeen State SD Zip Code 57401-1500

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

Name of Employer K. Olson, Inc. Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1200**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 07 / 2014

Transaction ID : A-CF32177

Amount of Each Receipt this Period
 150

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

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

900.00

**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 114 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Kenneth W. Olson

Mailing Address 1425 18th Avenue NE

City Aberdeen State SD Zip Code 57401-1500

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

Name of Employer K. Olson, Inc. Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1200**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 07 / 2014

Transaction ID : A-CF32469

Amount of Each Receipt this Period
150

B. Full Name (Last, First, Middle Initial)
Paul M. Olson

Mailing Address PO Box 183

City Presho State SD Zip Code 57568-0183

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 10 / 2014

Transaction ID : A-CF31806

Amount of Each Receipt this Period
50

C. Full Name (Last, First, Middle Initial)
Paul M. Olson

Mailing Address PO Box 183

City Presho State SD Zip Code 57568-0183

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 15 / 2014

Transaction ID : A-CF32872

Amount of Each Receipt this Period
50

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 115 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Robert L. Olson

Mailing Address 63150 Opossum Lane

City Montrose State CO Zip Code 81403-9603

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 04 / 2014

Transaction ID : A-CF32117

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
Robert L. Olson

Mailing Address 63150 Opossum Lane

City Montrose State CO Zip Code 81403-9603

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 08 / 2014

Transaction ID : A-CF32723

Amount of Each Receipt this Period
50

C. Full Name (Last, First, Middle Initial)
Vernon I Olson

Mailing Address 44505 221st Street

City Ramona State SD Zip Code 57054-6042

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **260**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 03 / 2014

Transaction ID : A-CF32633

Amount of Each Receipt this Period
25

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

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

125.00

**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 116 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Joyce Ondris

Mailing Address 503 Main Avenue

City Bancroft State SD Zip Code 57353-5044

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **239**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 08 / 2014

Transaction ID : A-CF31761

Amount of Each Receipt this Period
10

B. Full Name (Last, First, Middle Initial)
Joyce Ondris

Mailing Address 503 Main Avenue

City Bancroft State SD Zip Code 57353-5044

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **239**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 06 / 2014

Transaction ID : A-CF32156

Amount of Each Receipt this Period
15

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

Mailing Address 503 Main Avenue

City Bancroft State SD Zip Code 57353-5044

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **239**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 05 / 2014

Transaction ID : A-CF32612

Amount of Each Receipt this Period
10

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

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

35.00

**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 117 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Arleen B. Ortman

Mailing Address 1409 W Dow Rummel Street
Apt. 216

City State Zip Code
Sioux Falls SD 57104-7820

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400

Date of Receipt
 M M / D D / Y Y Y Y
08 / 26 / 2014

Transaction ID : A-CF32379

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
Dennis G. Otten

Mailing Address 2609 S Elmwood Avenue

City State Zip Code
Sioux Falls SD 57105-4343

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225

Date of Receipt
 M M / D D / Y Y Y Y
09 / 05 / 2014

Transaction ID : A-CF32435

Amount of Each Receipt this Period
50

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

Mailing Address 4808 S Arden Avenue

City State Zip Code
Sioux Falls SD 57103-5246

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
360

Date of Receipt
 M M / D D / Y Y Y Y
09 / 22 / 2014

Transaction ID : A-CF32935

Amount of Each Receipt this Period
50

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

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

150.00

**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 118 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Ronald Arthur Parsons Jr.

Mailing Address 101 S Main Avenue
Apt. 703

City State Zip Code
Sioux Falls SD 57104-6453

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

Name of Employer Occupation
Johnson Heidepriem & Abdallah LLP Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1600

Date of Receipt
 M M / D D / Y Y Y Y
09 / 26 / 2014

Transaction ID : A-CF33009

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Evelyn J. Pederson

Mailing Address 47468 280th Street

City State Zip Code
Worthing SD 57077-5738

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
900

Date of Receipt
 M M / D D / Y Y Y Y
07 / 31 / 2014

Transaction ID : A-CF32047

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
K. G. Perley

Mailing Address 524 Pelletier Drive

City State Zip Code
Sioux City IA 51104-1310

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

Name of Employer Occupation
Tec Corp Contractor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
08 / 14 / 2014

Transaction ID : A-CF32290

Amount of Each Receipt this Period
250

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 119 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Lyle V. Perman

Mailing Address 30872 143rd Street

City State Zip Code
Lowry SD 57472-6804

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

Name of Employer Occupation
Self-Employed Rancher/Insurance

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
09 / 29 / 2014

Transaction ID : A-CF33143

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Dean B. Peterson

Mailing Address 245 Fairway Drive

City State Zip Code
Spearfish SD 57783-3111

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400

Date of Receipt
 M M / D D / Y Y Y Y
09 / 05 / 2014

Transaction ID : A-CF32470

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
Dean B. Peterson

Mailing Address 245 Fairway Drive

City State Zip Code
Spearfish SD 57783-3111

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400

Date of Receipt
 M M / D D / Y Y Y Y
09 / 25 / 2014

Transaction ID : A-CF33015

Amount of Each Receipt this Period
100

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

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

450.00

**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 120 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Mark R. Peterson

Mailing Address 928 Spyglass Circle

City State Zip Code
Dakota Dunes SD 57049-5101

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

Name of Employer Occupation
Peterson Management Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200

Date of Receipt
 M M / D D / Y Y Y Y
07 / 16 / 2014

Transaction ID : A-CF31867

Amount of Each Receipt this Period
1000

Refund issued 8/19/2014

B. Full Name (Last, First, Middle Initial)
Leroy Pietz

Mailing Address 41115 284th Street

City State Zip Code
Tripp SD 57376-6303

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

Name of Employer Occupation
Self-Employed Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1051

Date of Receipt
 M M / D D / Y Y Y Y
09 / 02 / 2014

Transaction ID : A-CF32658

Amount of Each Receipt this Period
140

C. Full Name (Last, First, Middle Initial)
Joe Plihal Jr.

Mailing Address 30174 416th Avenue

City State Zip Code
Tyndall SD 57066-5521

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

Name of Employer Occupation
Country Ford Garage Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
886

Date of Receipt
 M M / D D / Y Y Y Y
07 / 28 / 2014

Transaction ID : A-CF32089

Amount of Each Receipt this Period
25

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

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

1165.00

**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 121 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Joe Plihal Jr.

Mailing Address 30174 416th Avenue

City Tyndall State SD Zip Code 57066-5521

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

Name of Employer Country Ford Occupation Garage Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **886**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : A-CF32048

Amount of Each Receipt this Period
 50

B. Full Name (Last, First, Middle Initial)
Joe Plihal Jr.

Mailing Address 30174 416th Avenue

City Tyndall State SD Zip Code 57066-5521

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

Name of Employer Country Ford Occupation Garage Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **886**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 05 / 2014

Transaction ID : A-CF32440

Amount of Each Receipt this Period
 25

C. Full Name (Last, First, Middle Initial)
Joe Plihal Jr.

Mailing Address 30174 416th Avenue

City Tyndall State SD Zip Code 57066-5521

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

Name of Employer Country Ford Occupation Garage Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **886**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 08 / 2014

Transaction ID : A-CF32702

Amount of Each Receipt this Period
 25

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 122 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Joe Plihal Jr.

Mailing Address 30174 416th Avenue

City Tyndall	State SD	Zip Code 57066-5521
-----------------	-------------	------------------------

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

Name of Employer Country Ford	Occupation Garage Owner
----------------------------------	----------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **886**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 16 / 2014

Transaction ID : A-CF32915

Amount of Each Receipt this Period
 25

B. Full Name (Last, First, Middle Initial)
William A. Poppen

Mailing Address 20535 434th Avenue

City De Smet	State SD	Zip Code 57231-5817
-----------------	-------------	------------------------

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

Name of Employer DeSmet Farm Mutual Ins Co	Occupation CEO
---	-------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 24 / 2014

Transaction ID : A-CF32976

Amount of Each Receipt this Period
 1000

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

Mailing Address 4101 S Carnegie Place

City Sioux Falls	State SD	Zip Code 57106-2360
---------------------	-------------	------------------------

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

Name of Employer Self-Employed	Occupation Restaurant Owner
-----------------------------------	--------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 29 / 2014

Transaction ID : A-CF32416

Amount of Each Receipt this Period
 2600

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

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

3625.00

**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 123 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Pat L Prostrollo

Mailing Address **PO Box 288**

City **Madison** State **SD** Zip Code **57042-0288**

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

Name of Employer **Prostrollo Motor Co.** Occupation **Auto Dealer**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2750**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 29 / 2014

Transaction ID : A-CF32414

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Rita Rambharose

Mailing Address **25781 Amapolas Street**

City **Loma Linda** State **CA** Zip Code **92354-2501**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **320**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 08 / 2014

Transaction ID : A-CF32703

Amount of Each Receipt this Period
25

C. Full Name (Last, First, Middle Initial)
Elling L. Ramsey

Mailing Address **410 S Pawnee Street**

City **Pierre** State **SD** Zip Code **57501-3230**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **430**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 02 / 2014

Transaction ID : A-CF32523

Amount of Each Receipt this Period
50

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

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

575.00

**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 124 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Arlene M. Randall

Mailing Address 2220 Crystal Ave SE

City Aberdeen State SD Zip Code 57401

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

Name of Employer Randall Law Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 22 / 2014

Transaction ID : A-CF31916

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
Edward Michael Randazzo

Mailing Address 516 E Tallent Street

City Rapid City State SD Zip Code 57701-5733

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1225**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : A-CF33068

Amount of Each Receipt this Period
50

C. Full Name (Last, First, Middle Initial)
Grove A. Rathbun

Mailing Address 255 Texas Street Apt. H347

City Rapid City State SD Zip Code 57701-7387

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 08 / 2014

Transaction ID : A-CF32751

Amount of Each Receipt this Period
200

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

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

300.00

**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 125 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Irene Marie Rawlings

Mailing Address 1524 5th Street S
Apt. 1

City State Zip Code
Brookings SD 57006-3418

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
220

Date of Receipt
M M / D D / Y Y Y Y
09 / 08 / 2014

Transaction ID : A-CF32704

Amount of Each Receipt this Period
15

B. Full Name (Last, First, Middle Initial)
Gary J Ray

Mailing Address 2001 4th Drive SW

City State Zip Code
Austin MN 55912-2860

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
M M / D D / Y Y Y Y
08 / 05 / 2014

Transaction ID : A-CF32135

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Timothy D. Reich

Mailing Address 1007 Kingsbury Street

City State Zip Code
Belle Fourche SD 57717-1920

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

Name of Employer Occupation
Belle Fourche River Watershed President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600

Date of Receipt
M M / D D / Y Y Y Y
07 / 28 / 2014

Transaction ID : A-CF31988

Amount of Each Receipt this Period
100

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

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

615.00

**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 126 OF 297
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) Timothy D. Reich		Date of Receipt M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address 1007 Kingsbury Street		Transaction ID : A-CF32593
City Belle Fourche	State SD	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200
Name of Employer Belle Fourche River Watershed	Occupation President	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600	

Full Name (Last, First, Middle Initial) Cheryl Retterath		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 17441 457th Avenue		Transaction ID : A-CF33083
City Watertown	State SD	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Innovative pain Center	Occupation RN	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

Full Name (Last, First, Middle Initial) Stuart Rice		Date of Receipt M M / D D / Y Y Y Y 08 / 29 / 2014
Mailing Address 2300 Skyline Ranch Road		Transaction ID : A-CF32417
City Rapid City	State SD	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600
Name of Employer The Spine Center	Occupation Orthopedic Surgeon	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600	

SUBTOTAL of Receipts This Page (optional).....	3300.00
TOTAL 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 127 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
John D. Richter

Mailing Address 1501 S Main Avenue

City: Sioux Falls State: SD Zip Code: 57105-1845

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

Name of Employer: Retired Occupation: Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **285**

Date of Receipt: **07 / 22 / 2014**

Transaction ID : A-CF31917

Amount of Each Receipt this Period: **25**

B. Full Name (Last, First, Middle Initial)
John D. Richter

Mailing Address 1501 S Main Avenue

City: Sioux Falls State: SD Zip Code: 57105-1845

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

Name of Employer: Retired Occupation: Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **285**

Date of Receipt: **09 / 02 / 2014**

Transaction ID : A-CF32524

Amount of Each Receipt this Period: **50**

C. Full Name (Last, First, Middle Initial)
Joyce A. Riddle

Mailing Address 2707 Mount Rushmore Road

City: Rapid City State: SD Zip Code: 57701-5324

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

Name of Employer: Riddles Group Occupation: Jewelry Retail & Manufacturers

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **1000**

Date of Receipt: **09 / 02 / 2014**

Transaction ID : A-CF32659

Amount of Each Receipt this Period: **500**

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

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

575.00

**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 128 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Michelle R Rife

Mailing Address 5705 S Shadow Ridge Avenue

City	State	Zip Code
Sioux Falls	SD	57108-2006

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

Name of Employer	Occupation
Homemaker	Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		05		2014

Transaction ID : A-CF32136

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
William L. Ritchie Jr.

Mailing Address 5302 Brookeway Drive

City	State	Zip Code
Bethesda	MD	20816-1308

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

Name of Employer	Occupation
Retired	Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		30		2014

Transaction ID : A-CF33074

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
Larry H. Ritz

Mailing Address 5214 S Sweetbriar Court

City	State	Zip Code
Sioux Falls	SD	57108-2855

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

Name of Employer	Occupation
Retired	Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2014

Transaction ID : A-CF32016

Amount of Each Receipt this Period
100

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

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

700.00

**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 129 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
John K Robbins

Mailing Address 172 4th Street SE

City State Zip Code
Huron SD 57350-2510

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

Name of Employer Occupation
Self-Employed Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 21 2014

Transaction ID : A-CF31903

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Beverly Roberts

Mailing Address 219 Islay Avenue

City State Zip Code
Fort Pierre SD 57532-2302

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 31 2014

Transaction ID : A-CF32051

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
Donald L. Roby

Mailing Address 57 Sunrise Drive

City State Zip Code
Watertown SD 57201-2043

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

Name of Employer Occupation
Winthrop Resources Corp. Sales

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 30 2014

Transaction ID : A-CF33097

Amount of Each Receipt this Period
500

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

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

850.00

**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 130 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Kevin Roseland

Mailing Address 17278 US Highway 281

City Redfield State SD Zip Code 57469-6609

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **240**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 29 / 2014

Transaction ID : A-CF33057

Amount of Each Receipt this Period
40

B. Full Name (Last, First, Middle Initial)
Richard Rossman

Mailing Address PO Box 582

City Olathe State KS Zip Code 66051-0582

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **950**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 07 / 2014

Transaction ID : A-CF31750

Amount of Each Receipt this Period
50

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

Mailing Address PO Box 582

City Olathe State KS Zip Code 66051-0582

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **950**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 06 / 2014

Transaction ID : A-CF32204

Amount of Each Receipt this Period
50

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

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

140.00

**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 131 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Eldon Roth

Mailing Address 984 Quail Hollow Circle

City State Zip Code
Dakota Dunes SD 57049-5100

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

Name of Employer Occupation
BPI Technology Self-Employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5100

Date of Receipt
 M M / D D / Y Y Y Y
07 / 29 / 2014

Transaction ID : A-CF31962

Amount of Each Receipt this Period
2600

B. Full Name (Last, First, Middle Initial)
Alberto Rubio

Mailing Address 40 Deerfield Drive

City State Zip Code
West Warwick RI 02893-3238

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

Name of Employer Occupation
Self-Employed Pathologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
266

Date of Receipt
 M M / D D / Y Y Y Y
09 / 08 / 2014

Transaction ID : A-CF32705

Amount of Each Receipt this Period
25

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

Mailing Address PO Box 65

City State Zip Code
Castlewood SD 57223-0065

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700

Date of Receipt
 M M / D D / Y Y Y Y
08 / 28 / 2014

Transaction ID : A-CF32399

Amount of Each Receipt this Period
100

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

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

2725.00

**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 132 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Esther J. Russell

Mailing Address 4011 Mary Drive

City State Zip Code
Rapid City SD 57702-2050

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
210

Date of Receipt
 M M / D D / Y Y Y Y
07 / 11 / 2014

Transaction ID : A-CF31823

Amount of Each Receipt this Period
30

B. Full Name (Last, First, Middle Initial)
Esther J. Russell

Mailing Address 4011 Mary Drive

City State Zip Code
Rapid City SD 57702-2050

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
210

Date of Receipt
 M M / D D / Y Y Y Y
09 / 22 / 2014

Transaction ID : A-CF32937

Amount of Each Receipt this Period
30

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

Mailing Address 26543 481st Avenue

City State Zip Code
Brandon SD 57005-7200

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600

Date of Receipt
 M M / D D / Y Y Y Y
08 / 22 / 2014

Transaction ID : A-CF32364

Amount of Each Receipt this Period
100

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

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

160.00

**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 133 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
August Rysavy

Mailing Address 26543 481st Avenue

City State Zip Code
Brandon SD 57005-7200

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600

Date of Receipt
 M M / D D / Y Y Y Y
09 / 08 / 2014

Transaction ID : A-CF32753

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
John W Saeger

Mailing Address 35 N 4th Street

City State Zip Code
Columbus OH 43215-3612

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400

Date of Receipt
 M M / D D / Y Y Y Y
09 / 27 / 2014

Transaction ID : A-CF33025

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
Donn J. Salvosa

Mailing Address 9911 Oak Branch Drive

City State Zip Code
Vienna VA 22181-5333

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

Name of Employer Occupation
Self-Employed Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : A-CF33069

Amount of Each Receipt this Period
250

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

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

450.00

**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 134 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Thomas E Saunders

Mailing Address 2103 Sapphire Court

City Aberdeen State SD Zip Code 57401-7389

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 28 / 2014

Transaction ID : A-CF32017

Amount of Each Receipt this Period
75

B. Full Name (Last, First, Middle Initial)
Thomas E Saunders

Mailing Address 2103 Sapphire Court

City Aberdeen State SD Zip Code 57401-7389

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 02 / 2014

Transaction ID : A-CF32559

Amount of Each Receipt this Period
75

C. Full Name (Last, First, Middle Initial)
Lyle A. Scandrett

Mailing Address 3616 W Main Street

City Rapid City State SD Zip Code 57702-2334

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

Name of Employer Cosmoc Mystery Area Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : A-CF33164

Amount of Each Receipt this Period
100

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 135 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Lyle Schaap

Mailing Address 2305 E Saint George Drive

City: Sioux Falls State: SD Zip Code: 57103-4660

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

Name of Employer: Schaaps Traveland Inc. Occupation: Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **350**

Date of Receipt: 09 / 04 / 2014

Transaction ID : A-CF32446

Amount of Each Receipt this Period: **250**

B. Full Name (Last, First, Middle Initial)
Randy Schaefer

Mailing Address 23613 Sd Highway 19

City: Madison State: SD Zip Code: 57042-7303

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

Name of Employer: State Farm Occupation: Insurance Agent

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **500**

Date of Receipt: 08 / 28 / 2014

Transaction ID : A-CF32400

Amount of Each Receipt this Period: **500**

C. Full Name (Last, First, Middle Initial)
Frederick W Schaffer

Mailing Address 411 N 6th Street # 3877

City: Emery State: SD Zip Code: 57332-2124

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

Name of Employer: Retired Occupation: Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **605**

Date of Receipt: 09 / 25 / 2014

Transaction ID : A-CF33023

Amount of Each Receipt this Period: **25**

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

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

775.00

**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 136 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
David H. Schelle

Mailing Address **PO Box 295**

City **Chamberlain** State **SD** Zip Code **57325-0295**

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

Name of Employer **Statewide Ag Insurance Inc.** Occupation **Owner**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 15 / 2014

Transaction ID : A-CF32875

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Delwin R. Schmidt

Mailing Address **PO Box 758**

City **Parker** State **SD** Zip Code **57053-0758**

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

Name of Employer **Self-Employed** Occupation **Farmer**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **235**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 28 / 2014

Transaction ID : A-CF32018

Amount of Each Receipt this Period
50

C. Full Name (Last, First, Middle Initial)
Terry L Schulte

Mailing Address **1105 S Minnesota Avenue**

City **Sioux Falls** State **SD** Zip Code **57105-0620**

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

Name of Employer **Schulte Automotive Inc** Occupation **President**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 05 / 2014

Transaction ID : A-CF32137

Amount of Each Receipt this Period
1000

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

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

2050.00

**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 137 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Gary J. Schultz

