

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Friends of Erik Paulsen

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))....	406701.50	1509176.20
(b) Total Contribution Refunds (from Line 20(d))	0.00	5700.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	406701.50	1503476.20
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	192844.88	850062.37
(b) Total Offsets to Operating Expenditures (from Line 14).....	21.51	97.51
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	192823.37	849964.86
8. Cash on Hand at Close of Reporting Period (from Line 27).....	2048614.26	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Friends of Erik Paulsen

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).....	267818.50	839124.21
(ii) Unitemized.....	2133.00	11527.00
(iii) TOTAL of contributions from individuals ▶	269951.50	850651.21
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	136750.00	658524.99
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	406701.50	1509176.20
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	6546.98
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	21.51	97.51
15. OTHER RECEIPTS (Dividends, Interest, etc.)	671.67	4654.23
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	407394.68	1520474.92

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	192844.88	850062.37
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	27100.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	5700.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	5700.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	192844.88	882862.37

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1834064.46
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	407394.68
25. SUBTOTAL (add Line 23 and Line 24).....	2241459.14
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	192844.88
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	2048614.26

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

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

FOR LINE NUMBER: PAGE 5 OF 172
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
HENRY PLAIN

Mailing Address P.O. BOX 1095

City State Zip Code
PEBBLE BEACH CA 93953-1095

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

Name of Employer Occupation
LIGHTSTONE VENTURES VENTURE CAPITALIST

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 01 / 2015

Transaction ID : SA11.34281

Amount of Each Receipt this Period
 5400.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
HENRY PLAIN

Mailing Address P.O. BOX 1095

City State Zip Code
PEBBLE BEACH CA 93953-1095

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

Name of Employer Occupation
LIGHTSTONE VENTURES VENTURE CAPITALIST

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 01 / 2015

Transaction ID : SA11.34281B

Amount of Each Receipt this Period
 -2700.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

C. Full Name (Last, First, Middle Initial)
HENRY PLAIN

Mailing Address P.O. BOX 1095

City State Zip Code
PEBBLE BEACH CA 93953-1095

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

Name of Employer Occupation
LIGHTSTONE VENTURES VENTURE CAPITALIST

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 01 / 2015

Transaction ID : SA11.35227

Amount of Each Receipt this Period
 2700.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

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

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

5400.00

**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 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
LISA PLAIN

Mailing Address P.O. BOX 1095

City PEBBLE BEACH State CA Zip Code 93953-1095

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

Name of Employer HOME Occupation HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 01 / 2015

Transaction ID : SA11.34282

Amount of Each Receipt this Period
 5400.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LISA PLAIN

Mailing Address P.O. BOX 1095

City PEBBLE BEACH State CA Zip Code 93953-1095

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

Name of Employer HOME Occupation HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 01 / 2015

Transaction ID : SA11.34282B

Amount of Each Receipt this Period
 -2700.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

C. Full Name (Last, First, Middle Initial)
LISA PLAIN

Mailing Address P.O. BOX 1095

City PEBBLE BEACH State CA Zip Code 93953-1095

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

Name of Employer HOME Occupation HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 01 / 2015

Transaction ID : SA11.35237

Amount of Each Receipt this Period
 2700.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

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

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

5400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
MARGARET TRAISER

Mailing Address 8805 TAMIAMI TRL N #145

City: NAPLES State: FL Zip Code: 34108-2525

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

Name of Employer: SELF Occupation: SELF

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 4500.00

Date of Receipt: 10 / 06 / 2015

Transaction ID : SA11.34306

Amount of Each Receipt this Period: 2500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MARGARET TRAISER

Mailing Address 8805 TAMIAMI TRL N #145

City: NAPLES State: FL Zip Code: 34108-2525

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

Name of Employer: SELF Occupation: SELF

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 4500.00

Date of Receipt: 10 / 06 / 2015

Transaction ID : SA11.34306B

Amount of Each Receipt this Period: -1800.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