Mailing Address 1015 E 2nd Street

City State Zip Code
Canton SD 57013-1904

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

Name of Employer Occupation
Keystone Treatment Center Admissions Driver

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
305

Date of Receipt
 M M / D D / Y Y Y Y
07 / 28 / 2014

Transaction ID : A-CF31990

Amount of Each Receipt this Period
25

B. Full Name (Last, First, Middle Initial)
Gary J. Schultz

Mailing Address 1015 E 2nd Street

City State Zip Code
Canton SD 57013-1904

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

Name of Employer Occupation
Keystone Treatment Center Admissions Driver

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
305

Date of Receipt
 M M / D D / Y Y Y Y
09 / 02 / 2014

Transaction ID : A-CF32462

Amount of Each Receipt this Period
25

C. Full Name (Last, First, Middle Initial)
Gary J. Schultz

Mailing Address 1015 E 2nd Street

City State Zip Code
Canton SD 57013-1904

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

Name of Employer Occupation
Keystone Treatment Center Admissions Driver

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
305

Date of Receipt
 M M / D D / Y Y Y Y
09 / 22 / 2014

Transaction ID : A-CF32938

Amount of Each Receipt this Period
25

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

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

75.00

**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 138 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Karen Schultz

Mailing Address 4604 S Duluth Avenue

City: Sioux Falls State: SD Zip Code: 57105-6737

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

Name of Employer: Retired Occupation: Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500

Date of Receipt: 07 / 08 / 2014

Transaction ID : A-CF31786

Amount of Each Receipt this Period: 500

B. Full Name (Last, First, Middle Initial)
John M. Schulzetenberg

Mailing Address 4007 S April Place

City: Sioux Falls State: SD Zip Code: 57103-7239

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

Name of Employer: Luverne Truck Equipment Occupation: Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 2500

Date of Receipt: 07 / 15 / 2014

Transaction ID : A-CF31860

Amount of Each Receipt this Period: 1500

C. Full Name (Last, First, Middle Initial)
Harry Richard Schumacher

Mailing Address 47 E 88th Street Apt. 14A

City: New York State: NY Zip Code: 10128-1152

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

Name of Employer: Retired Occupation: Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 325

Date of Receipt: 08 / 07 / 2014

Transaction ID : A-CF32230

Amount of Each Receipt this Period: 25

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

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

2025.00

**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 139 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Harry Richard Schumacher

Mailing Address 47 E 88th Street
Apt. 14A

City State Zip Code
New York NY 10128-1152

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
325

Date of Receipt
M M / D D / Y Y Y Y
09 / 08 / 2014

Transaction ID : A-CF32851

Amount of Each Receipt this Period
30

B. Full Name (Last, First, Middle Initial)
Robert J. Schurger

Mailing Address 3600 Sheridan Lake Road
Apt. 309

City State Zip Code
Rapid City SD 57702-5354

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
M M / D D / Y Y Y Y
08 / 04 / 2014

Transaction ID : A-CF32119

Amount of Each Receipt this Period
75

C. Full Name (Last, First, Middle Initial)
Robert J. Schurger

Mailing Address 3600 Sheridan Lake Road
Apt. 309

City State Zip Code
Rapid City SD 57702-5354

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
M M / D D / Y Y Y Y
09 / 08 / 2014

Transaction ID : A-CF32724

Amount of Each Receipt this Period
50

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

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

155.00

**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 140 OF 297
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Christine Hearst Schwarzman		Date of Receipt M M / D D / Y Y Y Y 09 / 12 / 2014	
Mailing Address 740 Park Avenue Floor 15		Transaction ID : A-CF32798	
City New York	State NY	Zip Code 10021-4288	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600	
Name of Employer Homemaker	Occupation Homemaker		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600		

Full Name (Last, First, Middle Initial) B. Stephen Schwarzman		Date of Receipt M M / D D / Y Y Y Y 09 / 11 / 2014	
Mailing Address 345 Park Avenue Floor 44		Transaction ID : A-CF32792	
City New York	State NY	Zip Code 10154-0004	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600	
Name of Employer The Blackstone Group LP	Occupation Chairman & CEO		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600		

Full Name (Last, First, Middle Initial) C. James L. Scull Jr.		Date of Receipt M M / D D / Y Y Y Y 08 / 19 / 2014	
Mailing Address 5693 Magic Canyon Road		Transaction ID : A-CF32347	
City Rapid City	State SD	Zip Code 57702-4721	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000	
Name of Employer Scull Construction	Occupation Contractor		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500		

SUBTOTAL of Receipts This Page (optional).....	6200.00
TOTAL This Period (last page this line number only).....	6200.00

**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 141 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Paul R. Seegers

Mailing Address 12720 Hillcrest Road
Suite 530

City Dallas State TX Zip Code 75230-2000

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

Name of Employer Seegers Enterprises Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 10 / 2014

Transaction ID : A-CF31809

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Richard W. Seifel

Mailing Address 23 4th Avenue NW

City Watertown State SD Zip Code 57201-2416

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **390**

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 01 / 2014

Transaction ID : A-CF32069

Amount of Each Receipt this Period
50

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

Mailing Address 2809 W Brandy Wine Circle

City Sioux Falls State SD Zip Code 57108-1519

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

Name of Employer Hungrys Restaurants Occupation Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2014

Transaction ID : A-CF32905

Amount of Each Receipt this Period
500

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

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

1550.00

**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 142 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Marlin C. Sejnoha Jr.

Mailing Address 48061 Iverson Xing Road

City State Zip Code
Brandon SD 57005-7902

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

Name of Employer Occupation
CBM Food Service President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
M M / D D / Y Y Y Y
09 / 19 / 2014

Transaction ID : A-CF32906

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Shane V. Sejnoha

Mailing Address 2308 S 4th Avenue

City State Zip Code
Sioux Falls SD 57105-3953

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

Name of Employer Occupation
CBM Food Service Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
M M / D D / Y Y Y Y
09 / 19 / 2014

Transaction ID : A-CF32907

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Nicholas R. Sershen

Mailing Address 5104 S Woodwind Avenue

City State Zip Code
Sioux Falls SD 57108-5122

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

Name of Employer Occupation
Val-Add Service Corp VP Development

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300

Date of Receipt
M M / D D / Y Y Y Y
09 / 25 / 2014

Transaction ID : A-CF32923

Amount of Each Receipt this Period
250

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

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

1250.00

**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 143 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Nicholas R. Sershen

Mailing Address 5104 S Woodwind Avenue

City State Zip Code
Sioux Falls SD 57108-5122

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

Name of Employer Occupation
Val-Add Service Corp VP Development

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300

Date of Receipt
 M M / D D / Y Y Y Y
09 / 25 / 2014

Transaction ID : A-CF32924

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
Daniel F. Shaw

Mailing Address 1038 NE 9th Street

City State Zip Code
Madison SD 57042-0903

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
08 / 26 / 2014

Transaction ID : A-CF32380

Amount of Each Receipt this Period
500

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

Mailing Address 743 E Anamosa Street
Apt. 206

City State Zip Code
Rapid City SD 57701-6928

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300

Date of Receipt
 M M / D D / Y Y Y Y
08 / 11 / 2014

Transaction ID : A-CF32267

Amount of Each Receipt this Period
60

SUBTOTAL of Receipts This Page (optional).....	610.00
TOTAL 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 144 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Robert E. Shuey

Mailing Address 409 Bayhill Circle

City State Zip Code
Dakota Dunes SD 57049-5092

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

Name of Employer Occupation
Tyson Foods, Inc. Sales Officer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300

Date of Receipt
 M M / D D / Y Y Y Y
09 / 02 / 2014

Transaction ID : A-CF32560

Amount of Each Receipt this Period
75

B. Full Name (Last, First, Middle Initial)
Ephriam Sieler

Mailing Address 122 Texas Street

City State Zip Code
Rapid City SD 57701-7645

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1950

Date of Receipt
 M M / D D / Y Y Y Y
07 / 28 / 2014

Transaction ID : A-CF32019

Amount of Each Receipt this Period
200

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

Mailing Address 122 Texas Street

City State Zip Code
Rapid City SD 57701-7645

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1950

Date of Receipt
 M M / D D / Y Y Y Y
09 / 02 / 2014

Transaction ID : A-CF32660

Amount of Each Receipt this Period
400

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

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

675.00

**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 145 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Ralph Siemonsma

Mailing Address 1755 Iron Horse Loop

City Spearfish State SD Zip Code 57783-9811

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

Name of Employer Siemonsma Const Inc Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 26 / 2014

Transaction ID : A-CF32381

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Barbara J. Slater

Mailing Address 3408 W Ralph Rogers Road
Apt. B107

City Sioux Falls State SD Zip Code 57108-2658

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **305**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 02 / 2014

Transaction ID : A-CF32529

Amount of Each Receipt this Period
25

C. Full Name (Last, First, Middle Initial)
Lorna Scott Small

Mailing Address 48786 267th Street

City Valley Springs State SD Zip Code 57068-7323

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 14 / 2014

Transaction ID : A-CF32291

Amount of Each Receipt this Period
25

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

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

550.00

**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 146 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Daniel G. Smith

Mailing Address 31053 430th Avenue

City Tabor	State SD	Zip Code 57063-6202
---------------	-------------	------------------------

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 10 / 2014

Transaction ID : A-CF31812

Amount of Each Receipt this Period
200

B. Full Name (Last, First, Middle Initial)
Daniel G. Smith

Mailing Address 31053 430th Avenue

City Tabor	State SD	Zip Code 57063-6202
---------------	-------------	------------------------

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 03 / 2014

Transaction ID : A-CF32636

Amount of Each Receipt this Period
200

C. Full Name (Last, First, Middle Initial)
Harold E. Smith

Mailing Address PO Box 265

City Winner	State SD	Zip Code 57580-0265
----------------	-------------	------------------------

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2015**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 22 / 2014

Transaction ID : A-CF32940

Amount of Each Receipt this Period
200

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 147 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Charles Soderstrom

Mailing Address 409 Genius Drive

City Winter Park State FL Zip Code 32789-5109

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

Name of Employer Impala Occupation COO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1607.16

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 22 / 2014

Transaction ID : A-IF31894

Amount of Each Receipt this Period
607.16

Inkind: Catering

B. Full Name (Last, First, Middle Initial)
Charles Soderstrom

Mailing Address 409 Genius Drive

City Winter Park State FL Zip Code 32789-5109

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

Name of Employer Impala Occupation COO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1607.16

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2014

Transaction ID : A-CF31952

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Roger D. Solum

Mailing Address 1333 Mayfair Drive

City Watertown State SD Zip Code 57201-1155

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 24 / 2014

Transaction ID : A-CF32972

Amount of Each Receipt this Period
500

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

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

2107.16

**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 148 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
James W. Soper

Mailing Address 701 E 2nd Avenue

City Mitchell State SD Zip Code 57301-3520

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **325**

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 20 / 2014

Transaction ID : A-CF32354

Amount of Each Receipt this Period
 25

B. Full Name (Last, First, Middle Initial)
James W. Soper

Mailing Address 701 E 2nd Avenue

City Mitchell State SD Zip Code 57301-3520

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **325**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 02 / 2014

Transaction ID : A-CF32503

Amount of Each Receipt this Period
 25

C. Full Name (Last, First, Middle Initial)
Thomas E. Soukup Jr.

Mailing Address 904 Estates Drive

City Wagner State SD Zip Code 57380-9300

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

Name of Employer Self-Employed Occupation Farmer/Rancher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 02 / 2014

Transaction ID : A-CF32530

Amount of Each Receipt this Period
 50

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 149 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Wendy Lantis Soulek

Mailing Address PO Box 699

City Spearfish State SD Zip Code 57783-0699

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

Name of Employer Priority Co. Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2300**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 08 / 2014

Transaction ID : A-CF31758

Amount of Each Receipt this Period
25

B. Full Name (Last, First, Middle Initial)
Wendy Lantis Soulek

Mailing Address PO Box 699

City Spearfish State SD Zip Code 57783-0699

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

Name of Employer Priority Co. Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2300**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 22 / 2014

Transaction ID : A-CF31913

Amount of Each Receipt this Period
25

C. Full Name (Last, First, Middle Initial)
Wendy Lantis Soulek

Mailing Address PO Box 699

City Spearfish State SD Zip Code 57783-0699

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

Name of Employer Priority Co. Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2300**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 04 / 2014

Transaction ID : A-CF32112

Amount of Each Receipt this Period
25

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

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

75.00

**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 150 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Wendy Lantis Soulek

Mailing Address PO Box 699

City Spearfish State SD Zip Code 57783-0699

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

Name of Employer Priority Co. Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2300**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 18 / 2014

Transaction ID : A-CF32336

Amount of Each Receipt this Period
25

B. Full Name (Last, First, Middle Initial)
Wendy Lantis Soulek

Mailing Address PO Box 699

City Spearfish State SD Zip Code 57783-0699

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

Name of Employer Priority Co. Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2300**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 02 / 2014

Transaction ID : A-CF32516

Amount of Each Receipt this Period
50

C. Full Name (Last, First, Middle Initial)
Wendy Lantis Soulek

Mailing Address PO Box 699

City Spearfish State SD Zip Code 57783-0699

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

Name of Employer Priority Co. Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2300**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 15 / 2014

Transaction ID : A-CF32868

Amount of Each Receipt this Period
50

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

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

125.00

**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 151 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Wendy Lantis Soulek

Mailing Address **PO Box 699**

City **Spearfish** State **SD** Zip Code **57783-0699**

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

Name of Employer **Priority Co.** Occupation **President**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2300**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 29 / 2014

Transaction ID : A-CF33054

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
Mary Janet Sovik

Mailing Address **102 Sherbrooke Road**

City **Syracuse** State **NY** Zip Code **13214-1453**

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

Name of Employer **Home Aides of Central NY** Occupation **Home Health Aide**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **375**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 06 / 2014

Transaction ID : A-CF32164

Amount of Each Receipt this Period
25

C. Full Name (Last, First, Middle Initial)
Leo H. Spinar

Mailing Address **3408 W Ralph Rogers Road
Apt. C109**

City **Sioux Falls** State **SD** Zip Code **57108-2657**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 08 / 2014

Transaction ID : A-CF31763

Amount of Each Receipt this Period
100

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

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

175.00

**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 152 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Leo H. Spinar

Mailing Address 3408 W Ralph Rogers Road
Apt. C109

City State Zip Code
Sioux Falls SD 57108-2657

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600

Date of Receipt
 M M / D D / Y Y Y Y
08 / 01 / 2014

Transaction ID : A-CF32070

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
William F. St. Clair

Mailing Address 37644 184th Street

City State Zip Code
Tulare SD 57476-7007

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

Name of Employer Occupation
St. Clair Ranch Partnership Rancher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
09 / 29 / 2014

Transaction ID : A-CF33059

Amount of Each Receipt this Period
250

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

Mailing Address 813 W Bayberry Circle

City State Zip Code
Sioux Falls SD 57108-2828

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

Name of Employer Occupation
RE COM, Inc. Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300

Date of Receipt
 M M / D D / Y Y Y Y
08 / 29 / 2014

Transaction ID : A-CF32314

Amount of Each Receipt this Period
50

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

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

400.00

**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 153 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Shimon A. Stein

Mailing Address 2122 Massachusetts Avenue NW
Apt. 614

City Washington State DC Zip Code 20008-2830

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

Name of Employer Blank Rome Government Relations Occupation Lobbyist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 22 / 2014

Transaction ID : A-CF31946

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Benj Stoick

Mailing Address 417 9th Street E

City Mobridge State SD Zip Code 57601-2236

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

Name of Employer Stoick Grocery Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3600**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : A-CF33147

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Joshua J. Stoick

Mailing Address 214 W Grand Crossing

City Mobridge State SD Zip Code 57601-2129

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

Name of Employer Paylessfoods Occupation Retail

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : A-CF33148

Amount of Each Receipt this Period
500

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 154 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Russell Stone

Mailing Address 1319 N Dakota Street
Apt. 8

City Aberdeen State SD Zip Code 57401-2109

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

Name of Employer Western RC& D Association Inc. Occupation Chairperson

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : A-CF32725

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
Joni Stowater

Mailing Address 2004 W River Bluff Drive

City Brandon State SD Zip Code 57005-3002

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 05 / 2014

Transaction ID : A-CF32138

Amount of Each Receipt this Period
1000

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

Mailing Address 42 Dans Highway

City New Canaan State CT Zip Code 06840-2501

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

Name of Employer Impala Asset Management Occupation Asset Management

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 24 / 2014

Transaction ID : A-CF31898

Amount of Each Receipt this Period
1000

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

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

2050.00

**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 155 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Ray Stukel

Mailing Address 27438 Ridgeview Road

City State Zip Code
Burke SD 57523-6131

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

Name of Employer Occupation
Self-Employed Rancher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 02 / 2014

Transaction ID : A-CF32662

Amount of Each Receipt this Period
150

B. Full Name (Last, First, Middle Initial)
Douglas K. Styron

Mailing Address 1504 St Lawrence Street

City State Zip Code
Orlando FL 32818-5712

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
321.25

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 15 / 2014

Transaction ID : A-CF32301

Amount of Each Receipt this Period
75

C. Full Name (Last, First, Middle Initial)
Douglas K. Styron

Mailing Address 1504 St Lawrence Street

City State Zip Code
Orlando FL 32818-5712

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
321.25

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 12 / 2014

Transaction ID : A-CF32799

Amount of Each Receipt this Period
81.25

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

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

306.25

**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 156 OF 297
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) Marian D. Sullivan		Date of Receipt M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address PO Box 5361		Transaction ID : A-CF33060
City Sioux Falls	State SD	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200
Name of Employer Sullivan, Inc.	Occupation Self-Employed	Refund issued 9/30/2014
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200	

Full Name (Last, First, Middle Initial) Tom Sullivan		Date of Receipt M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address 5 Huckleberry Hill Road		Transaction ID : A-CF31896
City Wilton	State CT	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer Impala Asset Management LLC	Occupation CFO	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

Full Name (Last, First, Middle Initial) Holly J. Swedeen		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 2501 W Sleigh Creek Circle		Transaction ID : A-CF33001
City Sioux Falls	State SD	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

SUBTOTAL of Receipts This Page (optional).....	1700.00
TOTAL 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 157 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Gerald P. Sweetman

Mailing Address 2011 S Austin Drive

City: Sioux Falls State: SD Zip Code: 57105-0110

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

Name of Employer: Sweetman Construction Occupation: Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **2000**

Date of Receipt: 08 / 05 / 2014

Transaction ID : A-CF32139

Amount of Each Receipt this Period: **1000**

B. Full Name (Last, First, Middle Initial)
Richard C. Sweetman

Mailing Address 105 W Spy Glass Drive

City: Sioux Falls State: SD Zip Code: 57108-6414

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

Name of Employer: Spencer Quarries, Inc. Occupation: Contractor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **350**

Date of Receipt: 09 / 22 / 2014

Transaction ID : A-CF32942

Amount of Each Receipt this Period: **100**

C. Full Name (Last, First, Middle Initial)
Joe A. Swenson

Mailing Address 705 N Pine Lake Ridge

City: Sioux Falls State: SD Zip Code: 57110-6221

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

Name of Employer: Dakota Wholesale Occupation: Tax Payer / Patriot

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **950**

Date of Receipt: 09 / 04 / 2014

Transaction ID : A-CF32445

Amount of Each Receipt this Period: **150**

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

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

1250.00

**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 158 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Jeffrey S Tabak

Mailing Address 331 Madison Avenue

City State Zip Code
New York NY 10017-5102

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

Name of Employer Occupation
Miller Tabak & Co. CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
07 / 28 / 2014

Transaction ID : A-CF31958

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Orville F. Taecker

Mailing Address 111 12th Avenue NE

City State Zip Code
Watertown SD 57201-1254

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

Name of Employer Occupation
Andor, Inc. Plumbing & Heating Contractor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700

Date of Receipt
 M M / D D / Y Y Y Y
07 / 11 / 2014

Transaction ID : A-CF31825

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
Mary F Tarbox

Mailing Address 2408 S Willow Avenue

City State Zip Code
Sioux Falls SD 57105-3536

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
235

Date of Receipt
 M M / D D / Y Y Y Y
07 / 08 / 2014

Transaction ID : A-CF31787

Amount of Each Receipt this Period
25

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

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

1125.00

**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 159 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Mary F Tarbox

Mailing Address 2408 S Willow Avenue

City State Zip Code
Sioux Falls SD 57105-3536

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
235

Date of Receipt
 M M / D D / Y Y Y Y
08 / 12 / 2014

Transaction ID : A-CF32275

Amount of Each Receipt this Period
25

B. Full Name (Last, First, Middle Initial)
Duane E. Tate

Mailing Address PO Box 28

City State Zip Code
Mission SD 57555-0028

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

Name of Employer Occupation
Self-Employed Rancher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
09 / 05 / 2014

Transaction ID : A-CF32571

Amount of Each Receipt this Period
150

C. Full Name (Last, First, Middle Initial)
Kevin D. Tetzlaff

Mailing Address 840 Regency Court

City State Zip Code
Brookings SD 57006-2903

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

Name of Employer Occupation
First Bank & Trust Banker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450

Date of Receipt
 M M / D D / Y Y Y Y
09 / 08 / 2014

Transaction ID : A-CF32754

Amount of Each Receipt this Period
200

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

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

375.00

**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 160 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Carveth S. Thompson