C. Full Name (Last, First, Middle Initial)
MARGARET TRAISER

Mailing Address 8805 TAMIAMI TRL N #145

City: NAPLES State: FL Zip Code: 34108-2525

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

Name of Employer: SELF Occupation: SELF

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 4500.00

Date of Receipt: 10 / 06 / 2015

Transaction ID : SA11.35239

Amount of Each Receipt this Period: 1800.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

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: PAGE 8 OF 172
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
PATRICK BURKE

Mailing Address 17735 82ND AVE N

City State Zip Code
MAPLE GROVE MN 55311-1732

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

Name of Employer Occupation
XCEL ENERGY INC. NUCLEAR VP PROJECTS

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 07 / 2015

Transaction ID : SA11.34307

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JIM DUCHARME

Mailing Address 55 CLAY CLIFFE DRIVE

City State Zip Code
EXCELSIOR MN 55331-9510

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

Name of Employer Occupation
PRIME THERAPEUTICS CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 13 / 2015

Transaction ID : SA11.34540

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WARREN HERREID

Mailing Address 4305 TRILLIUM WAY

City State Zip Code
MINNETONKA MN 55364-7708

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 13 / 2015

Transaction ID : SA11.35125

Amount of Each Receipt this Period
 5400.00
 CONTRIBUTION

REFUNDED \$5,400.00 ON 10/13/2015

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

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

6400.00

**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 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
FRANK PRAGER

Mailing Address 11652 E. BERRY AVE.

City State Zip Code
ENGLEWOOD CO 80111-4155

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

Name of Employer Occupation
XCEL ENERGY EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 13 2015

Transaction ID : SA11.34542

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. JEANNINE M. RIVET

Mailing Address 4305 TRILLIUM WAY

City State Zip Code
MINNETRISTA MN 55364-7708

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

Name of Employer Occupation
UHG EXEC

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 13 2015

Transaction ID : SA11.35124

Amount of Each Receipt this Period
 5400.00

CONTRIBUTION

REFUNDED \$5,400.00 ON 10/13/2015

C. Full Name (Last, First, Middle Initial)
MARVIN MCDANIEL

Mailing Address 2454 CASTLE BUTTE DR.

City State Zip Code
CASTLE ROCK CO 80109-9570

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

Name of Employer Occupation
XCEL ENERGY CAO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 14 2015

Transaction ID : SA11.34543

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

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

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

6150.00

**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 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
BEN G. FOWKE III

Mailing Address **75 CLAY CLIFFE DRIVE**

City **TONKA BAY** State **MN** Zip Code **55331-9510**

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

Name of Employer **XCEL ENERGY, INC.** Occupation **CHAIRMAN, PRESIDENT & CEO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 15 / 2015

Transaction ID : SA11.34544

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
KENT LARSON

Mailing Address **1034 SHERWOOD RD.**

City **SHOREVIEW** State **MN** Zip Code **55126-8429**

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

Name of Employer **XCEL ENERGY** Occupation **EXECUTIVE**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 15 / 2015

Transaction ID : SA11.34546

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MANDEEP SODHI

Mailing Address **2515 NORTH SHORE DR**

City **WAYZATA** State **MN** Zip Code **55391-9350**

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

Name of Employer **SELF** Occupation **SALES**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 15 / 2015

Transaction ID : SA11.34545

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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 11 OF 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
DON WENDELL

Mailing Address **4457 CHRISTENSEN CIRCLE**

City **LITTLETON** State **CO** Zip Code **80123-6521**

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

Name of Employer **XCEL ENERGY** Occupation **ACCOUNTANT/AUDITOR**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 15 / 2015

Transaction ID : SA11.34547

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SCOTT WILENSKY

Mailing Address **1120 2ND ST. SOUTH UNIT 911**

City **MINNEAPOLIS** State **MN** Zip Code **55415-1398**

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

Name of Employer **XCEL ENERGY** Occupation **GENERAL COUNSEL**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 16 / 2015

Transaction ID : SA11.34548

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MICHAEL HAYDEN

Mailing Address **6704 PARKWOOD LANE**

City **EDINA** State **MN** Zip Code **55436-1736**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 19 / 2015