Mailing Address 20689 Maitland Road

City State Zip Code
Lead SD 57754-3713

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
325

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 04 / 2014

Transaction ID : A-CF32444

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Carveth S. Thompson

Mailing Address 20689 Maitland Road

City State Zip Code
Lead SD 57754-3713

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
325

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 25 / 2014

Transaction ID : A-CF33016

Amount of Each Receipt this Period
25

C. Full Name (Last, First, Middle Initial)
Alwyn L. Thoreson

Mailing Address PO Box 164

City State Zip Code
Edgemont SD 57735-0164

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 03 / 2014

Transaction ID : A-CF32085

Amount of Each Receipt this Period
100

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

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

225.00

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

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

FOR LINE NUMBER: PAGE 161 OF 297
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Lester E. Timm
 Mailing Address PO Box 282
 City State Zip Code
 Brandon SD 57005-0282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Anderson Group CPA CPA
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
225

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 02 2014
Transaction ID : A-CF32564
 Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
Richard G. Tinker
 Mailing Address 100 Montana Avenue
 Apt. 101
 City State Zip Code
 Lead SD 57754-1019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired Retired
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
300

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 05 2014
Transaction ID : A-CF32617
 Amount of Each Receipt this Period
25

C. Full Name (Last, First, Middle Initial)
Dean R. Tisdall
 Mailing Address PO Box 275
 City State Zip Code
 Mobridge SD 57601-0275
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Bestway Traffic, Inc. Owner
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 29 2014
Transaction ID : A-CF33149
 Amount of Each Receipt this Period
500

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

575.00

**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 162 OF 297
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Alosia Todd

Mailing Address 29965 172nd Street

City Gettysburg State SD Zip Code 57442-5200

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **670**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 10 / 2014

Transaction ID : A-CF31813

Amount of Each Receipt this Period
 _____ 40

B. Full Name (Last, First, Middle Initial)
Alosia Todd

Mailing Address 29965 172nd Street

City Gettysburg State SD Zip Code 57442-5200

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **670**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 28 / 2014

Transaction ID : A-CF31993

Amount of Each Receipt this Period
 _____ 30

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

Mailing Address 29965 172nd Street

City Gettysburg State SD Zip Code 57442-5200

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **670**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 11 / 2014

Transaction ID : A-CF32268

Amount of Each Receipt this Period
 _____ 45

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

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

_____ 115.00

**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 163 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Alosia Todd

Mailing Address 29965 172nd Street

City Gettysburg State SD Zip Code 57442-5200

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **670**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 19 / 2014

Transaction ID : A-CF32909

Amount of Each Receipt this Period
30

B. Full Name (Last, First, Middle Initial)
Elena Tompkins

Mailing Address 3042 Dent Place NW

City Washington State DC Zip Code 20007-2915

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

Name of Employer Tompkins Strategies LLC Occupation Principal

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 22 / 2014

Transaction ID : A-CF31918

Amount of Each Receipt this Period
500

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

Mailing Address 3042 Dent Place NW

City Washington State DC Zip Code 20007-2915

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

Name of Employer Tompkins Strategies LLC Occupation Principal

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 24 / 2014

Transaction ID : A-CF32973

Amount of Each Receipt this Period
500

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

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

1030.00

**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 164 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Elizabeth K. Toulon

Mailing Address **PO Box 666**

City **Koloa** State **HI** Zip Code **96756-0666**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **825**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 04 / 2014

Transaction ID : A-CF32121

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Elizabeth K. Toulon

Mailing Address **PO Box 666**

City **Koloa** State **HI** Zip Code **96756-0666**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **825**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 02 / 2014

Transaction ID : A-CF32663

Amount of Each Receipt this Period
100

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

Mailing Address **911 S Egan Avenue
Suite 104**

City **Madison** State **SD** Zip Code **57042-3315**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1600**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 28 / 2014

Transaction ID : A-CF32023

Amount of Each Receipt this Period
200

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

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

400.00

**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 165 OF 297
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) Todd Trask		Date of Receipt M M / D D / Y Y Y Y 08 / 19 / 2014
Mailing Address PO Box 34		Transaction ID : A-CF32348
City Wasta	State SD	Zip Code 57791-0034
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000	
Name of Employer Self-Employed	Occupation Rancher	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

Full Name (Last, First, Middle Initial) John C. Travis		Date of Receipt M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address PO Box 1		Transaction ID : A-CF31933
City Mound City	State SD	Zip Code 57646-0001
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100	
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300	

Full Name (Last, First, Middle Initial) John C. Travis		Date of Receipt M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address PO Box 1		Transaction ID : A-CF32597
City Mound City	State SD	Zip Code 57646-0001
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100	
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300	

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL 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 166 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Mabel Triebwasser

Mailing Address 1005 W Birch Avenue

City Mitchell State SD Zip Code 57301-3231

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1450**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 02 / 2014

Transaction ID : A-CF32664

Amount of Each Receipt this Period
 500

B. Full Name (Last, First, Middle Initial)
John G. Trubisz

Mailing Address 25 Hollow Ridge Road

City Staatsburg State NY Zip Code 12580-5307

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **220**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : A-CF32711

Amount of Each Receipt this Period
 20

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

Mailing Address 2908 W 37th Circle Suite 302

City Sioux Falls State SD Zip Code 57105-8114

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 28 / 2014

Transaction ID : A-CF31959

Amount of Each Receipt this Period
 500

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

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

1020.00

**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 167 OF 297
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) Merle D. Twedt		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 18 / 2014
Mailing Address 25423 406th Avenue		Transaction ID : A-CF31879
City Mitchell	State SD	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50
Name of Employer Coca Cola	Occupation Truck Driver	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 465	

Full Name (Last, First, Middle Initial) Merle D. Twedt		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 08 / 2014
Mailing Address 25423 406th Avenue		Transaction ID : A-CF32726
City Mitchell	State SD	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50
Name of Employer Coca Cola	Occupation Truck Driver	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 465	

Full Name (Last, First, Middle Initial) Craig M. Uhre		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 09 / 2014
Mailing Address 11003 Amber Lane		Transaction ID : A-CF32804
City Black Hawk	State SD	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350	

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL 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 168 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Ronnie D Uttecht

Mailing Address 22379 399th Avenue

City Woonsocket State SD Zip Code 57385-6913

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

Name of Employer Self-Employed Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **425**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 28 / 2014

Transaction ID : A-CF32401

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Judy K. Vanden Bosch

Mailing Address 25982 478th Avenue

City Brandon State SD Zip Code 57005-6503

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 07 / 2014

Transaction ID : A-CF32232

Amount of Each Receipt this Period
2000

Reattribution/Redesignation requested

C. Full Name (Last, First, Middle Initial)
Judy K. Vanden Bosch

Mailing Address 25982 478th Avenue

City Brandon State SD Zip Code 57005-6503

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 09 / 2014

Transaction ID : A-MCNF659

Amount of Each Receipt this Period
-400

Reattribution from spouse
[MEMO ITEM]

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

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

2100.00

**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 169 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Michael E. Vanden Bosch

Mailing Address 25982 478th Avenue

City State Zip Code
Brandon SD 57005-6503

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

Name of Employer Occupation
Sanford Clinic Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500

Date of Receipt
 M M / D D / Y Y Y Y
09 / 09 / 2014

Transaction ID : A-MCNF660

Amount of Each Receipt this Period
400

Reattribution to spouse

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Scott Vander Wal

Mailing Address 730 N Samara Avenue

City State Zip Code
Volga SD 57071-2203

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

Name of Employer Occupation
South Dakota Farm Bureau President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300

Date of Receipt
 M M / D D / Y Y Y Y
07 / 08 / 2014

Transaction ID : A-CF31764

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
Scott Vander Wal

Mailing Address 730 N Samara Avenue

City State Zip Code
Volga SD 57071-2203

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

Name of Employer Occupation
South Dakota Farm Bureau President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300

Date of Receipt
 M M / D D / Y Y Y Y
09 / 02 / 2014

Transaction ID : A-CF32665

Amount of Each Receipt this Period
100

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

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

200.00

**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 170 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Vernon C. Vanderhule

Mailing Address 510 Chalkstone Road

City Yankton State SD Zip Code 57078-3709

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

Name of Employer S & J Leasing Inc Occupation President/CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : A-CF33099

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Ann VanderPol

Mailing Address PO Box 607

City Platte State SD Zip Code 57369-0607

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 16 / 2014

Transaction ID : A-CF31868

Amount of Each Receipt this Period
75

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

Mailing Address PO Box 244

City Corsica State SD Zip Code 57328-0244

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 08 / 2014

Transaction ID : A-CF31789

Amount of Each Receipt this Period
250

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

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

425.00

**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 171 OF 297
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) Kim L. Vanneman		Date of Receipt M M / D D / Y Y Y Y 09 / 23 / 2014
Mailing Address 31148 269th Street		Transaction ID : A-CF32947
City Ideal	State SD	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 700
Name of Employer Farm Credit Services	Occupation Director	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 900	

Full Name (Last, First, Middle Initial) Richard G. Vasgaard		Date of Receipt M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 28746 462nd Avenue		Transaction ID : A-CF32637
City Centerville	State SD	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150
Name of Employer SD Farm Bureau	Occupation State Board of Directors	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

Full Name (Last, First, Middle Initial) Leo Vojta		Date of Receipt M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address 12844 293rd Avenue		Transaction ID : A-CF31939
City Glenham	State SD	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Self-Employed	Occupation Grain Farmer	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

SUBTOTAL of Receipts This Page (optional).....	1350.00
TOTAL 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 172 OF 297
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) Leo Vojta		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 29 / 2014
Mailing Address 12844 293rd Avenue		Transaction ID : A-CF33126
City Glenham	State SD	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Self-Employed	Occupation Grain Farmer	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

Full Name (Last, First, Middle Initial) Bryan D Vrooman		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 08 / 2014
Mailing Address 25550 Moonlight Drive		Transaction ID : A-CF32757
City Edgemont	State SD	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 525	

Full Name (Last, First, Middle Initial) Jimmy E Waggoner		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 28 / 2014
Mailing Address 5120 S Solberg Avenue		Transaction ID : A-CF32329
City Sioux Falls	State SD	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer VisionPoint Advisory Group	Occupation Financial Advisor	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

SUBTOTAL of Receipts This Page (optional).....	1055.00
TOTAL 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 173 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
David M. Wagner

Mailing Address 130 N Main Street
Suite 202

City State Zip Code
New City NY 10956-3800

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

Name of Employer Occupation
Self-Employed Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1300

Date of Receipt
 M M / D D / Y Y Y Y
08 / 01 / 2014

Transaction ID : A-CF32073

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
David M. Wagner

Mailing Address 130 N Main Street
Suite 202

City State Zip Code
New City NY 10956-3800

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

Name of Employer Occupation
Self-Employed Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1300

Date of Receipt
 M M / D D / Y Y Y Y
09 / 08 / 2014

Transaction ID : A-CF32758

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Thomas P. Walsh Sr.

Mailing Address 15 S Riverview Heights

City State Zip Code
Sioux Falls SD 57105-0260

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

Name of Employer Occupation
Dakota King Franchise Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
09 / 02 / 2014

Transaction ID : A-CF32667

Amount of Each Receipt this Period
500

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

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

850.00

**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 174 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Gene F. Walton

Mailing Address 12785 Old Hill City Road

City State Zip Code
Keystone SD 57751-6627

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

Name of Employer Occupation
Self-Employed Trucker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
265

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 16 / 2014

Transaction ID : A-CF31869

Amount of Each Receipt this Period
40

B. Full Name (Last, First, Middle Initial)
Robert E. Weber Sr.

Mailing Address 130 S 7th Street

City State Zip Code
Emery SD 57332-2116

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
270

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 02 / 2014

Transaction ID : A-CF32534

Amount of Each Receipt this Period
40

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

Mailing Address 5722 Montebello Court

City State Zip Code
Rapid City SD 57702-8742

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

Name of Employer Occupation
RC Reg Hosp Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 17 / 2014

Transaction ID : A-CF32295

Amount of Each Receipt this Period
100

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

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

180.00

**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 175 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Larry Wehrkamp

Mailing Address 5722 Montebello Court

City State Zip Code
Rapid City SD 57702-8742

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

Name of Employer Occupation
RC Reg Hosp Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300

Date of Receipt
 M M / D D / Y Y Y Y
09 / 18 / 2014

Transaction ID : A-CF32816

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Lyle Weidenbach

Mailing Address 29533 430th Avenue

City State Zip Code
Lesterville SD 57040-5021

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

Name of Employer Occupation
Self-Employed Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300

Date of Receipt
 M M / D D / Y Y Y Y
09 / 02 / 2014

Transaction ID : A-CF32535

Amount of Each Receipt this Period
25

C. Full Name (Last, First, Middle Initial)
George R. Wellington

Mailing Address 150 Ruby Forest Parkway

City State Zip Code
Suwanee GA 30024-2389

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300

Date of Receipt
 M M / D D / Y Y Y Y
08 / 04 / 2014

Transaction ID : A-CF32122

Amount of Each Receipt this Period
25

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

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

150.00

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

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

FOR LINE NUMBER: PAGE 176 OF 297
(check only one)
 11a 11b 11c 11d 15
 12 13a 13b 14

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
George R. Wellington

Mailing Address 150 Ruby Forest Parkway

City State Zip Code
Suwanee GA 30024-2389

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300

Date of Receipt
 M M / D D / Y Y Y Y
09 08 2014

Transaction ID : A-CF32715

Amount of Each Receipt this Period
25

B. Full Name (Last, First, Middle Initial)
Marcia A Wenk

Mailing Address 930 N Egan Avenue

City State Zip Code
Madison SD 57042-1621

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400

Date of Receipt
 M M / D D / Y Y Y Y
08 19 2014

Transaction ID : A-CF32349

Amount of Each Receipt this Period
250

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

Mailing Address 505 22nd Street SW

City State Zip Code
Huron SD 57350-4364

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
625

Date of Receipt
 M M / D D / Y Y Y Y
08 04 2014

Transaction ID : A-CF32123

Amount of Each Receipt this Period
75

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

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

350.00

**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 177 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Arlene Wessel

Mailing Address 505 22nd Street SW

City State Zip Code
Huron SD 57350-4364

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
625

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : A-CF33100

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Phyllis A. Westbrook

Mailing Address 914 N Union Avenue

City State Zip Code
Madison SD 57042-1421

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
08 / 28 / 2014

Transaction ID : A-CF32402

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Carolyn R. Westphal

Mailing Address 4224 Dale Drive

City State Zip Code
Rapid City SD 57702-3205

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300

Date of Receipt
 M M / D D / Y Y Y Y
09 / 05 / 2014

Transaction ID : A-CF32599

Amount of Each Receipt this Period
50

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

TOTAL This Period (last page this line number only).....

400.00

**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 178 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Rosemary A. White

Mailing Address 18 Wm Holland Lane

City Sisseton State SD Zip Code 57262-2332

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **925**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 28 / 2014

Transaction ID : A-CF32024

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Rosemary A. White

Mailing Address 18 Wm Holland Lane

City Sisseton State SD Zip Code 57262-2332

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **925**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 02 / 2014

Transaction ID : A-CF32668

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
Gary D. Wileman

Mailing Address 1709 N Jay Street

City Aberdeen State SD Zip Code 57401-1358

FEC ID number of contributing federal political committee. **C**

Name of Employer Aberdeen First Assem of God Occupation Pastor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 14 / 2014

Transaction ID : A-CF31855

Amount of Each Receipt this Period
50

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 179 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Gary D. Wileman

Mailing Address 1709 N Jay Street

City Aberdeen State SD Zip Code 57401-1358

FEC ID number of contributing federal political committee. **C**

Name of Employer Aberdeen First Assem of God Occupation Pastor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 10 / 2014

Transaction ID : A-CF32778

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
Marilyn M. Wileman

Mailing Address 8000 Morris Lane

City Rapid City State SD Zip Code 57703-9336

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3100**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 04 / 2014

Transaction ID : A-CF32124

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Ronald F. Williamson

Mailing Address PO Box 88138

City Sioux Falls State SD Zip Code 57109-8138

FEC ID number of contributing federal political committee. **C**

Name of Employer Williamson Management Group Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : A-CF31873

Amount of Each Receipt this Period
500

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 180 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Arthur T. Wilson USAF (Ret)

Mailing Address 704 Pro Rodeo Drive

City Spearfish State SD Zip Code 57783-9494

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 18 / 2014

Transaction ID : A-CF32341

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
Kenneth P. Winkler

Mailing Address 12903 Twin Meadows Court

City Saint Louis State MO Zip Code 63146-1803

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 08 / 2014

Transaction ID : A-CF31791

Amount of Each Receipt this Period
50

C. Full Name (Last, First, Middle Initial)
Willis Wipf

Mailing Address 1795 Utah Avenue SE

City Huron State SD Zip Code 57350-4117

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **375**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 05 / 2014

Transaction ID : A-CF32600

Amount of Each Receipt this Period
100

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

200.00

**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 181 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Andrea Jo Wohlenberg

Mailing Address 28494 County Road 11

City Olivet	State SD	Zip Code 57052-6604
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer A. Jo Wholenberg, PC	Occupation CPA
--	-------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 03 / 2014

Transaction ID : A-CF32638

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Jeff L. Wolff

Mailing Address 710 10th Avenue W

City Mobridge	State SD	Zip Code 57601-1941
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Keller-Wolff Chiropractic Clinic	Occupation Chiropractor
--	----------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 29 / 2014

Transaction ID : A-CF33150

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Mary K.V. Wonnenberg

Mailing Address 139 Tennessee Avenue NE

City Washington	State DC	Zip Code 20002-6425
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 30 / 2014

Transaction ID : A-CF31963

Amount of Each Receipt this Period
250

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

850.00

**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 182 OF 297
	<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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Ann Wutke

Mailing Address 6666 Odana Road
Suite 215

City Madison State WI Zip Code 53719-1012

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Finance

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 14 / 2014

Transaction ID : A-CF32293

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Gary Yablon

Mailing Address 60 E End Avenue

City New York State NY Zip Code 10028-7907

FEC ID number of contributing federal political committee. **C**

Name of Employer Impala Asset Occupation Analyst

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 29 / 2014

Transaction ID : A-CF31953

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Bruce D Yakley

Mailing Address 170 N Harmon Drive

City Mitchell State SD Zip Code 57301-6244

FEC ID number of contributing federal political committee. **C**

Name of Employer Trail King Industries Occupation President & CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 24 / 2014

Transaction ID : A-CF32977

Amount of Each Receipt this Period
2600

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3350.00

**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 183 OF 297	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Francis J. Zacher

Mailing Address **PO Box 70**

City **Eagle Butte** State **SD** Zip Code **57625-0070**

FEC ID number of contributing federal political committee. **C**

Name of Employer **State Bank of Eagle Butte** Occupation **VP**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09	/	05	/	2014

Transaction ID : A-CF32601

Amount of Each Receipt this Period

100

B. Full Name (Last, First, Middle Initial)
Mary Kathleen Zirkelbach

Mailing Address **1740 R Street NW
Apt. 1**

City **Washington** State **DC** Zip Code **20009-2410**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Well Point** Occupation **Senior Director**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07	/	22	/	2014

Transaction ID : A-CF31919

Amount of Each Receipt this Period

250

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

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SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

350.00
17759.66

**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 184 OF 297	
	<input type="checkbox"/> 11a 12	<input checked="" 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)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Charles Mix Republican Party

Mailing Address **PO Box 15**

City **Geddes** State **SD** Zip Code **57342-0015**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **150**

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 15 / 2014

Transaction ID : A-CF32854

Amount of Each Receipt this Period
150

B. Full Name (Last, First, Middle Initial)
Kingsbury Co. Central Republican Committee

Mailing Address **601 Sd Highway 25 S**

City **De Smet** State **SD** Zip Code **57231-2298**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2014

Transaction ID : A-CF33155

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1150.00

1150.00

**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 185 OF 297
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Action Committee For Rural Electrification PAC

Full Name (Last, First, Middle Initial)
Mailing Address 4301 Wilson Boulevard

City Arlington State VA Zip Code 22203-1867

FEC ID number of contributing federal political committee. **C** C00002972

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 10000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : A-CF33168

Amount of Each Receipt this Period
 3000

B. Advanced Medical Technology Association PAC

Full Name (Last, First, Middle Initial)
Mailing Address 701 Pennsylvania Avenue NW Suite 800

City Washington State DC Zip Code 20004-2654

FEC ID number of contributing federal political committee. **C** C00340356

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : A-CF33103

Amount of Each Receipt this Period
 1000

C. Alpha Natural Resources, Inc. PAC

Full Name (Last, First, Middle Initial)
Mailing Address 999 Corporate Boulevard Suite 300

City Linthicum Heights State MD Zip Code 21090-2271

FEC ID number of contributing federal political committee. **C** C00348524

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : A-CF33105

Amount of Each Receipt this Period
 1000

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 186 OF 297
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Alticor PAC