Transaction ID : SA11.34549

Amount of Each Receipt this Period
2700.00
 CONTRIBUTION

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

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

3450.00

**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 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
MICHAEL HAYDEN

Mailing Address **6704 PARKWOOD LANE**

City **EDINA** State **MN** Zip Code **55436-1736**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
10 / 19 / 2015

Transaction ID : SA11.34549B

Amount of Each Receipt this Period
-2700.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

B. Full Name (Last, First, Middle Initial)
MICHAEL HAYDEN

Mailing Address **6704 PARKWOOD LANE**

City **EDINA** State **MN** Zip Code **55436-1736**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
10 / 19 / 2015

Transaction ID : SA11.35246

Amount of Each Receipt this Period
2700.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

C. Full Name (Last, First, Middle Initial)
JUDY M. POFERL

Mailing Address **1322 GLEN ROAD**

City **NEWPORT** State **MN** Zip Code **55055-1627**

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

Name of Employer **XCEL ENERGY** Occupation **MANAGEMENT**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
10 / 19 / 2015

Transaction ID : SA11.34551

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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 13 OF 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
DAN NYGAARD

Mailing Address 17097 217TH AVE NW

City State Zip Code
BIG LAKE MN 55309-4875

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

Name of Employer Occupation
XCEL ENERGY VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 20 / 2015

Transaction ID : SA11.34552

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JEFF SAVAGE

Mailing Address 6229 FOX MEADOW LANE

City State Zip Code
EDINA MN 55436-1161

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

Name of Employer Occupation
XCEL ENERGY CPA

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 20 / 2015

Transaction ID : SA11.34554

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
GEORGE E. TYSON II

Mailing Address 7414 MOCCASIN TRAIL

City State Zip Code
CHANHASSEN MN 55317-7551

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

Name of Employer Occupation
XCEL ENERGY INC. SVP, CORPORATE DEVELOPMENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 20 / 2015

Transaction ID : SA11.34553

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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: PAGE 14 OF 172
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
CHRISTOPHER CLARK

Mailing Address 6800 CHAPEL LN

City Edina State MN Zip Code 55439-1719

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

Name of Employer Occupation
NORTHERN STATES POWER COMPANY MN PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2015

Transaction ID : SA11.34555

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WARD W. BREHM

Mailing Address 430 S BROWN ROAD

City Wayzata State MN Zip Code 55391-9314

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2015

Transaction ID : SA11.34558

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WARD W. BREHM

Mailing Address 430 S BROWN ROAD

City Wayzata State MN Zip Code 55391-9314

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2015

Transaction ID : SA11.34558B

Amount of Each Receipt this Period
 -800.00
 CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO GENERAL

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: PAGE 15 OF 172
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
WARD W. BREHM

Mailing Address **430 S BROWN ROAD**

City **WAYZATA** State **MN** Zip Code **55391-9314**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **3500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 22 / 2015

Transaction ID : SA11.35264

Amount of Each Receipt this Period
800.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

B. Full Name (Last, First, Middle Initial)
WARREN HERREID

Mailing Address **4305 TRILLIUM WAY**

City **MINNETONKA** State **MN** Zip Code **55364-7708**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 22 / 2015

Transaction ID : SA11.34556

Amount of Each Receipt this Period
4400.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WARREN HERREID

Mailing Address **4305 TRILLIUM WAY**

City **MINNETONKA** State **MN** Zip Code **55364-7708**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 22 / 2015

Transaction ID : SA11.34556B

Amount of Each Receipt this Period
-2700.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

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 16 OF 172
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) WARREN HERREID		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 22 / 2015
Mailing Address 4305 TRILLIUM WAY		Transaction ID : SA11.35266
City MINNETONKA	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	[MEMO ITEM] REDESIGNATION FROM PRIMARY

Full Name (Last, First, Middle Initial) MS. JEANNINE M. RIVET		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 22 / 2015
Mailing Address 4305 TRILLIUM WAY		Transaction ID : SA11.34557
City MINNETRISTA	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3400.00
Name of Employer UHG	Occupation EXEC	CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	

Full Name (Last, First, Middle Initial) MS. JEANNINE M. RIVET		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 22 / 2015
Mailing Address 4305 TRILLIUM WAY		Transaction ID : SA11.34557B
City MINNETRISTA	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -2700.00
Name of Employer UHG	Occupation EXEC	CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	[MEMO ITEM] REDESIGNATION TO GENERAL

SUBTOTAL of Receipts This Page (optional).....	3400.00
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 17 OF 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
MS. JEANNINE M. RIVET

Mailing Address 4305 TRILLIUM WAY

City State Zip Code
MINNETRISTA MN 55364-7708

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

Name of Employer Occupation
UHG EXEC

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 22 / 2015

Transaction ID : SA11.35229

Amount of Each Receipt this Period
2700.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

B. Full Name (Last, First, Middle Initial)
MICHAEL SIME

Mailing Address 3095 N SHORE DRIVE

City State Zip Code
WAYZATA MN 55391-9256

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

Name of Employer Occupation
RAPID PACKAGING EXEC.

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 27 / 2015

Transaction ID : SA11.34561

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BARB ANDERSON

Mailing Address 465 LAKEVIEW AVE

City State Zip Code
TONKA BAY MN 55331-9549

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

Name of Employer Occupation
EMERSON CONSULTANTS CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 28 / 2015

Transaction ID : SA11.34627

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

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 18 OF 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
BARB ANDERSON

Mailing Address **465 LAKEVIEW AVE**

City **TONKA BAY** State **MN** Zip Code **55331-9549**

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

Name of Employer **EMERSON CONSULTANTS** Occupation **CEO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 28 / 2015

Transaction ID : SA11.34627B

Amount of Each Receipt this Period

-300.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

B. Full Name (Last, First, Middle Initial)
BARB ANDERSON

Mailing Address **465 LAKEVIEW AVE**

City **TONKA BAY** State **MN** Zip Code **55331-9549**

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

Name of Employer **EMERSON CONSULTANTS** Occupation **CEO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 28 / 2015

Transaction ID : SA11.35205

Amount of Each Receipt this Period

300.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

C. Full Name (Last, First, Middle Initial)
BRAD BAKKEN

Mailing Address **2525 THOROUGHbred LN**

City **ORONO** State **MN** Zip Code **55356-9678**

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

Name of Employer **CITIZENS INDEPENDENT BANK** Occupation **PRESIDENT & CEO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 28 / 2015

Transaction ID : SA11.34624

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

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

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 19 OF 172
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) BRAD BAKKEN		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 28 / 2015
Mailing Address 2525 THOROUGHbred LN		Transaction ID : SA11.34624B
City ORONO	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -300.00
Name of Employer CITIZENS INDEPENDENT BANK	Occupation PRESIDENT & CEO	CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00	[MEMO ITEM] REDESIGNATION TO GENERAL

Full Name (Last, First, Middle Initial) BRAD BAKKEN		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 28 / 2015
Mailing Address 2525 THOROUGHbred LN		Transaction ID : SA11.35207
City ORONO	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer CITIZENS INDEPENDENT BANK	Occupation PRESIDENT & CEO	CONTRIBUTION
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00	[MEMO ITEM] REDESIGNATION FROM PRIMARY

Full Name (Last, First, Middle Initial) DOUGLAS BARR		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 28 / 2015
Mailing Address 10511 CEDAR LAKE RD APT 201 10511 CEDAR LAKE RD APT 201		Transaction ID : SA11.34567
City HOPKINS	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer NO EMPLOYER	Occupation ENGINEER RETIRED	CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 325.00	

SUBTOTAL of Receipts This Page (optional).....	75.00
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 20 OF 172
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) DOUG COLEMAN		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 28 / 2015
Mailing Address 140 S BROWN RD		Transaction ID : SA11.34621
City LONG LAKE	State MN	Zip Code 55356-9134
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00 CONTRIBUTION	
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00	