Mailing Address 7575 E Fulton Road

City State Zip Code
Ada MI 49355-0001

FEC ID number of contributing federal political committee. **C** C00034884

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 29 / 2014

Transaction ID : A-CF32403

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Altria Group, Inc. PAC

Mailing Address 101 Constitution Avenue NW
Suite 400W

City State Zip Code
Washington DC 20001-2155

FEC ID number of contributing federal political committee. **C** C00089136

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : A-CF33104

Amount of Each Receipt this Period
2500

C. Full Name (Last, First, Middle Initial)
American Association of Nurse Practitioners PAC

Mailing Address PO Box 12846

City State Zip Code
Austin TX 78711-2846

FEC ID number of contributing federal political committee. **C** C00358903

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 08 / 2014

Transaction ID : A-CF32180

Amount of Each Receipt this Period
1000

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4500.00

**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 187 OF 297
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
American Bakers Association PAC

Mailing Address 1300 I Street NW
Suite 700

City Washington State DC Zip Code 20005-3314

FEC ID number of contributing federal political committee. **C C00016386**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 08 / 2014

Transaction ID : A-CF32181

Amount of Each Receipt this Period
2000

B. Full Name (Last, First, Middle Initial)
American Bankers Association PAC

Mailing Address 1120 Connecticut Avenue NW
Suite 600

City Washington State DC Zip Code 20036-3971

FEC ID number of contributing federal political committee. **C C00004275**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : A-CF33169

Amount of Each Receipt this Period
3000

C. Full Name (Last, First, Middle Initial)
American Family Mutual Insurance Company Federal PAC

Mailing Address 6000 American Parkway

City Madison State WI Zip Code 53783-0001

FEC ID number of contributing federal political committee. **C C00354290**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : A-CF32978

Amount of Each Receipt this Period
500

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5500.00

**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 188 OF 297
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
American Medical Association PAC

Mailing Address 25 Massachusetts Avenue NW
Suite 600

City Washington State DC Zip Code 20001-7400

FEC ID number of contributing federal political committee. **C C00000422**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 18 / 2014

Transaction ID : A-CF32331

Amount of Each Receipt this Period
3000

B. Full Name (Last, First, Middle Initial)
American Natural Gas Alliance Inc PAC

Mailing Address 701 8th Street NW
Suite 800

City Washington State DC Zip Code 20001-3967

FEC ID number of contributing federal political committee. **C C00485250**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2014

Transaction ID : A-CF32895

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
American Quarter Horse Association PAC

Mailing Address PO Box 200

City Amarillo State TX Zip Code 79168-0001

FEC ID number of contributing federal political committee. **C C00409102**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : A-CF32979

Amount of Each Receipt this Period
1000

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 189 OF 297
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. American Soybean Association PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 12125 Wodcrst Exe Drive
 Suite 100
 City Saint Louis State MO Zip Code 63141-5009
 FEC ID number of contributing federal political committee. **C** C00408468
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 10000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : A-CF32980
 Amount of Each Receipt this Period
 2500

B. American Wind Energy Association WindPAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1501 M Street NW
 Floor 10
 City Washington State DC Zip Code 20005-1700
 FEC ID number of contributing federal political committee. **C** C00259572
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 5000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : A-CF32996
 Amount of Each Receipt this Period
 1500

C. Amgen Inc. PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 601 13th Street NW
 Floor 12
 City Washington State DC Zip Code 20005-3819
 FEC ID number of contributing federal political committee. **C** C00251876
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 1500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014
Transaction ID : A-CF33170
 Amount of Each Receipt this Period
 1500

SUBTOTAL of Receipts This Page (optional).....
TOTAL This Period (last page this line number only).....

5500.00

**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 190 OF 297
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Archer Daniels Midland Company PAC

Mailing Address **PO Box 1470**

City **Decatur** State **IL** Zip Code **62525-1820**

FEC ID number of contributing federal political committee. **C C00093963**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : A-CF33102

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Associated Milk Producers Inc. PAC

Mailing Address **PO Box 455**

City **New Ulm** State **MN** Zip Code **56073-0455**

FEC ID number of contributing federal political committee. **C C00330696**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **6000**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 23 / 2014

Transaction ID : A-CF31920

Amount of Each Receipt this Period
2000

C. Full Name (Last, First, Middle Initial)
Associated Milk Producers Inc. PAC

Mailing Address **PO Box 455**

City **New Ulm** State **MN** Zip Code **56073-0455**

FEC ID number of contributing federal political committee. **C C00330696**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **6000**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : A-CF33106

Amount of Each Receipt this Period
2000

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 191 OF 297
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
AT&T Inc. Federal PAC

Mailing Address 208 S Akard Street
Front 2701

City Dallas State TX Zip Code 75202-4295

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 23 / 2014

Transaction ID : A-CF31921

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
AT&T Inc. Federal PAC

Mailing Address 208 S Akard Street
Front 2701

City Dallas State TX Zip Code 75202-4295

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 23 / 2014

Transaction ID : A-CF32948

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
BAE Systems USA Inc. PAC

Mailing Address 1300 17th Street N
Suite 1400

City Arlington State VA Zip Code 22209-3807

FEC ID number of contributing federal political committee. **C** C00281212

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : A-CF33107

Amount of Each Receipt this Period
2000

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4000.00

**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 192 OF 297
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Best Buy Co., Inc Employee Political Forum

Mailing Address 7601 Penn Avenue S

City Richfield State MN Zip Code 55423-3645

FEC ID number of contributing federal political committee. **C** C00405076

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 7500

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : A-CF32981

Amount of Each Receipt this Period
 2500

B. Full Name (Last, First, Middle Initial)
BluePAC - Blue Cross Blue Shield Association PAC

Mailing Address 1310 G Street NW

City Washington State DC Zip Code 20005-3000

FEC ID number of contributing federal political committee. **C** C00194746

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 3500

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 23 / 2014

Transaction ID : A-CF32949

Amount of Each Receipt this Period
 2000

C. Full Name (Last, First, Middle Initial)
Boston Scientific Corporation PAC

Mailing Address 1 Boston Scientific Place

City Natick State MA Zip Code 01760-1536

FEC ID number of contributing federal political committee. **C** C00357863

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 08 / 2014

Transaction ID : A-CF32182

Amount of Each Receipt this Period
 1000

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5500.00

**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 193 OF 297
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Build PAC of The National Association of Home Builders

Full Name (Last, First, Middle Initial)
Mailing Address 1201 15th Street NW

City Washington State DC Zip Code 20005-2899

FEC ID number of contributing federal political committee. **C** C00000901

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7500

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 29 / 2014

Transaction ID : A-CF32404

Amount of Each Receipt this Period
2500

B. Building Owners and Managers Association International PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1101 15th Street NW Suite 800

City Washington State DC Zip Code 20005-5021

FEC ID number of contributing federal political committee. **C** C00106435

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : A-CF33171

Amount of Each Receipt this Period
1000

C. Caterpillar Inc. Employee PAC

Full Name (Last, First, Middle Initial)
Mailing Address 100 NE Adams Street

City Peoria State IL Zip Code 61629-0001

FEC ID number of contributing federal political committee. **C** C00148031

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 23 / 2014

Transaction ID : A-CF31922

Amount of Each Receipt this Period
2000

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5500.00

**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 194 OF 297
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. CHS Inc. PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 5500 Cenex Drive
 City Inver Grove Heights State MN Zip Code 55077-1721
 FEC ID number of contributing federal political committee. **C C00149104**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **3500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 19 / 2014
Transaction ID : A-CF32896
 Amount of Each Receipt this Period
 2500

B. CIGNA Corporation PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 174 Waterfront Street Suite 500
 City Oxon Hill State MD Zip Code 20745-1161
 FEC ID number of contributing federal political committee. **C C00085316**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **2000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 29 / 2014
Transaction ID : A-CF32405
 Amount of Each Receipt this Period
 2000

C. Citigroup Inc. PAC - Federal
 Full Name (Last, First, Middle Initial)
 Mailing Address 1101 Pennsylvania Avenue NW Suite 1000
 City Washington State DC Zip Code 20004-2524
 FEC ID number of contributing federal political committee. **C C00008474**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **7000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014
Transaction ID : A-CF33172
 Amount of Each Receipt this Period
 1000

SUBTOTAL of Receipts This Page (optional).....
TOTAL This Period (last page this line number only).....

5500.00

**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 195 OF 297
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Comcast Corporation PAC

Mailing Address 1701 John F Kennedy Boulevard

City Philadelphia State PA Zip Code 19103-2833

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 3000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 29 / 2014

Transaction ID : A-CF32406

Amount of Each Receipt this Period
 2000

B. Full Name (Last, First, Middle Initial)
Crop Insurance Professionals Association PAC

Mailing Address 228 S Washington Street
Suite 115

City Alexandria State VA Zip Code 22314-5404

FEC ID number of contributing federal political committee. **C** C00503680

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 25 / 2014

Transaction ID : A-CF32983

Amount of Each Receipt this Period
 1000

C. Full Name (Last, First, Middle Initial)
Crop Insurance Research Bureau PAC

Mailing Address 201 Massachusetts Avenue NE
Suite C5

City Washington State DC Zip Code 20002-4988

FEC ID number of contributing federal political committee. **C** C00150805

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 23 / 2014

Transaction ID : A-CF31923

Amount of Each Receipt this Period
 1000

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4000.00

**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 196 OF 297	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
CULAC The PAC Of Credit Union National Association

Mailing Address 601 Pennsylvania Avenue NW
Suite 600

City Washington State DC Zip Code 20004-2601

FEC ID number of contributing federal political committee. **C** C00007880

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 7500

Date of Receipt
M M / D D / Y Y Y Y
09 / 19 / 2014

Transaction ID : A-CF32897

Amount of Each Receipt this Period
2500

B. Full Name (Last, First, Middle Initial)
Darden Restaurants, Inc. Employees Good Government Fund

Mailing Address 1000 Darden Center Drive

City Orlando State FL Zip Code 32837-4032

FEC ID number of contributing federal political committee. **C** C00108282

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 3500

Date of Receipt
M M / D D / Y Y Y Y
08 / 29 / 2014

Transaction ID : A-CF32407

Amount of Each Receipt this Period
2500

C. Full Name (Last, First, Middle Initial)
Dave Scott for House District 21

Mailing Address 37340 286th Street

City Geddes State SD Zip Code 57342-6655

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 250

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : A-CF33181

Amount of Each Receipt this Period
250

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5250.00

**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 197 OF 297
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Delta Dental Plans Association PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1515 W 22nd Street
Suite 450

City Oak Brook State IL Zip Code 60523-8408

FEC ID number of contributing federal political committee. **C** C00213819

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : A-CF33173

Amount of Each Receipt this Period
1000

B. Duke Energy Corporation PAC

Full Name (Last, First, Middle Initial)
Mailing Address 550 S Tryon Street

City Charlotte State NC Zip Code 28202-4200

FEC ID number of contributing federal political committee. **C** C00083535

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : A-CF33041

Amount of Each Receipt this Period
1000

C. Ecolab Inc. PAC

Full Name (Last, First, Middle Initial)
Mailing Address 370 Wabasha Street N

City Saint Paul State MN Zip Code 55102-1323

FEC ID number of contributing federal political committee. **C** C00101485

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8500

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 24 / 2014

Transaction ID : A-CF32950

Amount of Each Receipt this Period
2500

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4500.00

**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 198 OF 297
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Ecolab Inc. PAC

Mailing Address 370 Wabasha Street N

City Saint Paul State MN Zip Code 55102-1323

FEC ID number of contributing federal political committee. **C C00101485**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **8500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 25 / 2014

Transaction ID : A-CF32984

Amount of Each Receipt this Period
 2500

B. Full Name (Last, First, Middle Initial)
Exxon Mobil PAC

Mailing Address 5959 Las Colinas Boulevard

City Irving State TX Zip Code 75039-4202

FEC ID number of contributing federal political committee. **C C00095406**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **7500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 24 / 2014

Transaction ID : A-CF32951

Amount of Each Receipt this Period
 2500

C. Full Name (Last, First, Middle Initial)
Farm Credit Council PAC

Mailing Address 50 F Street NW
Suite 900

City Washington State DC Zip Code 20001-1530

FEC ID number of contributing federal political committee. **C C00193631**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **9000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2014

Transaction ID : A-CF32183

Amount of Each Receipt this Period
 2000

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

7000.00

**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 199 OF 297
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Florida Sugar Cane League PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1301 Pennsylvania Avenue NW
 Suite 401
 City Washington State DC Zip Code 20004-1701
 FEC ID number of contributing federal political committee. **C C00012328**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 1500

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 01 / 2014
Transaction ID : A-CF32056
 Amount of Each Receipt this Period
 500

B. General Dynamics Corporation PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 2941 Fairview Park Drive
 Suite 100
 City Falls Church State VA Zip Code 22042-4541
 FEC ID number of contributing federal political committee. **C C00078451**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 2000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014
Transaction ID : A-CF33108
 Amount of Each Receipt this Period
 1000

C. General Electric Company PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1299 Pennsylvania Avenue NW
 Suite 900W
 City Washington State DC Zip Code 20004-2400
 FEC ID number of contributing federal political committee. **C C00024869**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 6000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014
Transaction ID : A-CF33042
 Amount of Each Receipt this Period
 1000

SUBTOTAL of Receipts This Page (optional).....
TOTAL This Period (last page this line number only).....

2500.00

**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 200 OF 297
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Google Inc. NETPAC

Mailing Address 1101 New York Avenue NW
Floor 2

City Washington State DC Zip Code 20005-4344

FEC ID number of contributing federal political committee. **C C00428623**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : A-CF32985

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Honeywell International PAC

Mailing Address 101 Constitution Avenue NW
Suite 500

City Washington State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C C00096156**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 28 / 2014

Transaction ID : A-CF31956

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Honeywell International PAC

Mailing Address 101 Constitution Avenue NW
Suite 500

City Washington State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C C00096156**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 29 / 2014

Transaction ID : A-CF31960

Amount of Each Receipt this Period
1500

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3500.00

**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 201 OF 297
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Independent Community Bankers Of America PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1615 L Street NW
Suite 900

City Washington State DC Zip Code 20036-5623

FEC ID number of contributing federal political committee. **C C00032698**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 29 / 2014

Transaction ID : A-CF32408

Amount of Each Receipt this Period
1000

B. International Council Of Shopping Centers Inc PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1399 New York Avenue NW
Suite 720

City Washington State DC Zip Code 20005-4778

FEC ID number of contributing federal political committee. **C C00217638**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5500

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : A-CF33109

Amount of Each Receipt this Period
1000

C. K&L Gates LLP PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1601 K Street NW

City Washington State DC Zip Code 20006-1682

FEC ID number of contributing federal political committee. **C C00213173**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 01 / 2014

Transaction ID : A-CF32057

Amount of Each Receipt this Period
1000

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3000.00

**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 202 OF 297
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Leading South Dakota PAC

Full Name (Last, First, Middle Initial)
Mailing Address 221 Lake Ridge Drive

City Wentworth State SD Zip Code 57075-7370

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 29 / 2014

Transaction ID : A-CF32409

Amount of Each Receipt this Period
1000

B. Lockheed Martin Corporation Employees PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1550 Crystal Drive Suite 300

City Arlington State VA Zip Code 22202-4110

FEC ID number of contributing federal political committee. **C C00303024**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **8000**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : A-CF33110

Amount of Each Receipt this Period
1000

C. Lockheed Martin Corporation Employees PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1550 Crystal Drive Suite 300

City Arlington State VA Zip Code 22202-4110

FEC ID number of contributing federal political committee. **C C00303024**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **8000**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : A-CF33174

Amount of Each Receipt this Period
1000

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3000.00

**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 203 OF 297
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Lowes Companies, Inc. PAC

Mailing Address 1000 Lowes Boulevard

City Mooresville State NC Zip Code 28117-8520

FEC ID number of contributing federal political committee. **C C00251751**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **8000**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : A-CF33111

Amount of Each Receipt this Period
 5000

B. Full Name (Last, First, Middle Initial)
Massachusetts Mutual Life Insurance Company PAC

Mailing Address 1295 State Street

City Springfield State MA Zip Code 01111-0001

FEC ID number of contributing federal political committee. **C C00118943**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4000**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : A-CF33175

Amount of Each Receipt this Period
 2000

C. Full Name (Last, First, Middle Initial)
Microsoft Corporation PAC

Mailing Address 16011 NE 36th Way # 97017

City Redmond State WA Zip Code 98052-6301

FEC ID number of contributing federal political committee. **C C00227546**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000**

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 29 / 2014

Transaction ID : A-CF32410

Amount of Each Receipt this Period
 1000

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

8000.00

**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 204 OF 297
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Microsoft Corporation PAC

Mailing Address 16011 NE 36th Way
97017

City Redmond State WA Zip Code 98052-6301

FEC ID number of contributing federal political committee. **C C00227546**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : A-CF32986

Amount of Each Receipt this Period
2000

B. Full Name (Last, First, Middle Initial)
NAIOP PAC

Mailing Address 2201 Cooperative Way
Floor 3

City Herndon State VA Zip Code 20171-4583

FEC ID number of contributing federal political committee. **C C00233304**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : A-CF33112

Amount of Each Receipt this Period
5000

C. Full Name (Last, First, Middle Initial)
National Association of Farm Service Agency County Office Employees Inc PAC

Mailing Address 313 Massachusetts Avenue NE

City Washington State DC Zip Code 20002-5701

FEC ID number of contributing federal political committee. **C C00413567**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : A-CF32987

Amount of Each Receipt this Period
1000

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

8000.00

**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 205 OF 297
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. National Association of Insurance and Financial Advisors PAC

Full Name (Last, First, Middle Initial)
Mailing Address 2901 Telestar Court

City Falls Church State VA Zip Code 22042-1260

FEC ID number of contributing federal political committee. **C** C00005249

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5000

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 23 / 2014

Transaction ID : A-CF31924

Amount of Each Receipt this Period
 2500

B. National Association Of Real Estate Investment Trusts, Inc. PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1875 I Street NW Suite 600

City Washington State DC Zip Code 20006-5413

FEC ID number of contributing federal political committee. **C** C00303339

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2500

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : A-CF32988

Amount of Each Receipt this Period
 2500

C. National Association of Realtors PAC

Full Name (Last, First, Middle Initial)
Mailing Address 430 N Michigan Avenue

City Chicago State IL Zip Code 60611-4011

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 6000

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 29 / 2014

Transaction ID : A-CF32412

Amount of Each Receipt this Period
 2000

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

7000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 206 OF 297
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. National Association Of Wheat Growers PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 415 2nd Street NE
 Suite 300
 City Washington State DC Zip Code 20002-4900
 FEC ID number of contributing federal political committee. **C C00139964**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 2000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 19 / 2014
Transaction ID : A-CF32898
 Amount of Each Receipt this Period
 2000

B. National Beer Wholesalers Association PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1101 King Street
 Suite 600
 City Alexandria State VA Zip Code 22314-2965
 FEC ID number of contributing federal political committee. **C C00144766**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 7000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014
Transaction ID : A-CF33176
 Amount of Each Receipt this Period
 2000

C. National Business Aviation Association Inc PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1200 18th Street NW
 Suite 400
 City Washington State DC Zip Code 20036-2527
 FEC ID number of contributing federal political committee. **C C00319723**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 2000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014
Transaction ID : A-CF33113
 Amount of Each Receipt this Period
 1000

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 207 OF 297
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. National Cable And Telecommunications Association PAC

Full Name (Last, First, Middle Initial)
National Cable And Telecommunications Association PAC

Mailing Address 25 Massachusetts Avenue NW
Suite 100

City Washington State DC Zip Code 20001-1434

FEC ID number of contributing federal political committee. **C** C00010082

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : A-CF33114

Amount of Each Receipt this Period
2000

B. National Corn Growers Association PAC

Full Name (Last, First, Middle Initial)
National Corn Growers Association PAC

Mailing Address 20 F Street NW
Suite 600

City Washington State DC Zip Code 20001-6707

FEC ID number of contributing federal political committee. **C** C00376343

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 25 / 2014

Transaction ID : A-CF32982

Amount of Each Receipt this Period
1500

C. National Federation Of Independent Business/ Save Americas Free Enterprise Trust

Full Name (Last, First, Middle Initial)
National Federation Of Independent Business/ Save Americas Free Enterprise Trust

Mailing Address 1201 F Street NW
Suite 200

City Washington State DC Zip Code 20004-1221

FEC ID number of contributing federal political committee. **C** C00101105

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 08 / 2014

Transaction ID : A-CF32184

Amount of Each Receipt this Period
1000

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4500.00

**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 208 OF 297
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
National Federation Of Independent Business/ Save Americas Free Enterprise Trust

Mailing Address 1201 F Street NW
Suite 200

City Washington State DC Zip Code 20004-1221

FEC ID number of contributing federal political committee. **C C00101105**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 24 / 2014

Transaction ID : A-CF32952

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
National Multi Housing Council PAC

Mailing Address 1850 M Street NW
Suite 540

City Washington State DC Zip Code 20036-5816

FEC ID number of contributing federal political committee. **C C00130773**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : A-CF33178

Amount of Each Receipt this Period
3000

C. Full Name (Last, First, Middle Initial)
National Rifle Association Of America Political Victory Fund

Mailing Address 11250 Waples Mill Road

City Fairfax State VA Zip Code 22030-7400

FEC ID number of contributing federal political committee. **C C00053553**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 24 / 2014

Transaction ID : A-CF32953

Amount of Each Receipt this Period
1000

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 209 OF 297
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. National School Transportation Association PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 113 S West Street
 Floor 4
 City Alexandria State VA Zip Code 22314-2858
 FEC ID number of contributing federal political committee. **C C00179275**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 1000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 24 / 2014
Transaction ID : A-CF32954
 Amount of Each Receipt this Period
 1000

B. National Sorghum Producers PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 4201 N Interstate 27
 City Lubbock State TX Zip Code 79403-7507
 FEC ID number of contributing federal political committee. **C C00475673**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 1500

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014
Transaction ID : A-CF32989
 Amount of Each Receipt this Period
 1000

C. National Stone, Sand & Gravel Association ROCKPAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1605 King Street
 City Alexandria State VA Zip Code 22314-2726
 FEC ID number of contributing federal political committee. **C C00089458**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 4000

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 08 / 2014
Transaction ID : A-CF32185
 Amount of Each Receipt this Period
 1000

SUBTOTAL of Receipts This Page (optional).....
TOTAL This Period (last page this line number only).....

3000.00

**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 210 OF 297
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. National Sunflower PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 2401 46th Avenue SE
 Suite 206
 City Mandan State ND Zip Code 58554-4829
 FEC ID number of contributing federal political committee. **C C00239939**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **2000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 01 / 2014
Transaction ID : A-CF32058
 Amount of Each Receipt this Period
 1000

B. New York Life Insurance Company PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 51 Madison Avenue
 Room 1109
 City New York State NY Zip Code 10010-1603
 FEC ID number of contributing federal political committee. **C C00158881**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **9000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 05 / 2014
Transaction ID : A-CF32567
 Amount of Each Receipt this Period
 4000

C. NextEra Energy, Inc PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 700 Universe Boulevard
 City North Palm Beach State FL Zip Code 33408-2657
 FEC ID number of contributing federal political committee. **C C00064774**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **7000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014
Transaction ID : A-CF33177
 Amount of Each Receipt this Period
 1500

SUBTOTAL of Receipts This Page (optional).....
TOTAL This Period (last page this line number only).....

6500.00

**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 211 OF 297
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Office Of The Commissioner Of Major League Baseball PAC

Full Name (Last, First, Middle Initial)
Office Of The Commissioner Of Major League Baseball PAC

Mailing Address 1050 Connecticut Avenue NW
Suite 1100

City Washington State DC Zip Code 20036-5318

FEC ID number of contributing federal political committee. **C** C00368142

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : A-CF32990

Amount of Each Receipt this Period
 1000

B. Polsinelli Shughart PC PAC

Full Name (Last, First, Middle Initial)
Polsinelli Shughart PC PAC

Mailing Address 700 W 47th Street
Suite 1000

City Kansas City State MO Zip Code 64112-1805

FEC ID number of contributing federal political committee. **C** C00445981

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1500

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : A-CF32991

Amount of Each Receipt this Period
 1500

C. Pricewaterhousecoopers PAC I

Full Name (Last, First, Middle Initial)
Pricewaterhousecoopers PAC I

Mailing Address 1301 K Street NW
Suite 800W

City Washington State DC Zip Code 20005-3317

FEC ID number of contributing federal political committee. **C** C00107235

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 6000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : A-CF33179

Amount of Each Receipt this Period
 1000

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3500.00

**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 212 OF 297
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Printing Industries of America PAC

Mailing Address 601 13th Street NW
Suite 350

City Washington State DC Zip Code 20005-3807

FEC ID number of contributing federal political committee. **C C00018028**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : A-CF33180

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Professional Insurance Agents PAC

Mailing Address 400 N Washington Street

City Alexandria State VA Zip Code 22314-2366

FEC ID number of contributing federal political committee. **C C00004994**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
08 / 29 / 2014

Transaction ID : A-CF32411

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Property Casualty Insurers Association Of America PAC

Mailing Address 2600 S River Road

City Des Plaines State IL Zip Code 60018-3203

FEC ID number of contributing federal political committee. **C C00066472**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
09 / 25 / 2014

Transaction ID : A-CF32992

Amount of Each Receipt this Period
1000

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3000.00

**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 213 OF 297
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Raytheon Company PAC

Mailing Address 1100 Wilson Boulevard
Suite 1500

City State Zip Code
Arlington VA 22209-3900

FEC ID number of contributing federal political committee. **C C00097568**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7500

Date of Receipt
 M M / D D / Y Y Y Y
08 / 08 / 2014

Transaction ID : A-CF32186

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Real Estate Roundtable PAC

Mailing Address 801 Pennsylvania Avenue NW
Suite 720

City State Zip Code
Washington DC 20004-2686

FEC ID number of contributing federal political committee. **C C00033779**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7500

Date of Receipt
 M M / D D / Y Y Y Y
07 / 23 / 2014

Transaction ID : A-CF31925

Amount of Each Receipt this Period
2500

C. Full Name (Last, First, Middle Initial)
Safari Club International PAC

Mailing Address 4800 W Gates Pass Road

City State Zip Code
Tucson AZ 85745-9600

FEC ID number of contributing federal political committee. **C C00122101**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500

Date of Receipt
 M M / D D / Y Y Y Y
09 / 25 / 2014

Transaction ID : A-CF32993

Amount of Each Receipt this Period
2500

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 214 OF 297
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Scalise for Congress
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 23219
 City State Zip Code
 New Orleans LA 70183-0219
 FEC ID number of contributing federal political committee. **C** C00394957
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 2000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2014
Transaction ID : A-CF33043
 Amount of Each Receipt this Period
 2000

B. TE Connectivity, Inc. PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 607 14th Street NW Suite 250
 City State Zip Code
 Washington DC 20005-2072
 FEC ID number of contributing federal political committee. **C** C00433482
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 23 / 2014
Transaction ID : A-CF31926
 Amount of Each Receipt this Period
 1000

C. Texas Farm Bureau Friends of Agriculture Fund Inc PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 2689 7420 Fish Pond Road
 City State Zip Code
 Waco TX 76702-2689
 FEC ID number of contributing federal political committee. **C** C00214981
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 01 / 2014
Transaction ID : A-CF32059
 Amount of Each Receipt this Period
 1000

SUBTOTAL of Receipts This Page (optional).....
TOTAL This Period (last page this line number only).....

4000.00

**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 215 OF 297
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
The Boeing Company PAC

Mailing Address 1200 Wilson Boulevard

City State Zip Code
Arlington VA 22209-2300

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : A-CF33117

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Thompson Coburn PAC

Mailing Address 1909 K Street NW
Suite 600

City State Zip Code
Washington DC 20006-1167

FEC ID number of contributing federal political committee. **C** C00550491

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : A-CF33118

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
UBS Americas Inc. PAC

Mailing Address 400 Atlantic Street
C O Per Dyrvik

City State Zip Code
Stamford CT 06901-3512

FEC ID number of contributing federal political committee. **C** C00012245

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2014

Transaction ID : A-CF32899

Amount of Each Receipt this Period
2500

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4500.00

**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 216 OF 297
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. United Technologies Corporation PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1101 Pennsylvania Avenue NW
 Floor 10
 City Washington State DC Zip Code 20004-2566
 FEC ID number of contributing federal political committee. **C C00035683**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **6000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014
Transaction ID : A-CF33119
 Amount of Each Receipt this Period
 1000

B. Verizon Wireless Good Government Club
 Full Name (Last, First, Middle Initial)
 Mailing Address 1300 I Street NW
 Suite 400
 City Washington State DC Zip Code 20005-3314
 FEC ID number of contributing federal political committee. **C C00186288**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **5000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 29 / 2014
Transaction ID : A-CF32413
 Amount of Each Receipt this Period
 2500

C. Wal-Mart Stores Inc. PAC For Responsible Government
 Full Name (Last, First, Middle Initial)
 Mailing Address 702 SW 8th Street
 City Bentonville State AR Zip Code 72716-6209
 FEC ID number of contributing federal political committee. **C C00093054**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **6000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 19 / 2014
Transaction ID : A-CF32900
 Amount of Each Receipt this Period
 1000

SUBTOTAL of Receipts This Page (optional).....
TOTAL This Period (last page this line number only).....

4500.00

**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 217 OF 297
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Wellpoint, Inc. PAC

Mailing Address 120 Monument Circle

City Indianapolis State IN Zip Code 46204-4906

FEC ID number of contributing federal political committee. **C** C00197228

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : A-CF32994

Amount of Each Receipt this Period
 1000

B. Full Name (Last, First, Middle Initial)
Wells Fargo Employee PAC

Mailing Address Sixth Marquette Mac N9305 # 084

City Minneapolis State MN Zip Code 55479-0001

FEC ID number of contributing federal political committee. **C** C00034595

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 3500

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 08 / 2014

Transaction ID : A-CF32187

Amount of Each Receipt this Period
 2000

C. Full Name (Last, First, Middle Initial)
Williams And Jensen, PLLC PAC

Mailing Address 701 8th Street NW Suite 500

City Washington State DC Zip Code 20001-3965

FEC ID number of contributing federal political committee. **C** C00039206

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 500

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : A-CF32995

Amount of Each Receipt this Period
 500

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3500.00

**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 218 OF 297
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Wine and Spirits Wholesalers of America, Inc. PAC

Mailing Address 805 15th Street NW
Suite 430

City Washington State DC Zip Code 20005-2273

FEC ID number of contributing federal political committee. **C** C00147173

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 23 / 2014

Transaction ID : A-CF31927

Amount of Each Receipt this Period
2500

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2500.00

162250.00

**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 219 OF 297
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
State Farm

Mailing Address 4309 S Louise Avenue

City: Sioux Falls State: SD Zip Code: 57106-2214

FEC ID number of contributing federal political committee: **C**

Name of Employer: _____ Occupation: _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date: _____ **1384**

Date of Receipt: **08 / 15 / 2014**

Transaction ID : A-OF32296

Amount of Each Receipt this Period: _____ **210**

Refund: Insurance

B. Full Name (Last, First, Middle Initial)

Mailing Address

City: _____ State: _____ Zip Code: _____

FEC ID number of contributing federal political committee: **C**

Name of Employer: _____ Occupation: _____

Receipt For:
 Primary General
 Other (specify) _____

Election Cycle-to-Date: _____

Date of Receipt: _____

Amount of Each Receipt this Period: _____

C. Full Name (Last, First, Middle Initial)

Mailing Address

City: _____ State: _____ Zip Code: _____

FEC ID number of contributing federal political committee: **C**

Name of Employer: _____ Occupation: _____

Receipt For:
 Primary General
 Other (specify) _____

Election Cycle-to-Date: _____

Date of Receipt: _____

Amount of Each Receipt this Period: _____

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

_____ **210.00**

_____ **210.00**

**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 220 OF 297
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

Full Name (Last, First, Middle Initial) Meta Bank		Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 2500 S Minnesota Avenue		Transaction ID : A-MF32169
City Sioux Falls	State SD	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 105.03
Name of Employer	Occupation	Interest Income
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1800.9	

Full Name (Last, First, Middle Initial) Meta Bank		Date of Receipt M M / D D / Y Y Y Y 08 / 29 / 2014
Mailing Address 2500 S Minnesota Avenue		Transaction ID : A-MF32811
City Sioux Falls	State SD	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 94.67
Name of Employer	Occupation	Interest Income
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1800.9	

Full Name (Last, First, Middle Initial) Meta Bank		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 2500 S Minnesota Avenue		Transaction ID : A-MF33125
City Sioux Falls	State SD	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 111.19
Name of Employer	Occupation	Interest Income
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1800.9	

SUBTOTAL of Receipts This Page (optional).....	310.89
TOTAL This Period (last page this line number only).....	310.89

**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 221 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Accurate Word LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address PO Box 1765			Amount of Each Disbursement this Period 736.66
City White Plains	State MD	Zip Code 20695-1765	Transaction ID : B-E-31836
Purpose of Disbursement Printing	Category/ Type 001		
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. American Express			Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address PO Box 1270			Amount of Each Disbursement this Period 0.44
City Newark	State NJ	Zip Code 07101-1270	Transaction ID : B-E-31816
Purpose of Disbursement Credit Card Merchant Fee	Category/ Type 001		
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. American Express			Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address PO Box 1270			Amount of Each Disbursement this Period 122.85
City Newark	State NJ	Zip Code 07101-1270	Transaction ID : B-E-32235
Purpose of Disbursement Credit Card Merchant Fee	Category/ Type 001		
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	859.95
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 222 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address PO Box 1270		Amount of Each Disbursement this Period 3.77
City Newark	State NJ	
Zip Code 07101-1270	Purpose of Disbursement Credit Card Merchant Fee	Transaction ID : B-E-32670
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Anedot		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 5555 Hilton Avenue Suite 106		Amount of Each Disbursement this Period 166.07
City Baton Rouge	State LA	
Zip Code 70808-2597	Purpose of Disbursement Credit Card Merchant Fees	Transaction ID : B-E-32170
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Anedot		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2014
Mailing Address 5555 Hilton Avenue Suite 106		Amount of Each Disbursement this Period 70.42
City Baton Rouge	State LA	
Zip Code 70808-2597	Purpose of Disbursement Credit Card Merchant Fees	Transaction ID : B-E-32810
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	240.26
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 223 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Anedot		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 5555 Hilton Avenue Suite 106		Amount of Each Disbursement this Period 457.19 Transaction ID : B-E-33154
City Baton Rouge	State LA Zip Code 70808-2597	
Purpose of Disbursement Credit Card Merchant Fees	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Aramark Services Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 501 E Saint Joseph Street		Amount of Each Disbursement this Period 401.3 Transaction ID : B-E-31356
City Rapid City	State SD Zip Code 57701-3901	
Purpose of Disbursement Catering	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Aristotle International		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 650 Transaction ID : B-E-31727
City Washington	State DC Zip Code 20003-1164	
Purpose of Disbursement Compliance Software	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1508.49
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 224 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Aristotle International		Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2014
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 1300 Transaction ID : B-E-32671
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement Compliance Software Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Broghamer Consulting LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 502 Monroe Street		Amount of Each Disbursement this Period 6064.01 Transaction ID : B-E-31050
City Newport State KY Zip Code 41071-2006	Purpose of Disbursement Compliance Consulting Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Broghamer Consulting LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2014
Mailing Address 502 Monroe Street		Amount of Each Disbursement this Period 3050.74 Transaction ID : B-E-32095
City Newport State KY Zip Code 41071-2006	Purpose of Disbursement Compliance Consulting Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	10414.74
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 225 OF 297	
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Broghamer Consulting LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 502 Monroe Street		Amount of Each Disbursement this Period 3046.28 Transaction ID : B-E-32330
City Newport	State KY	
Zip Code 41071-2006	Purpose of Disbursement Compliance Consulting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2014
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 609.89 Transaction ID : B-E-32813
City Washington	State DC	
Zip Code 20003-1801	Purpose of Disbursement Food/Beverage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Card Center		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address PO Box 740846		Amount of Each Disbursement this Period 4366.26 Transaction ID : B-E-31587
City Cincinnati	State OH	
Zip Code 45274-0846	Purpose of Disbursement Credit Card Payment	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Original vendors exceeding reporting threshold itemized as memo transactions.

SUBTOTAL of Disbursements This Page (optional).....	8022.43
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 226 OF 297	
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. House of Representatives Gift Shop		Date of Disbursement MM / DD / YYYY 07 / 02 / 2014
Mailing Address B-218 Longworth House Office		Amount of Each Disbursement this Period \$ 57
City Washington	State DC	
Zip Code 20004	Purpose of Disbursement Silent Auction Items	Transaction ID : B-S-481
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Card Center(07/02/14)
State: District:		

Full Name (Last, First, Middle Initial) B. Hotel Alex Johnson		Date of Disbursement MM / DD / YYYY 07 / 02 / 2014
Mailing Address 523 6th Street		Amount of Each Disbursement this Period \$ 1050.36
City Rapid City	State SD	
Zip Code 57701-2725	Purpose of Disbursement Travel	Transaction ID : B-S-492
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Card Center(07/02/14)
State: District:		

Full Name (Last, First, Middle Initial) C. Hertz		Date of Disbursement MM / DD / YYYY 07 / 02 / 2014
Mailing Address 225 Brae Boulevard		Amount of Each Disbursement this Period \$ 170.54
City Park Ridge	State NJ	
Zip Code 07656-1870	Purpose of Disbursement Travel	Transaction ID : B-S-480
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Card Center(07/02/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	\$ 0.00
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 227 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Grille 26		Date of Disbursement MM / DD / YYYY 07 / 02 / 2014
Mailing Address 1716 S Western Avenue		Amount of Each Disbursement this Period 28.2
City Sioux Falls	State SD	
Zip Code 57105-1316	Purpose of Disbursement Food/Beverage	Transaction ID : B-S-479
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Card Center(07/02/14)
State: District:		

Full Name (Last, First, Middle Initial) B. South Dakota Republican Party		Date of Disbursement MM / DD / YYYY 07 / 02 / 2014
Mailing Address PO Box 1099		Amount of Each Disbursement this Period 159.24
City Pierre	State SD	
Zip Code 57501-1099	Purpose of Disbursement Event Tickets	Transaction ID : B-S-477
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Card Center(07/02/14)
State: District:		

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement MM / DD / YYYY 07 / 02 / 2014
Mailing Address 500 Staples Drive		Amount of Each Disbursement this Period 60.76
City Framingham	State MA	
Zip Code 01702-4478	Purpose of Disbursement Office Supplies	Transaction ID : B-S-489
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Card Center(07/02/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 228 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. United Air Lines, Inc		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address PO Box 66100		Amount of Each Disbursement this Period 507.5
City Chicago	State IL	Zip Code 60666-0100
Purpose of Disbursement Travel	Category/Type	
Candidate Name	Transaction ID : B-S-493	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Card Center(07/02/14)
State: District:		

Full Name (Last, First, Middle Initial) B. US Postal Service		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 320 S 2nd Avenue		Amount of Each Disbursement this Period 592.63
City Sioux Falls	State SD	Zip Code 57104-7500
Purpose of Disbursement Postage	Category/Type	
Candidate Name	Transaction ID : B-S-494	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Card Center(07/02/14)
State: District:		

Full Name (Last, First, Middle Initial) c. Shell Oil		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 910 Louisiana Street One Shell Plaza		Amount of Each Disbursement this Period 46.32
City Houston	State TX	Zip Code 77002-4916
Purpose of Disbursement Travel	Category/Type	
Candidate Name	Transaction ID : B-S-488	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Card Center(07/02/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 229 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial)
A. AT&T Mobility

Mailing Address PO Box 6463

City Carol Stream State IL Zip Code 60197-6463

Purpose of Disbursement Phone Expense

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 02 / 2014

Amount of Each Disbursement this Period: 337.78

Transaction ID : B-S-472

[MEMO ITEM]
Subitemization of Card Center(07/02/14)

Full Name (Last, First, Middle Initial)
B. Capitol Hill Suites

Mailing Address 200 C Street SE

City Washington State DC Zip Code 20003-1909

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 02 / 2014

Amount of Each Disbursement this Period: 941.19

Transaction ID : B-S-474

[MEMO ITEM]
Subitemization of Card Center(07/02/14)

Full Name (Last, First, Middle Initial)
c. Starbucks

Mailing Address PO Box 34067

City Seattle State WA Zip Code 98124-1067

Purpose of Disbursement Food/Beverage

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 02 / 2014

Amount of Each Disbursement this Period: 5.63

Transaction ID : B-S-490

[MEMO ITEM]
Subitemization of Card Center(07/02/14)

SUBTOTAL of Disbursements This Page (optional) 0.00

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 230 OF 297	
	<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)
Kristi for Congress

A. Card Center

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 740846

City Cincinnati State OH Zip Code 45274-0846

Purpose of Disbursement Credit Card Payment

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 06 / 2014

Amount of Each Disbursement this Period: 4615.6

Transaction ID : B-E-32079

Original vendors exceeding reporting threshold itemized as memo transactions.