Full Name (Last, First, Middle Initial) PAUL EHLEN		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 28 / 2015
Mailing Address 6993 KENMARE DR. SUITE 80		Transaction ID : SA11.34628
City BLOOMINGTON	State MN	Zip Code 55438-2831
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2000.00 CONTRIBUTION	
Name of Employer PRECISION LENS	Occupation BUSINESS OWNER	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) KARIN M. HERMAN		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 28 / 2015
Mailing Address 12300 54TH AVE N. 12300 54TH AVE N		Transaction ID : SA11.34574
City PLYMOUTH	State MN	Zip Code 55442-1887
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00 CONTRIBUTION	
Name of Employer SELF	Occupation FINANCIAL SERVICES	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

SUBTOTAL of Receipts This Page (optional).....	2350.00
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: PAGE 21 OF 172
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
KRISTIN JOHNSON
 Mailing Address 8719 FLAMINGO DR.
 City State Zip Code
 CHANHASSEN MN 55317-8544
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AMERIPRISE PARAPLANNER
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 28 2015
Transaction ID : SA11.34619
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BARRY LAZARUS
 Mailing Address 1716 COLFAX AVE S
 1716 COLFAX AVE S
 City State Zip Code
 MINNEAPOLIS MN 55403-3001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF CONSULTANT
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 28 2015
Transaction ID : SA11.34583
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
EVAN MIGDAIL
 Mailing Address 7219 DELFIELD ST
 City State Zip Code
 CHEVY CHASE MD 20815-4045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFFC
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 28 2015
Transaction ID : SA11.34629
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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 22 OF 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
JONATHAN MUSBURGER

Mailing Address 8735 N BAY DR.

City CHANHASSEN State MN Zip Code 55317-7624

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

Name of Employer GENERAL MILLS Occupation BAKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **392.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2015

Transaction ID : SA11.34617

Amount of Each Receipt this Period
 20.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JONATHAN MUSBURGER

Mailing Address 8735 N BAY DR.

City CHANHASSEN State MN Zip Code 55317-7624

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

Name of Employer GENERAL MILLS Occupation BAKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **392.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2015

Transaction ID : SA11.34620

Amount of Each Receipt this Period
 115.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
GLEN NELSON

Mailing Address 500 TONKAWA RD

City LONG LAKE State MN Zip Code 55356-9724

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

Name of Employer GDN HOLDINGS Occupation SELF-EMPLOYED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2015

Transaction ID : SA11.34632

Amount of Each Receipt this Period
 2000.00

CONTRIBUTION

SEE REATTRIBUTION

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

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

2135.00

**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 172
	<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	

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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
GLEN NELSON

Mailing Address 500 TONKAWA RD

City State Zip Code
LONG LAKE MN 55356-9724

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

Name of Employer Occupation
GDN HOLDINGS SELF-EMPLOYED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 28 / 2015

Transaction ID : SA11.34632B

Amount of Each Receipt this Period
-1000.00

CONTRIBUTION

[MEMO ITEM]
REATTRIBUTION TO SPOUSE

B. Full Name (Last, First, Middle Initial)
MARILYN NELSON

Mailing Address 500 TONKAWA RD

City State Zip Code
ORONO MN 55356-9724

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

Name of Employer Occupation
CARLSON COMPANIES CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 28 / 2015

Transaction ID : SA11.35288

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

[MEMO ITEM]
REATTRIBUTION FROM SPOUSE

C. Full Name (Last, First, Middle Initial)
MARILYN NELSON

Mailing Address 500 TONKAWA RD

City State Zip Code
ORONO MN 55356-9724

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

Name of Employer Occupation
CARLSON COMPANIES CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 28 / 2015

Transaction ID : SA11.35288B

Amount of Each Receipt this Period
-800.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO GENERAL

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

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

0.00

**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 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
MARILYN NELSON

Mailing Address 500 TONKAWA RD

City ORONO State MN Zip Code 55356-9724

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

Name of Employer CARLSON COMPANIES Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2015

Transaction ID : SA11.35291

Amount of Each Receipt this Period
800.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

B. Full Name (Last, First, Middle Initial)
ROB ROBERT PAULSON

Mailing Address 1045 SETTLERS RD

City HAMEL State MN Zip Code 55340-4613

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

Name of Employer NEXTERRA Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2015

Transaction ID : SA11.34622

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
RICHARD PETKOFF

Mailing Address 16681 MAYFIELD DR.