B. House of Representatives Gift Shop

Full Name (Last, First, Middle Initial)
Mailing Address B-218 Longworth House Office

City Washington State DC Zip Code 20004

Purpose of Disbursement Silent Auction Items

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 06 / 2014

Amount of Each Disbursement this Period: 57.45

Transaction ID : B-S-528

[MEMO ITEM]
Subitemization of Card Center(08/06/14)

c. Wall Drug

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 401

City Wall State SD Zip Code 57790-0401

Purpose of Disbursement Silent Auction Item

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 06 / 2014

Amount of Each Disbursement this Period: 141.98

Transaction ID : B-S-539

[MEMO ITEM]
Subitemization of Card Center(08/06/14)

SUBTOTAL of Disbursements This Page (optional)..... 4615.60

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 231 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Waldorf Astoria New York		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address 301 Park Avenue		Amount of Each Disbursement this Period 403.97
City New York	State NY	
Zip Code 10022-6844	Purpose of Disbursement Travel	Transaction ID : B-S-538
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Card Center(08/06/14)
State: District:		

Full Name (Last, First, Middle Initial) B. New York Palace Hotel		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address 455 Madison Avenue		Amount of Each Disbursement this Period 419.96
City New York	State NY	
Zip Code 10022-6845	Purpose of Disbursement Travel	Transaction ID : B-S-535
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Card Center(08/06/14)
State: District:		

Full Name (Last, First, Middle Initial) c. Fedex		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address 942 S Shady Grove Road		Amount of Each Disbursement this Period 10.76
City Memphis	State TN	
Zip Code 38120-4117	Purpose of Disbursement Delivery	Transaction ID : B-S-525
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Card Center(08/06/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 232 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Amtrak.com		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address 60 Massachusetts Avenue NE		Amount of Each Disbursement this Period 515.75
City Washington	State DC	
Zip Code 20002-4285	Purpose of Disbursement Travel	Transaction ID : B-S-516
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Card Center(08/06/14)
State: District:		

Full Name (Last, First, Middle Initial) B. Del Frisco's Grille		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address 1201 Pennsylvania Avenue NW		Amount of Each Disbursement this Period 151.3
City Washington	State DC	
Zip Code 20004-2401	Purpose of Disbursement Food/Beverage	Transaction ID : B-S-522
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Card Center(08/06/14)
State: District:		

Full Name (Last, First, Middle Initial) c. Sunshine Foods		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address 530 S 2nd Avenue		Amount of Each Disbursement this Period 8.26
City Sioux Falls	State SD	
Zip Code 57104-6906	Purpose of Disbursement Food/Beverage	Transaction ID : B-S-534
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Card Center(08/06/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 233 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Capitol Hill Club		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 45.37
City Washington	State DC	
Zip Code 20003-1801	Purpose of Disbursement Food/Beverage	Transaction ID : B-S-519
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Card Center(08/06/14)
State: District:		

Full Name (Last, First, Middle Initial) B. Watertown Confectionary		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address 116 E Kemp		Amount of Each Disbursement this Period 95.25
City Watertown	State SD	
Zip Code 57201-3640	Purpose of Disbursement Food/Beverage	Transaction ID : B-S-541
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Card Center(08/06/14)
State: District:		

Full Name (Last, First, Middle Initial) c. Starbucks		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address PO Box 34067		Amount of Each Disbursement this Period 106.3
City Seattle	State WA	
Zip Code 98124-1067	Purpose of Disbursement Food/Beverage	Transaction ID : B-S-533
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Card Center(08/06/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 234 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Capitol Hill Suites		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2014
Mailing Address 200 C Street SE		Amount of Each Disbursement this Period -941.19
City Washington	State DC	
Zip Code 20003-1909	Purpose of Disbursement Credit: Travel	Transaction ID : B-S-520
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Card Center(08/06/14)
State: District:		

Full Name (Last, First, Middle Initial) B. AT&T Mobility		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2014
Mailing Address PO Box 6463		Amount of Each Disbursement this Period 337.29
City Carol Stream	State IL	
Zip Code 60197-6463	Purpose of Disbursement Phone Expense	Transaction ID : B-S-517
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Card Center(08/06/14)
State: District:		

Full Name (Last, First, Middle Initial) C. Fairfield Inn		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2014
Mailing Address 2720 1st Avenue		Amount of Each Disbursement this Period 141.97
City Spearfish	State SD	
Zip Code 57783-3211	Purpose of Disbursement Travel	Transaction ID : B-S-524
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Card Center(08/06/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 235 OF 297	
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Willow Creek Association		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address 67 E Algonquin Road		Amount of Each Disbursement this Period 338
City Barrington	State IL	
Zip Code 60010-6132	Purpose of Disbursement Registration Fee	Transaction ID : B-S-544
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Card Center(08/06/14)
State: District:		

Full Name (Last, First, Middle Initial) B. US Postal Service		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address 320 S 2nd Avenue		Amount of Each Disbursement this Period 1247.94
City Sioux Falls	State SD	
Zip Code 57104-7500	Purpose of Disbursement Postage	Transaction ID : B-S-537
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Card Center(08/06/14)
State: District:		

Full Name (Last, First, Middle Initial) c. United Air Lines, Inc		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address PO Box 66100		Amount of Each Disbursement this Period 65.99
City Chicago	State IL	
Zip Code 60666-0100	Purpose of Disbursement Travel	Transaction ID : B-S-536
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Card Center(08/06/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 236 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Staples		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address 500 Staples Drive		Amount of Each Disbursement this Period 182.63
City Framingham	State MA	
Zip Code 01702-4478	Purpose of Disbursement Office Supplies	Transaction ID : B-S-532
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Card Center(08/06/14)
State: District:		

Full Name (Last, First, Middle Initial) B. Best Buy Co		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address 7601 Penn Avenue S		Amount of Each Disbursement this Period 595.87
City Minneapolis	State MN	
Zip Code 55423-3645	Purpose of Disbursement Office Equipment	Transaction ID : B-S-518
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Card Center(08/06/14)
State: District:		

Full Name (Last, First, Middle Initial) c. Wal-Mart		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address 702 SW 8th Street		Amount of Each Disbursement this Period 120.43
City Bentonville	State AR	
Zip Code 72716-6209	Purpose of Disbursement Parade Candy	Transaction ID : B-S-540
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Card Center(08/06/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 237 OF 297	
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Whiskey Creek Grille		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address 905 E Spruce Street Suite C		Amount of Each Disbursement this Period \$ 31.95
City Mitchell	State SD Zip Code 57301-4866	
Purpose of Disbursement Food/Beverage	Candidate Name	Transaction ID : B-S-543
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] Subitemization of Card Center(08/06/14)

Full Name (Last, First, Middle Initial) B. Hy-Vee, Inc.		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address 5820 Westown Parkway		Amount of Each Disbursement this Period \$ 127.63
City West Des Moines	State IA Zip Code 50266-8223	
Purpose of Disbursement Parade Candy	Candidate Name	Transaction ID : B-S-529
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] Subitemization of Card Center(08/06/14)

Full Name (Last, First, Middle Initial) c. Card Center		Date of Disbursement MM / DD / YYYY 09 / 03 / 2014
Mailing Address PO Box 740846		Amount of Each Disbursement this Period \$ 4954.64
City Cincinnati	State OH Zip Code 45274-0846	
Purpose of Disbursement Credit Card Payment	Candidate Name	Transaction ID : B-E-32320
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type 001	Original vendors exceeding reporting threshold itemized as memo transactions.

SUBTOTAL of Disbursements This Page (optional).....	\$ 4954.64
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 238 OF 297	
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial)
A. House of Representatives Gift Shop

Mailing Address **B-218 Longworth House Office**

City **Washington** State **DC** Zip Code **20004**

Purpose of Disbursement **Fundraising Supplies**

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: **09 / 03 / 2014**

Amount of Each Disbursement this Period: **237**

Transaction ID : **B-S-590**

[MEMO ITEM]
Subitemization of Card Center(09/03/14)

Full Name (Last, First, Middle Initial)
B. Under Armour

Mailing Address **700 President Street**

City **Baltimore** State **MD** Zip Code **21202-4651**

Purpose of Disbursement **Fundraiser Event Supplies**

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: **09 / 03 / 2014**

Amount of Each Disbursement this Period: **423.95**

Transaction ID : **B-S-603**

[MEMO ITEM]
Subitemization of Card Center(09/03/14)

Full Name (Last, First, Middle Initial)
c. Maxwell's Beach Cafe

Mailing Address **37 Lake Drive**

City **Arnolds Park** State **IA** Zip Code **51331-4501**

Purpose of Disbursement **Food/Beverage**

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: **09 / 03 / 2014**

Amount of Each Disbursement this Period: **452.64**

Transaction ID : **B-S-592**

[MEMO ITEM]
Subitemization of Card Center(09/03/14)

SUBTOTAL of Disbursements This Page (optional) **0.00**

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 239 OF 297	
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Fedex		Date of Disbursement MM / DD / YYYY 09 / 03 / 2014
Mailing Address 942 S Shady Grove Road		Amount of Each Disbursement this Period 2.32
City Memphis	State TN	
Zip Code 38120-4117	Purpose of Disbursement Delivery	Transaction ID : B-S-586
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Card Center(09/03/14)
State: District:		

Full Name (Last, First, Middle Initial) B. Hertz		Date of Disbursement MM / DD / YYYY 09 / 03 / 2014
Mailing Address 225 Brae Boulevard		Amount of Each Disbursement this Period 227.72
City Park Ridge	State NJ	
Zip Code 07656-1870	Purpose of Disbursement Travel	Transaction ID : B-S-588
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Card Center(09/03/14)
State: District:		

Full Name (Last, First, Middle Initial) c. Grille 26		Date of Disbursement MM / DD / YYYY 09 / 03 / 2014
Mailing Address 1716 S Western Avenue		Amount of Each Disbursement this Period 348.78
City Sioux Falls	State SD	
Zip Code 57105-1316	Purpose of Disbursement Food/Beverage	Transaction ID : B-S-587
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Card Center(09/03/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 240 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Hy-Vee, Inc.		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 5820 Westown Parkway		Amount of Each Disbursement this Period 198.65
City West Des Moines	State IA	
Zip Code 50266-8223	Purpose of Disbursement Travel	Transaction ID : B-S-591
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Card Center(09/03/14)
State: District:		

Full Name (Last, First, Middle Initial) B. Arrowwood Resort Hotel		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 2100 Arrowwood Lane NW		Amount of Each Disbursement this Period 415.8
City Alexandria	State MN	
Zip Code 56308-9063	Purpose of Disbursement Travel	Transaction ID : B-S-580
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Card Center(09/03/14)
State: District:		

Full Name (Last, First, Middle Initial) c. Wal-Mart		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 702 SW 8th Street		Amount of Each Disbursement this Period 30.91
City Bentonville	State AR	
Zip Code 72716-6209	Purpose of Disbursement Office Supplies	Transaction ID : B-S-608
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Card Center(09/03/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 241 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Staples		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 500 Staples Drive		Amount of Each Disbursement this Period 32.7
City Framingham	State MA Zip Code 01702-4478	
Purpose of Disbursement Office Supplies	Candidate Name	Transaction ID : B-S-598
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] Subitemization of Card Center(09/03/14)

Full Name (Last, First, Middle Initial) B. Shell Oil		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 910 Louisiana Street One Shell Plaza		Amount of Each Disbursement this Period 6.99
City Houston	State TX Zip Code 77002-4916	
Purpose of Disbursement Travel	Candidate Name	Transaction ID : B-S-597
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] Subitemization of Card Center(09/03/14)

Full Name (Last, First, Middle Initial) c. US Postal Service		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 320 S 2nd Avenue		Amount of Each Disbursement this Period 264.6
City Sioux Falls	State SD Zip Code 57104-7500	
Purpose of Disbursement Postage	Candidate Name	Transaction ID : B-S-605
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] Subitemization of Card Center(09/03/14)

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 242 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. The UPS Store		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 55 Glenlake Parkway NE		Amount of Each Disbursement this Period 110.91
City Atlanta	State GA Zip Code 30328-3474	
Purpose of Disbursement Delivery	Category/Type	Transaction ID : B-S-602
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Card Center(09/03/14)
State: District:		

Full Name (Last, First, Middle Initial) B. Famous Daves		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 2700 S Minnesota Avenue		Amount of Each Disbursement this Period 226.34
City Sioux Falls	State SD Zip Code 57105-4733	
Purpose of Disbursement Food/Beverage	Category/Type	Transaction ID : B-S-585
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Card Center(09/03/14)
State: District:		

Full Name (Last, First, Middle Initial) C. Minervas		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 2111 N Lacrosse Street		Amount of Each Disbursement this Period 69.78
City Rapid City	State SD Zip Code 57701-7858	
Purpose of Disbursement Food/Beverage	Category/Type	Transaction ID : B-S-593
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Card Center(09/03/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 243 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. AT&T Mobility		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address PO Box 6463		Amount of Each Disbursement this Period 350.63
City Carol Stream	State IL	
Zip Code 60197-6463	Purpose of Disbursement Phone Service	Transaction ID : B-S-581
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Card Center(09/03/14)
State: District:		

Full Name (Last, First, Middle Initial) B. Scheels		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 2101 W 41st Street		Amount of Each Disbursement this Period 1046.51
City Sioux Falls	State SD	
Zip Code 57105-6102	Purpose of Disbursement Fundraiser Event Supplies	Transaction ID : B-S-596
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Card Center(09/03/14)
State: District:		

Full Name (Last, First, Middle Initial) c. Starbucks		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address PO Box 34067		Amount of Each Disbursement this Period 17.33
City Seattle	State WA	
Zip Code 98124-1067	Purpose of Disbursement Food/Beverage	Transaction ID : B-S-599
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Card Center(09/03/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 244 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Holiday Inn - Rushmore Plaza		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address PO Box 3800		Amount of Each Disbursement this Period 201.35
City Rapid City	State SD	
Zip Code 57709-3800	Purpose of Disbursement Travel	Transaction ID : B-S-589
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Card Center(09/03/14)
State: District:		

Full Name (Last, First, Middle Initial) B. Connect Strategic Communications LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address PO Box 141251		Amount of Each Disbursement this Period 2229.75
City Dallas	State TX	
Zip Code 75214-1251	Purpose of Disbursement Website Development/Advertising	Transaction ID : B-E-31498
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Dynamic Services LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 300 N Dakota Avenue Suite 212		Amount of Each Disbursement this Period 645
City Sioux Falls	State SD	
Zip Code 57104-6023	Purpose of Disbursement Rent	Transaction ID : B-E-31583
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2874.75
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 245 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Dynamic Services LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address 300 N Dakota Avenue Suite 212		Amount of Each Disbursement this Period 9678.69 Transaction ID : B-E-31954
City Sioux Falls	State SD	
Zip Code 57104-6023	Purpose of Disbursement Rent	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Dynamic Services LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 300 N Dakota Avenue Suite 212		Amount of Each Disbursement this Period 9678.69 Transaction ID : B-E-32319
City Sioux Falls	State SD	
Zip Code 57104-6023	Purpose of Disbursement Rent	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Gula Graham		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 499 S Capitol Street SW Suite 420		Amount of Each Disbursement this Period 8488.69 Transaction ID : B-E-31633
City Washington	State DC	
Zip Code 20003-4027	Purpose of Disbursement Finance Consulting Expenses	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	9678.69
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 246 OF 297	
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Gula Graham		Date of Disbursement MM / DD / YYYY 07 / 18 / 2014
Mailing Address 499 S Capitol Street SW Suite 420		Amount of Each Disbursement this Period 9515 Transaction ID : B-E-31835
City Washington State DC Zip Code 20003-4027	Purpose of Disbursement Finance Consulting Candidate Name Category/Type 001	
Office Sought: House Senate President State: District:	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Gula Graham		Date of Disbursement MM / DD / YYYY 08 / 19 / 2014
Mailing Address 499 S Capitol Street SW Suite 420		Amount of Each Disbursement this Period 2881.75 Transaction ID : B-E-32172
City Washington State DC Zip Code 20003-4027	Purpose of Disbursement Finance Consulting Expenses Candidate Name Category/Type 001	
Office Sought: House Senate President State: District:	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Gula Graham		Date of Disbursement MM / DD / YYYY 09 / 03 / 2014
Mailing Address 499 S Capitol Street SW Suite 420		Amount of Each Disbursement this Period 8000 Transaction ID : B-E-32420
City Washington State DC Zip Code 20003-4027	Purpose of Disbursement Finance Consulting Candidate Name Category/Type 001	
Office Sought: House Senate President State: District:	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	20396.75
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 247 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. i360, LLC		Date of Disbursement MM / DD / YYYY 08 / 19 / 2014
Mailing Address PO Box 37046		Amount of Each Disbursement this Period 1500 Transaction ID : B-E-32209
City Baltimore	State MD	
Zip Code 21297-3046	Purpose of Disbursement Subscription	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Integram		Date of Disbursement MM / DD / YYYY 08 / 29 / 2014
Mailing Address 8421 Hilltop Road		Amount of Each Disbursement this Period 3662.39 Transaction ID : B-E-32324
City Fairfax	State VA	
Zip Code 22031-4301	Purpose of Disbursement Postage	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) c. Marchand Travel, LLC		Date of Disbursement MM / DD / YYYY 07 / 02 / 2014
Mailing Address 515 1st Avenue SE		Amount of Each Disbursement this Period 3012.64 Transaction ID : B-E-31470
City Watertown	State SD	
Zip Code 57201-3708	Purpose of Disbursement Travel	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	8175.03
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 248 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. MDI		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address 21955 Cascades Parkway		Amount of Each Disbursement this Period 3603.25
City Sterling	State VA Zip Code 20166-9211	
Purpose of Disbursement Postage	001	Transaction ID : B-E-31746
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. MDI		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2014
Mailing Address 21955 Cascades Parkway		Amount of Each Disbursement this Period 4099.32
City Sterling	State VA Zip Code 20166-9211	
Purpose of Disbursement Postage	001	Transaction ID : B-E-32921
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Meta Bank		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 2500 S Minnesota Avenue		Amount of Each Disbursement this Period 385
City Sioux Falls	State SD Zip Code 57105-4729	
Purpose of Disbursement Bank Fee	001	Transaction ID : B-E-32076
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	8087.57
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 249 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Meta Bank		Date of Disbursement MM / DD / YYYY 08 / 29 / 2014
Mailing Address 2500 S Minnesota Avenue		Amount of Each Disbursement this Period 385 Transaction ID : B-E-32421
City Sioux Falls	State SD	
Zip Code 57105-4729	Purpose of Disbursement Bank Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Meta Bank		Date of Disbursement MM / DD / YYYY 09 / 30 / 2014
Mailing Address 2500 S Minnesota Avenue		Amount of Each Disbursement this Period 385 Transaction ID : B-E-33122
City Sioux Falls	State SD	
Zip Code 57105-4729	Purpose of Disbursement Bank Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Midcontinent Communications		Date of Disbursement MM / DD / YYYY 07 / 02 / 2014
Mailing Address PO Box 5010		Amount of Each Disbursement this Period 100.7 Transaction ID : B-E-31221
City Sioux Falls	State SD	
Zip Code 57117-5010	Purpose of Disbursement Phone/Internet Service	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	870.70
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 250 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Midcontinent Communications		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address PO Box 5010		Amount of Each Disbursement this Period 23.14
City Sioux Falls	State SD	
Zip Code 57117-5010	Purpose of Disbursement Phone Service	Transaction ID : B-E-31361
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Midcontinent Communications		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address PO Box 5010		Amount of Each Disbursement this Period 105.7
City Sioux Falls	State SD	
Zip Code 57117-5010	Purpose of Disbursement Phone Service	Transaction ID : B-E-31742
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Midcontinent Communications		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address PO Box 5010		Amount of Each Disbursement this Period 23.14
City Sioux Falls	State SD	
Zip Code 57117-5010	Purpose of Disbursement Phone Service	Transaction ID : B-E-31897
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	151.98
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 251 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Midcontinent Communications		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2014
Mailing Address PO Box 5010		Amount of Each Disbursement this Period 100.7 Transaction ID : B-E-32205
City Sioux Falls	State SD	
Zip Code 57117-5010	Purpose of Disbursement Phone Service	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Midcontinent Communications		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address PO Box 5010		Amount of Each Disbursement this Period 23.14 Transaction ID : B-E-32317
City Sioux Falls	State SD	
Zip Code 57117-5010	Purpose of Disbursement Phone Service	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Midcontinent Communications		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address PO Box 5010		Amount of Each Disbursement this Period 100.7 Transaction ID : B-E-32683
City Sioux Falls	State SD	
Zip Code 57117-5010	Purpose of Disbursement Phone Service	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	224.54
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 252 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Mini Stor All		Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2014
Mailing Address 501 E 41st Street		Amount of Each Disbursement this Period 62 Transaction ID : B-E-32171
City Sioux Falls	State SD	
Zip Code 57105-5931	Purpose of Disbursement Storage Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Mini Stor All		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address 501 E 41st Street		Amount of Each Disbursement this Period 62 Transaction ID : B-E-31950
City Sioux Falls	State SD	
Zip Code 57105-5931	Purpose of Disbursement Storage Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Mini Stor All		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2014
Mailing Address 501 E 41st Street		Amount of Each Disbursement this Period 62 Transaction ID : B-E-32422
City Sioux Falls	State SD	
Zip Code 57105-5931	Purpose of Disbursement Storage Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	186.00
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 253 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Mini Stor All		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address 501 E 41st Street		Amount of Each Disbursement this Period 62 Transaction ID : B-E-33003
City Sioux Falls	State SD	
Zip Code 57105-5931	Purpose of Disbursement Storage Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Minnehaha County Republicans		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 1601 E 69th Street Suite 308		Amount of Each Disbursement this Period 900 Transaction ID : B-E-31042
City Sioux Falls	State SD	
Zip Code 57108-8322	Purpose of Disbursement Advertising/Event Tickets	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Monarch Sales		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 731 N Cliff Avenue		Amount of Each Disbursement this Period 661.12 Transaction ID : B-E-31293
City Sioux Falls	State SD	
Zip Code 57103-0126	Purpose of Disbursement Printing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1623.12
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 254 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Monarch Sales		Date of Disbursement MM / DD / YYYY 07 / 18 / 2014
Mailing Address 731 N Cliff Avenue		Amount of Each Disbursement this Period 481.24 Transaction ID : B-E-31838
City Sioux Falls	State SD	
Zip Code 57103-0126	Purpose of Disbursement Printing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Monarch Sales		Date of Disbursement MM / DD / YYYY 08 / 05 / 2014
Mailing Address 731 N Cliff Avenue		Amount of Each Disbursement this Period 1321.08 Transaction ID : B-E-31885
City Sioux Falls	State SD	
Zip Code 57103-0126	Purpose of Disbursement Printing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) C. Monarch Sales		Date of Disbursement MM / DD / YYYY 09 / 03 / 2014
Mailing Address 731 N Cliff Avenue		Amount of Each Disbursement this Period 1343.67 Transaction ID : B-E-32318
City Sioux Falls	State SD	
Zip Code 57103-0126	Purpose of Disbursement Printing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	3145.99
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 255 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial)

A. My Fax

Mailing Address 2 Gurdwara Road, Suite 300

City Ottawa K2E 1A2 State Zip Code 99999

Purpose of Disbursement Fax Service 001 Category/Type

Candidate Name

Office Sought: House Senate President Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement 07 / 28 / 2014

Amount of Each Disbursement this Period 10

Transaction ID : B-E-32078

Full Name (Last, First, Middle Initial)

B. My Fax

Mailing Address 2 Gurdwara Road, Suite 300

City Ottawa K2E 1A2 State Zip Code 99999

Purpose of Disbursement Fax Service 001 Category/Type

Candidate Name

Office Sought: House Senate President Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement 08 / 28 / 2014

Amount of Each Disbursement this Period 10

Transaction ID : B-E-32423

Full Name (Last, First, Middle Initial)

C. My Fax

Mailing Address 2 Gurdwara Road, Suite 300

City Ottawa K2E 1A2 State Zip Code 99999

Purpose of Disbursement Fax Service 001 Category/Type

Candidate Name

Office Sought: House Senate President Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement 09 / 29 / 2014

Amount of Each Disbursement this Period 10

Transaction ID : B-E-33123

SUBTOTAL of Disbursements This Page (optional) 30.00

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 256 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Nelson & Nelson CPAs LLP		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 1517 S Minnesota Avenue		Amount of Each Disbursement this Period 58.3 Transaction ID : B-E-32323
City Sioux Falls	State SD	
Zip Code 57105-1750	Purpose of Disbursement Accounting Consulting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Patriot Signage, Inc.		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2014
Mailing Address 1001 2nd Avenue		Amount of Each Disbursement this Period 3182 Transaction ID : B-E-32310
City Dayton	State KY	
Zip Code 41074-1291	Purpose of Disbursement Printing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) c. Paycor		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 644 Linn Street Suite 200		Amount of Each Disbursement this Period 1629.35 Transaction ID : B-E-31732
City Cincinnati	State OH	
Zip Code 45203-1734	Purpose of Disbursement Payroll Taxes	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	4869.65
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 257 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Paycor		M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 644 Linn Street Suite 200		Amount of Each Disbursement this Period 64.13
City Cincinnati	State OH Zip Code 45203-1734	
Purpose of Disbursement Payroll Service	001	Transaction ID : B-E-31733
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. Paycor		M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 644 Linn Street Suite 200		Amount of Each Disbursement this Period 1629.35
City Cincinnati	State OH Zip Code 45203-1734	
Purpose of Disbursement Payroll Taxes	001	Transaction ID : B-E-31888
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. Paycor		M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 644 Linn Street Suite 200		Amount of Each Disbursement this Period 67.63
City Cincinnati	State OH Zip Code 45203-1734	
Purpose of Disbursement Payroll Service	001	Transaction ID : B-E-31889
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1761.11
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 258 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Paycor

Mailing Address 644 Linn Street
Suite 200

City Cincinnati State OH Zip Code 45203-1734

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 01 / 2014

Amount of Each Disbursement this Period: 1629.35

Transaction ID : B-E-32212

Category/Type: 001

Full Name (Last, First, Middle Initial)

B. Paycor

Mailing Address 644 Linn Street
Suite 200

City Cincinnati State OH Zip Code 45203-1734

Purpose of Disbursement Payroll Service

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 01 / 2014

Amount of Each Disbursement this Period: 64.13

Transaction ID : B-E-32213

Category/Type: 001

Full Name (Last, First, Middle Initial)

C. Paycor

Mailing Address 644 Linn Street
Suite 200

City Cincinnati State OH Zip Code 45203-1734

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 15 / 2014

Amount of Each Disbursement this Period: 1951.45

Transaction ID : B-E-32302

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional)..... 3644.93

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 259 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Paycor		M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 644 Linn Street Suite 200		Amount of Each Disbursement this Period
City Cincinnati	State OH	Zip Code 45203-1734
Purpose of Disbursement Payroll Service	Category/Type 001	
Candidate Name	Transaction ID : B-E-32303	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. Paycor		M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 644 Linn Street Suite 200		Amount of Each Disbursement this Period
City Cincinnati	State OH	Zip Code 45203-1734
Purpose of Disbursement Payroll Service	Category/Type 001	
Candidate Name	Transaction ID : B-E-32476	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. Paycor		M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 644 Linn Street Suite 200		Amount of Each Disbursement this Period
City Cincinnati	State OH	Zip Code 45203-1734
Purpose of Disbursement Payroll Taxes	Category/Type 001	
Candidate Name	Transaction ID : B-E-32477	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2067.59
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 260 OF 297	
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Paycor		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2014
Mailing Address 644 Linn Street Suite 200		Amount of Each Disbursement this Period 2148.21
City Cincinnati	State OH Zip Code 45203-1734	
Purpose of Disbursement Payroll Taxes	001	Transaction ID : B-E-32910
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Paycor		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2014
Mailing Address 644 Linn Street Suite 200		Amount of Each Disbursement this Period 64.13
City Cincinnati	State OH Zip Code 45203-1734	
Purpose of Disbursement Payroll Service	001	Transaction ID : B-E-32911
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Public Opinion Strategies		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 214 N Fayette Street		Amount of Each Disbursement this Period 7200
City Alexandria	State VA Zip Code 22314-2433	
Purpose of Disbursement Survey Research	001	Transaction ID : B-E-31288
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	9412.34
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 261 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Public Parking Facilities		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address PO Box 2788		Amount of Each Disbursement this Period 47.7
City Sioux Falls	State SD	Zip Code 57101-2788
Purpose of Disbursement Parking	Category/ Type 001	
Candidate Name	Transaction ID : B-E-31357	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Public Parking Facilities		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address PO Box 2788		Amount of Each Disbursement this Period 47.7
City Sioux Falls	State SD	Zip Code 57101-2788
Purpose of Disbursement Parking Service	Category/ Type 001	
Candidate Name	Transaction ID : B-E-31893	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Public Parking Facilities		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address PO Box 2788		Amount of Each Disbursement this Period 47.7
City Sioux Falls	State SD	Zip Code 57101-2788
Purpose of Disbursement Parking Service	Category/ Type 001	
Candidate Name	Transaction ID : B-E-32316	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	143.10
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 262 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Qualified Presort Service, LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address PO Box 85010		Amount of Each Disbursement this Period 109.2 Transaction ID : B-E-31222
City Sioux Falls	State SD	
Zip Code 57118-5010	Purpose of Disbursement Personnel Service	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Qualified Presort Service, LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address PO Box 85010		Amount of Each Disbursement this Period 109.2 Transaction ID : B-E-31731
City Sioux Falls	State SD	
Zip Code 57118-5010	Purpose of Disbursement Personnel Service	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Qualified Presort Service, LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2014
Mailing Address PO Box 85010		Amount of Each Disbursement this Period 114.4 Transaction ID : B-E-32174
City Sioux Falls	State SD	
Zip Code 57118-5010	Purpose of Disbursement Personnel Service	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	332.80
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 263 OF 297	
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Sioux Falls Area Chamber of Commerce		Date of Disbursement MM / DD / YYYY 07 / 02 / 2014
Mailing Address PO Box 1425		Amount of Each Disbursement this Period 716.28 Transaction ID : B-E-31291
City Sioux Falls	State SD	
Zip Code 57101-1425	Purpose of Disbursement Registration Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Sisson Printing, Inc.		Date of Disbursement MM / DD / YYYY 08 / 05 / 2014
Mailing Address 3500 S Duluth Avenue		Amount of Each Disbursement this Period 441.28 Transaction ID : B-E-31886
City Sioux Falls	State SD	
Zip Code 57105-6416	Purpose of Disbursement Printing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. South Dakota Department of Agriculture		Date of Disbursement MM / DD / YYYY 07 / 10 / 2014
Mailing Address 523 E Capitol Avenue		Amount of Each Disbursement this Period 100 Transaction ID : B-E-31826
City Pierre	State SD	
Zip Code 57501-3182	Purpose of Disbursement List Purchase	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	716.28
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 264 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. South Dakota Department of Agriculture			Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address 523 E Capitol Avenue			Amount of Each Disbursement this Period 275 Transaction ID : B-E-31827
City Pierre	State SD	Zip Code 57501-3182	
Purpose of Disbursement List Purchase		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. South Dakota Real Estate Commission			Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address 221 W Capitol Avenue Suite 101			Amount of Each Disbursement this Period 250 Transaction ID : B-E-31830
City Pierre	State SD	Zip Code 57501-2408	
Purpose of Disbursement List Purchase		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) C. South Dakota Screen Printers			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 3617 N 1st Avenue			Amount of Each Disbursement this Period 6090.76 Transaction ID : B-E-31834
City Sioux Falls	State SD	Zip Code 57104-0707	
Purpose of Disbursement Printing		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional).....	6615.76
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 265 OF 297	
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. South Dakota State Board of Dentistry		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address PO Box 1079		Amount of Each Disbursement this Period 600 Transaction ID : B-E-31828
City Pierre State SD Zip Code 57501-1079	Purpose of Disbursement List Purchase Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. South Dakota State Treasurer		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address PO Box 5055		Amount of Each Disbursement this Period 7593.09 Transaction ID : B-E-31748
City Sioux Falls State SD Zip Code 57117-5055	Purpose of Disbursement Usage Tax Payment Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) c. State Farm		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 4309 S Louise Avenue		Amount of Each Disbursement this Period 411 Transaction ID : B-E-31358
City Sioux Falls State SD Zip Code 57106-2214	Purpose of Disbursement Insurance Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

SUBTOTAL of Disbursements This Page (optional)	8604.09
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 266 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. State Farm		Date of Disbursement MM / DD / YYYY 07 / 07 / 2014
Mailing Address 4309 S Louise Avenue		Amount of Each Disbursement this Period 59.08 Transaction ID : B-E-31815
City Sioux Falls	State SD	
Zip Code 57106-2214	Purpose of Disbursement Insurance	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. State Farm		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address 4309 S Louise Avenue		Amount of Each Disbursement this Period 59.08 Transaction ID : B-E-32234
City Sioux Falls	State SD	
Zip Code 57106-2214	Purpose of Disbursement Insurance	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) c. State Farm		Date of Disbursement MM / DD / YYYY 09 / 04 / 2014
Mailing Address 4309 S Louise Avenue		Amount of Each Disbursement this Period 14.4 Transaction ID : B-E-32669
City Sioux Falls	State SD	
Zip Code 57106-2214	Purpose of Disbursement Insurance	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	132.56
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 267 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Sunshine Foods		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 530 S 2nd Avenue		Amount of Each Disbursement this Period 360.75 Transaction ID : B-E-32327
City Sioux Falls	State SD	
Zip Code 57104-6906	Purpose of Disbursement Food/Beverage	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. The Lukens Company		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 2800 S Shirlington Road		Amount of Each Disbursement this Period 16625.66 Transaction ID : B-E-31585
City Arlington	State VA	
Zip Code 22206-3601	Purpose of Disbursement Printing/Postage	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. The Lukens Company		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 2800 S Shirlington Road		Amount of Each Disbursement this Period 16959.18 Transaction ID : B-E-31586
City Arlington	State VA	
Zip Code 22206-3601	Purpose of Disbursement Printing/Postage	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	33945.59
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 268 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. The Lukens Company		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2014
Mailing Address 2800 S Shirlington Road		Amount of Each Disbursement this Period 9,999.99 8852.65
City Arlington	State VA	
Zip Code 22206-3601	Purpose of Disbursement Postage/Printing	Transaction ID : B-E-32173
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. The Printers, Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 510 S 1st Avenue		Amount of Each Disbursement this Period 9,999.99 21.2
City Sioux Falls	State SD	
Zip Code 57104-6902	Purpose of Disbursement Printing	Transaction ID : B-E-31360
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. The Printers, Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 510 S 1st Avenue		Amount of Each Disbursement this Period 9,999.99 270.15
City Sioux Falls	State SD	
Zip Code 57104-6902	Purpose of Disbursement Printing	Transaction ID : B-E-31747
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	9144.00
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 269 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. The Printers, Inc.		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2014
Mailing Address 510 S 1st Avenue		Amount of Each Disbursement this Period 144.33 Transaction ID : B-E-32210
City Sioux Falls	State SD	
Zip Code 57104-6902	Purpose of Disbursement Printing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. The Printers, Inc.		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 510 S 1st Avenue		Amount of Each Disbursement this Period 270.26 Transaction ID : B-E-32325
City Sioux Falls	State SD	
Zip Code 57104-6902	Purpose of Disbursement Printing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) c. Transfirst		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address 1393 Veterans Highway		Amount of Each Disbursement this Period 370.79 Transaction ID : B-E-31814
City Hauppauge	State NY	
Zip Code 11788-3042	Purpose of Disbursement Credit Card Merchant Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	785.38
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 270 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Transfirst		Date of Disbursement MM / DD / YYYY 08 / 11 / 2014
Mailing Address 1393 Veterans Highway		Amount of Each Disbursement this Period 9242.19 Transaction ID : B-E-32311
City Hauppauge State NY Zip Code 11788-3042	Purpose of Disbursement Credit Card Merchant Fee 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Transfirst		Date of Disbursement MM / DD / YYYY 09 / 10 / 2014
Mailing Address 1393 Veterans Highway		Amount of Each Disbursement this Period 108.99 Transaction ID : B-E-32795
City Hauppauge State NY Zip Code 11788-3042	Purpose of Disbursement Credit Card Merchant Fee 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Triumph Campaigns		Date of Disbursement MM / DD / YYYY 07 / 02 / 2014
Mailing Address PO Box 12243		Amount of Each Disbursement this Period 8828 Transaction ID : B-E-31289
City Jackson State MS Zip Code 39236-2243	Purpose of Disbursement Political Strategy/Research Consulting 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	9242.19
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 271 OF 297	
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. W W Tire Bryant		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address Box 22, Main St.		Amount of Each Disbursement this Period 212 Transaction ID : B-E-31636
City Bryant	State SD	
Zip Code 57221	Purpose of Disbursement Facility Rental	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Andrew Christianson		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address PO Box 852		Amount of Each Disbursement this Period 524.25 Transaction ID : B-E-31372
City Sioux Falls	State SD	
Zip Code 57101-0852	Purpose of Disbursement Travel Reimbursement	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Original vendors exceeding reporting threshold itemized as memo transactions.

Full Name (Last, First, Middle Initial) C. Costco		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 3700 S Grange Avenue		Amount of Each Disbursement this Period 142.99 Transaction ID : B-S-464
City Sioux Falls	State SD	
Zip Code 57105-6359	Purpose of Disbursement Food/Beverage	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	[MEMO ITEM] Subitemization of Andrew Christianson(07/02/14)

SUBTOTAL of Disbursements This Page (optional).....	736.25
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 272 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Callaways		Date of Disbursement MM / DD / YYYY 07 / 02 / 2014
Mailing Address PO Box 89021		Amount of Each Disbursement this Period 17.2
City Sioux Falls	State SD	
Zip Code 57109-9021	Purpose of Disbursement Food/Beverage	Transaction ID : B-S-463
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Andrew Christianson(07/02/14)
State: District:		

Full Name (Last, First, Middle Initial) B. Hertz		Date of Disbursement MM / DD / YYYY 07 / 02 / 2014
Mailing Address 225 Brae Boulevard		Amount of Each Disbursement this Period 267.42
City Park Ridge	State NJ	
Zip Code 07656-1870	Purpose of Disbursement Travel	Transaction ID : B-S-469
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Andrew Christianson(07/02/14)
State: District:		

Full Name (Last, First, Middle Initial) c. Lewis Drug		Date of Disbursement MM / DD / YYYY 07 / 02 / 2014
Mailing Address 500 W 41st Street		Amount of Each Disbursement this Period 3.87
City Sioux Falls	State SD	
Zip Code 57105-6402	Purpose of Disbursement Printing/Postage	Transaction ID : B-S-465
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Andrew Christianson(07/02/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 273 OF 297	
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Shell Oil		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 910 Louisiana Street One Shell Plaza		Amount of Each Disbursement this Period 5.63
City Houston	State TX Zip Code 77002-4916	
Purpose of Disbursement Food/Beverage	Category/Type 001	Transaction ID : B-S-466
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Andrew Christianson(07/02/14)
State: District:		

Full Name (Last, First, Middle Initial) B. Andrew Christianson		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address PO Box 852		Amount of Each Disbursement this Period 1680.39
City Sioux Falls	State SD Zip Code 57101-0852	
Purpose of Disbursement Payroll	Category/Type 001	Transaction ID : B-E-31734
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Andrew Christianson		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address PO Box 852		Amount of Each Disbursement this Period 436.15
City Sioux Falls	State SD Zip Code 57101-0852	
Purpose of Disbursement Parade Candy Reimbursement	Category/Type 001	Transaction ID : B-E-31837
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2116.54
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 274 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Costco		Date of Disbursement MM / DD / YYYY 07 / 18 / 2014
Mailing Address 3700 S Grange Avenue		Amount of Each Disbursement this Period 402.5
City Sioux Falls	State SD	
Zip Code 57105-6359	Purpose of Disbursement Parade Candy	Transaction ID : B-S-503
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Andrew Christianson(07/18/14)
State: District:		

Full Name (Last, First, Middle Initial) B. Starbucks		Date of Disbursement MM / DD / YYYY 07 / 18 / 2014
Mailing Address PO Box 34067		Amount of Each Disbursement this Period 2.41
City Seattle	State WA	
Zip Code 98124-1067	Purpose of Disbursement Food/Beverage	Transaction ID : B-S-502
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Andrew Christianson(07/18/14)
State: District:		

Full Name (Last, First, Middle Initial) C. Andrew Christianson		Date of Disbursement MM / DD / YYYY 07 / 18 / 2014
Mailing Address PO Box 852		Amount of Each Disbursement this Period 1680.39
City Sioux Falls	State SD	
Zip Code 57101-0852	Purpose of Disbursement Payroll	Transaction ID : B-E-31890
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1680.39
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 275 OF 297	
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Andrew Christianson		Date of Disbursement MM / DD / YYYY 08 / 01 / 2014
Mailing Address PO Box 852		Amount of Each Disbursement this Period 1680.39
City Sioux Falls	State SD	
Zip Code 57101-0852	Purpose of Disbursement Payroll	Transaction ID : B-E-32214
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Andrew Christianson		Date of Disbursement MM / DD / YYYY 08 / 15 / 2014
Mailing Address PO Box 852		Amount of Each Disbursement this Period 2097.43
City Sioux Falls	State SD	
Zip Code 57101-0852	Purpose of Disbursement Payroll	Transaction ID : B-E-32304
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Andrew Christianson		Date of Disbursement MM / DD / YYYY 08 / 19 / 2014
Mailing Address PO Box 852		Amount of Each Disbursement this Period 617.32
City Sioux Falls	State SD	
Zip Code 57101-0852	Purpose of Disbursement Travel Reimbursement	Transaction ID : B-E-32307
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4395.14
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 276 OF 297	
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Costco		Date of Disbursement MM / DD / YYYY 08 / 19 / 2014
Mailing Address 3700 S Grange Avenue		Amount of Each Disbursement this Period 259.29
City Sioux Falls	State SD	
Zip Code 57105-6359	Purpose of Disbursement Parade Candy	Transaction ID : B-S-551
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Andrew Christianson(08/19/14)
State: District:		

Full Name (Last, First, Middle Initial) B. Andrew Christianson		Date of Disbursement MM / DD / YYYY 08 / 19 / 2014
Mailing Address PO Box 852		Amount of Each Disbursement this Period 215
City Sioux Falls	State SD	
Zip Code 57101-0852	Purpose of Disbursement Mileage Reimbursement	Transaction ID : B-S-546
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Andrew Christianson(08/19/14)
State: District:		

Full Name (Last, First, Middle Initial) c. Spezia Restaurant		Date of Disbursement MM / DD / YYYY 08 / 19 / 2014
Mailing Address 4801 S Louise Avenue		Amount of Each Disbursement this Period 12
City Sioux Falls	State SD	
Zip Code 57106-3158	Purpose of Disbursement Event Ticket	Transaction ID : B-S-547
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Andrew Christianson(08/19/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 277 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. OfficeMax		Date of Disbursement MM / DD / YYYY 08 / 19 / 2014
Mailing Address 263 Shuman Boulevard		Amount of Each Disbursement this Period 16.5
City Naperville	State IL Zip Code 60563-8147	
Purpose of Disbursement Office Supplies	Candidate Name	Transaction ID : B-S-549
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] Subitemization of Andrew Christianson(08/19/14)

Full Name (Last, First, Middle Initial) B. Best Buy Co		Date of Disbursement MM / DD / YYYY 08 / 19 / 2014
Mailing Address 7601 Penn Avenue S		Amount of Each Disbursement this Period 35.84
City Minneapolis	State MN Zip Code 55423-3645	
Purpose of Disbursement Office Equipment	Candidate Name	Transaction ID : B-S-548
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] Subitemization of Andrew Christianson(08/19/14)

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement MM / DD / YYYY 08 / 19 / 2014
Mailing Address 500 Staples Drive		Amount of Each Disbursement this Period 11.11
City Framingham	State MA Zip Code 01702-4478	
Purpose of Disbursement Office Supplies	Candidate Name	Transaction ID : B-S-553
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] Subitemization of Andrew Christianson(08/19/14)

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 278 OF 297	
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Andrew Christianson		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address PO Box 852		Amount of Each Disbursement this Period 2097.43 Transaction ID : B-E-32479
City Sioux Falls	State SD	
Zip Code 57101-0852	Purpose of Disbursement Payroll	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Andrew Christianson		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2014
Mailing Address PO Box 852		Amount of Each Disbursement this Period 2097.43 Transaction ID : B-E-32912
City Sioux Falls	State SD	
Zip Code 57101-0852	Purpose of Disbursement Payroll	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Ashley Flynn		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address PO Box 852		Amount of Each Disbursement this Period 1718.49 Transaction ID : B-E-31735
City Sioux Falls	State SD	
Zip Code 57101-0852	Purpose of Disbursement Payroll	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	5913.35
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 279 OF 297	
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Ashley Flynn		Date of Disbursement MM / DD / YYYY 07 / 18 / 2014
Mailing Address PO Box 852		Amount of Each Disbursement this Period 144.74
City Sioux Falls	State SD	
Zip Code 57101-0852	Purpose of Disbursement Travel Reimbursement	Transaction ID : B-E-31737
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) B. Ashley Flynn		Date of Disbursement MM / DD / YYYY 07 / 18 / 2014
Mailing Address PO Box 852		Amount of Each Disbursement this Period 144.74
City Sioux Falls	State SD	
Zip Code 57101-0852	Purpose of Disbursement Mileage Reimbursement	Transaction ID : B-S-496
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Ashley Flynn(07/18/14)
State: District:		

Full Name (Last, First, Middle Initial) c. Ashley Flynn		Date of Disbursement MM / DD / YYYY 07 / 18 / 2014
Mailing Address PO Box 852		Amount of Each Disbursement this Period 1718.49
City Sioux Falls	State SD	
Zip Code 57101-0852	Purpose of Disbursement Payroll	Transaction ID : B-E-31891
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1863.23
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 280 OF 297	
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Ashley Flynn		Date of Disbursement MM / DD / YYYY 08 / 01 / 2014
Mailing Address PO Box 852		Amount of Each Disbursement this Period 1718.49 Transaction ID : B-E-32215
City Sioux Falls	State SD	
Zip Code 57101-0852	Purpose of Disbursement Payroll	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Ashley Flynn		Date of Disbursement MM / DD / YYYY 08 / 15 / 2014
Mailing Address PO Box 852		Amount of Each Disbursement this Period 1718.49 Transaction ID : B-E-32305
City Sioux Falls	State SD	
Zip Code 57101-0852	Purpose of Disbursement Payroll	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) c. Ashley Flynn		Date of Disbursement MM / DD / YYYY 08 / 19 / 2014
Mailing Address PO Box 852		Amount of Each Disbursement this Period 107.97 Transaction ID : B-E-32211
City Sioux Falls	State SD	
Zip Code 57101-0852	Purpose of Disbursement Mileage Reimbursement	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	3544.95
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 281 OF 297			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Ashley Flynn		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address PO Box 852		Amount of Each Disbursement this Period 1718.49
City Sioux Falls	State SD	
Zip Code 57101-0852	Purpose of Disbursement Payroll	Transaction ID : B-E-32481
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Ashley Flynn		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address PO Box 852		Amount of Each Disbursement this Period 725.7
City Sioux Falls	State SD	
Zip Code 57101-0852	Purpose of Disbursement Travel/Event Ticket Reimbursement	Transaction ID : B-E-32321
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) c. Ashley Flynn		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address PO Box 852		Amount of Each Disbursement this Period 202.7
City Sioux Falls	State SD	
Zip Code 57101-0852	Purpose of Disbursement Mileage Reimbursement	Transaction ID : B-S-557
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Ashley Flynn(09/03/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2444.19
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 282 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. The UPS Store		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 55 Glenlake Parkway NE		Amount of Each Disbursement this Period 72.64
City Atlanta	State GA	
Zip Code 30328-3474	Purpose of Disbursement Delivery	Transaction ID : B-S-558
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		Subitemization of Ashley Flynn(09/03/14)

Full Name (Last, First, Middle Initial) B. US Postal Service		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 320 S 2nd Avenue		Amount of Each Disbursement this Period 78.04
City Sioux Falls	State SD	
Zip Code 57104-7500	Purpose of Disbursement Postage	Transaction ID : B-S-572
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		Subitemization of Ashley Flynn(09/03/14)

Full Name (Last, First, Middle Initial) c. Dakotafest		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 2300 Spruce Street		Amount of Each Disbursement this Period 250
City Mitchell	State SD	
Zip Code 57301	Purpose of Disbursement Event Tickets	Transaction ID : B-S-556
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		Subitemization of Ashley Flynn(09/03/14)

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 283 OF 297			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Ashley Flynn		Date of Disbursement MM / DD / YYYY 09 / 17 / 2014
Mailing Address PO Box 852		Amount of Each Disbursement this Period 2133.04 Transaction ID : B-E-32913
City Sioux Falls	State SD	
Zip Code 57101-0852	Purpose of Disbursement Payroll	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Mary Beth Hollatz		Date of Disbursement MM / DD / YYYY 07 / 18 / 2014
Mailing Address PO Box 852		Amount of Each Disbursement this Period 331 Transaction ID : B-E-31738
City Sioux Falls	State SD	
Zip Code 57101-0852	Purpose of Disbursement Travel Reimbursement	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) c. Mary Beth Hollatz		Date of Disbursement MM / DD / YYYY 07 / 18 / 2014
Mailing Address PO Box 852		Amount of Each Disbursement this Period 301 Transaction ID : B-S-497
City Sioux Falls	State SD	
Zip Code 57101-0852	Purpose of Disbursement Mileage Reimbursement	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	[MEMO ITEM] Subitemization of Mary Beth Hollatz(07/18/14)
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	2464.04
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 284 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Roxy Howe		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 46092 238th Street		Amount of Each Disbursement this Period 725.08 Transaction ID : B-E-32322
City Wentworth	State SD	
Purpose of Disbursement Catering		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Tom J. Kauer		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 27143 316th Ave		Amount of Each Disbursement this Period 360 Transaction ID : B-I-33153
City Winner	State SD	
Purpose of Disbursement Inkind: Catering		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Kristi Lynn Noem		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address PO Box 852		Amount of Each Disbursement this Period 156.15 Transaction ID : B-E-31469
City Sioux Falls	State SD	
Purpose of Disbursement Travel Reimbursement		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1241.23
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 285 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Kristi Lynn Noem		Date of Disbursement MM / DD / YYYY 07 / 02 / 2014
Mailing Address PO Box 852		Amount of Each Disbursement this Period 407
City Sioux Falls	State SD	
Zip Code 57101-0852	Purpose of Disbursement Mileage Reimbursement	Transaction ID : B-S-470
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Kristi Noem(07/02/14)
State: District:		

Full Name (Last, First, Middle Initial) B. Kristi Lynn Noem		Date of Disbursement MM / DD / YYYY 07 / 18 / 2014
Mailing Address PO Box 852		Amount of Each Disbursement this Period 407
City Sioux Falls	State SD	
Zip Code 57101-0852	Purpose of Disbursement Travel Reimbursement	Transaction ID : B-E-31745
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) C. Kristi Lynn Noem		Date of Disbursement MM / DD / YYYY 07 / 18 / 2014
Mailing Address PO Box 852		Amount of Each Disbursement this Period 407
City Sioux Falls	State SD	
Zip Code 57101-0852	Purpose of Disbursement Mileage Reimbursement	Transaction ID : B-S-499
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Kristi Noem(07/18/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	407.00
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 286 OF 297		
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Kristi Lynn Noem		Date of Disbursement MM / DD / YYYY 08 / 19 / 2014
Mailing Address PO Box 852		Amount of Each Disbursement this Period 309.1 Transaction ID : B-E-32309
City Sioux Falls	State SD	
Zip Code 57101-0852	Purpose of Disbursement Mileage Reimbursement	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Charles Soderstrom		Date of Disbursement MM / DD / YYYY 07 / 22 / 2014
Mailing Address 409 Genius Drive		Amount of Each Disbursement this Period 607.16 Transaction ID : B-I-31894
City Winter Park	State FL	
Zip Code 32789-5109	Purpose of Disbursement Inkind: Catering	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Tyler Stenberg		Date of Disbursement MM / DD / YYYY 07 / 02 / 2014
Mailing Address PO Box 852		Amount of Each Disbursement this Period 1203.26 Transaction ID : B-E-31637
City Sioux Falls	State SD	
Zip Code 57101-0852	Purpose of Disbursement Travel Reimbursement	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1203.26
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 287 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Tyler Stenberg		Date of Disbursement MM / DD / YYYY 07 / 02 / 2014
Mailing Address PO Box 852		Amount of Each Disbursement this Period 309.1
City Sioux Falls	State SD	
Zip Code 57101-0852	Purpose of Disbursement Mileage Reimbursement	Transaction ID : B-S-471
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Tyler Stenberg(07/02/14)
State: District:		

Full Name (Last, First, Middle Initial) B. Tyler Stenberg		Date of Disbursement MM / DD / YYYY 07 / 02 / 2014
Mailing Address PO Box 852		Amount of Each Disbursement this Period 1024.53
City Sioux Falls	State SD	
Zip Code 57101-0852	Purpose of Disbursement Payroll	Transaction ID : B-E-31736
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Tyler Stenberg		Date of Disbursement MM / DD / YYYY 07 / 18 / 2014
Mailing Address PO Box 852		Amount of Each Disbursement this Period 937.04
City Sioux Falls	State SD	
Zip Code 57101-0852	Purpose of Disbursement Travel Reimbursement	Transaction ID : B-E-31839
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1961.57
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 288 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Tyler Stenberg		Date of Disbursement MM / DD / YYYY 07 / 18 / 2014
Mailing Address PO Box 852		Amount of Each Disbursement this Period 392
City Sioux Falls	State SD	Zip Code 57101-0852
Purpose of Disbursement Mileage Reimbursement	Category/ Type 001	
Candidate Name		Transaction ID : B-S-505 [MEMO ITEM] Subitemization of Tyler Stenberg(07/18/14)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Wal-Mart		Date of Disbursement MM / DD / YYYY 07 / 18 / 2014
Mailing Address 702 SW 8th Street		Amount of Each Disbursement this Period 8.45
City Bentonville	State AR	Zip Code 72716-6209
Purpose of Disbursement Sunscreen	Category/ Type 001	
Candidate Name		Transaction ID : B-S-512 [MEMO ITEM] Subitemization of Tyler Stenberg(07/18/14)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Fairfield Inn		Date of Disbursement MM / DD / YYYY 07 / 18 / 2014
Mailing Address 2720 1st Avenue		Amount of Each Disbursement this Period 289.36
City Spearfish	State SD	Zip Code 57783-3211
Purpose of Disbursement Travel	Category/ Type	
Candidate Name		Transaction ID : B-S-513 [MEMO ITEM] Subitemization of Tyler Stenberg(07/18/14)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 289 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Tyler Stenberg		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address PO Box 852		Amount of Each Disbursement this Period 1024.53 Transaction ID : B-E-31892
City Sioux Falls	State SD	
Zip Code 57101-0852	Purpose of Disbursement Payroll	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Tyler Stenberg		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address PO Box 852		Amount of Each Disbursement this Period 1024.53 Transaction ID : B-E-32812
City Sioux Falls	State SD	
Zip Code 57101-0852	Purpose of Disbursement Payroll	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Tyler Stenberg		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address PO Box 852		Amount of Each Disbursement this Period 1024.53 Transaction ID : B-E-32306
City Sioux Falls	State SD	
Zip Code 57101-0852	Purpose of Disbursement Payroll	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3073.53
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 290 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Tyler Stenberg		Date of Disbursement MM / DD / YYYY 08 / 19 / 2014
Mailing Address PO Box 852		Amount of Each Disbursement this Period 236 Transaction ID : B-E-32308
City Sioux Falls	State SD	
Zip Code 57101-0852	Purpose of Disbursement Mileage Reimbursement	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Tyler Stenberg		Date of Disbursement MM / DD / YYYY 09 / 02 / 2014
Mailing Address PO Box 852		Amount of Each Disbursement this Period 1024.53 Transaction ID : B-E-32483
City Sioux Falls	State SD	
Zip Code 57101-0852	Purpose of Disbursement Payroll	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Tyler Stenberg		Date of Disbursement MM / DD / YYYY 09 / 03 / 2014
Mailing Address PO Box 852		Amount of Each Disbursement this Period 392.66 Transaction ID : B-E-32419
City Sioux Falls	State SD	
Zip Code 57101-0852	Purpose of Disbursement Mileage/Markers/Cable Ties Reimbursement	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1653.19
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 291 OF 297			
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Tyler Stenberg		Date of Disbursement MM / DD / YYYY 09 / 03 / 2014
Mailing Address PO Box 852		Amount of Each Disbursement this Period 243
City Sioux Falls	State SD	
Zip Code 57101-0852	Purpose of Disbursement Mileage Reimbursement	Transaction ID : B-S-569
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Tyler Stenberg(09/03/14)
State: District:		

Full Name (Last, First, Middle Initial) B. Hy-Vee, Inc.		Date of Disbursement MM / DD / YYYY 09 / 03 / 2014
Mailing Address 5820 Westown Parkway		Amount of Each Disbursement this Period 13.16
City West Des Moines	State IA	
Zip Code 50266-8223	Purpose of Disbursement Food/Beverage	Transaction ID : B-S-564
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Tyler Stenberg(09/03/14)
State: District:		

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement MM / DD / YYYY 09 / 03 / 2014
Mailing Address 500 Staples Drive		Amount of Each Disbursement this Period 7.42
City Framingham	State MA	
Zip Code 01702-4478	Purpose of Disbursement Markers	Transaction ID : B-S-568
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Tyler Stenberg(09/03/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 292 OF 297			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Starbucks		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address PO Box 34067		Amount of Each Disbursement this Period 16
City Seattle	State WA	Zip Code 98124-1067
Purpose of Disbursement Food/Beverage	Category/ Type	
Candidate Name	Transaction ID : B-S-565	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Tyler Stenberg(09/03/14)
State: District:		

Full Name (Last, First, Middle Initial) B. Tyler Stenberg		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address PO Box 852		Amount of Each Disbursement this Period 271.78
City Sioux Falls	State SD	Zip Code 57101-0852
Purpose of Disbursement Cable Ties/Markers/Mileage Reimbursement	Category/ Type 001	
Candidate Name	Transaction ID : B-E-32806	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) c. Tyler Stenberg		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address PO Box 852		Amount of Each Disbursement this Period 170.5
City Sioux Falls	State SD	Zip Code 57101-0852
Purpose of Disbursement Mileage Reimbursement	Category/ Type	
Candidate Name	Transaction ID : B-S-579	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Tyler Stenberg(09/15/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	271.78
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 293 OF 297	
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. US Postal Service		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 320 S 2nd Avenue		Amount of Each Disbursement this Period 5.8
City Sioux Falls	State SD	
Zip Code 57104-7500	Purpose of Disbursement Postage	Transaction ID : B-S-573
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Tyler Stenberg(09/15/14)
State: District:		

Full Name (Last, First, Middle Initial) B. Staples		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 500 Staples Drive		Amount of Each Disbursement this Period 5.61
City Framingham	State MA	
Zip Code 01702-4478	Purpose of Disbursement Markers	Transaction ID : B-S-577
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Tyler Stenberg(09/15/14)
State: District:		

Full Name (Last, First, Middle Initial) c. Tyler Stenberg		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2014
Mailing Address PO Box 852		Amount of Each Disbursement this Period 1024.53
City Sioux Falls	State SD	
Zip Code 57101-0852	Purpose of Disbursement Payroll	Transaction ID : B-E-32914
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1024.53
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 294 OF 297	
	<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)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Jordan P. Stoick		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 6134 Ramshorn Drive		Amount of Each Disbursement this Period 994.7
City Mclean State VA Zip Code 22101-2332	Purpose of Disbursement Travel Reimbursement Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B-E-32326
		Original vendors exceeding reporting threshold itemized as memo transactions.

Full Name (Last, First, Middle Initial) B. Expedia, Inc		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 333 108th Avenue NE		Amount of Each Disbursement this Period 994.7
City Bellevue State WA Zip Code 98004-5703	Purpose of Disbursement Travel Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B-S-561
		[MEMO ITEM] Subitemization of Jordan Stoick(09/03/14)

Full Name (Last, First, Middle Initial) C.		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)	

SUBTOTAL of Disbursements This Page (optional).....	994.70
TOTAL This Period (last page this line number only).....	214467.54

**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 295 OF 297			
	<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				

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NAME OF COMMITTEE (In Full)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Northwest Beverage		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address PO Box 398		Amount of Each Disbursement this Period 500 Transaction ID : B-E-33116
City Mobridge	State SD	
Zip Code 57601-0398	Purpose of Disbursement Contribution Refund	Category/ Type 010
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Schlomer Construction		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 812 7th Avenue W		Amount of Each Disbursement this Period 500 Transaction ID : B-E-33145
City Mobridge	State SD	
Zip Code 57601-1916	Purpose of Disbursement Contribution Refund	Category/ Type 010
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. James R. Hanson		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address PO Box 190		Amount of Each Disbursement this Period 25 Transaction ID : B-E-31359
City Bison	State SD	
Zip Code 57620-0190	Purpose of Disbursement Contribution Refund	Category/ Type 010
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1025.00
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 296 OF 297			
	<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				

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NAME OF COMMITTEE (In Full)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. James R. Hanson		Date of Disbursement MM / DD / YYYY 08 / 19 / 2014
Mailing Address PO Box 190		Amount of Each Disbursement this Period 50 Transaction ID : B-E-32208
City Bison	State SD	
Zip Code 57620-0190	Purpose of Disbursement Contribution Refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Mark R. Peterson		Date of Disbursement MM / DD / YYYY 08 / 19 / 2014
Mailing Address 928 Spyglass Circle		Amount of Each Disbursement this Period 1000 Transaction ID : B-E-32207
City Dakota Dunes	State SD	
Zip Code 57049-5101	Purpose of Disbursement Contribution Refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Marian D. Sullivan		Date of Disbursement MM / DD / YYYY 09 / 30 / 2014
Mailing Address PO Box 5361		Amount of Each Disbursement this Period 200 Transaction ID : B-E-33061
City Sioux Falls	State SD	
Zip Code 57117-5361	Purpose of Disbursement Contribution Refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	2275.00

**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 297 OF 297
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

Full Name (Last, First, Middle Initial) A. Cantor for Congress		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address PO Box 17813		Amount of Each Disbursement this Period 2000 Transaction ID : B-E-31499
City Richmond	State VA	
Zip Code 23226-7813	Purpose of Disbursement Political Contribution	Category/ Type 011
Candidate Name Eric Cantor	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: VA District: 07	

Full Name (Last, First, Middle Initial) B. National Republican Congressional Committee		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address 320 1st Street SE		Amount of Each Disbursement this Period 50000 Transaction ID : B-E-31833
City Washington	State DC	
Zip Code 20003-1838	Purpose of Disbursement Political Contribution	Category/ Type 011
Candidate Name National Republican Congressional Committee	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. South Dakota Republican Party		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address PO Box 1099		Amount of Each Disbursement this Period 18500 Transaction ID : B-E-32684
City Pierre	State SD	
Zip Code 57501-1099	Purpose of Disbursement Political Contribution	Category/ Type 011
Candidate Name South Dakota Republican Party	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	70500.00
TOTAL This Period (last page this line number only).....	70500.00