City EDEN PRAIRIE State MN Zip Code 55347-2245

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2015

Transaction ID : SA11.34626

Amount of Each Receipt this Period
1600.00

CONTRIBUTION

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 25 OF 172
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) ANDREA WALSH		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 28 / 2015
Mailing Address 7212 FLEETWOOD DR.		Transaction ID : SA11.34623
City EDINA	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer HEALTHPARTNERS	Occupation VP & CMO	CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) MR. STEPHEN G. WENZEL		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 28 / 2015
Mailing Address P.O. BOX 285 PO BOX 285		Transaction ID : SA11.34625
City LITTLE FALLS	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer USDA	Occupation DIRECTOR	CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) RON WHITMAN		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 28 / 2015
Mailing Address 6617 HARLAN DR. 6617 HARLAN DR.		Transaction ID : SA11.34593
City EDEN PRAIRIE	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED	CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 700.00	

SUBTOTAL of Receipts This Page (optional).....	1750.00
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: PAGE 26 OF 172
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
PAUL RYAN

Mailing Address 1367 MICHELLE DR

City State Zip Code
EAGAN MN 55123-1463

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

Name of Employer Occupation
SIGHTS ON SERVICE, INC MARKET RESEARCH

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2015

Transaction ID : SA11.34651

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
TERI POPP

Mailing Address 1305 SHORELINE DR

City State Zip Code
WAYZATA MN 55391-9508

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

Name of Employer Occupation
NA HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2015

Transaction ID : SA11.34653

Amount of Each Receipt this Period
 5400.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
TERI POPP

Mailing Address 1305 SHORELINE DR

City State Zip Code
WAYZATA MN 55391-9508

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

Name of Employer Occupation
NA HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2015

Transaction ID : SA11.34653B

Amount of Each Receipt this Period
 -2700.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

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

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

5650.00

**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 172
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) TERI POPP		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 02 / 2015
Mailing Address 1305 SHORELINE DR		Transaction ID : SA11.35258
City WAYZATA	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer NA	Occupation HOMEMAKER	CONTRIBUTION
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	[MEMO ITEM] REDESIGNATION FROM PRIMARY

Full Name (Last, First, Middle Initial) WILLIAM POPP		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 02 / 2015
Mailing Address 1305 SHORELINE DR		Transaction ID : SA11.34652
City WAYZATA	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5400.00
Name of Employer POPP.COM	Occupation EXECUTIVE	CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	

Full Name (Last, First, Middle Initial) WILLIAM POPP		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 02 / 2015
Mailing Address 1305 SHORELINE DR		Transaction ID : SA11.34652B
City WAYZATA	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -2700.00
Name of Employer POPP.COM	Occupation EXECUTIVE	CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	[MEMO ITEM] REDESIGNATION TO GENERAL

SUBTOTAL of Receipts This Page (optional).....	5400.00
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 28 OF 172
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) WILLIAM POPP		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 02 / 2015
Mailing Address 1305 SHORELINE DR		Transaction ID : SA11.35271
City WAYZATA	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer POPP.COM	Occupation EXECUTIVE	CONTRIBUTION
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	[MEMO ITEM] REDESIGNATION FROM PRIMARY

Full Name (Last, First, Middle Initial) DAVID OLANDER		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 03 / 2015
Mailing Address 2944 BRIDGEHAMPTON CT		Transaction ID : SA11.34654
City FALLS CHURCH	State VA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer CAPITOL COUNSEL LLC	Occupation ATTORNEY	CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) S. HUTCHINS CORBETT		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 04 / 2015
Mailing Address 919 LANDY LANE		Transaction ID : SA11.34655
City LOS ALTOS	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer ARMENTUM PARTNERS	Occupation INVESTMENT BANKER	CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

SUBTOTAL of Receipts This Page (optional).....	1500.00
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 29 OF 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
GREG GARFIELD

Mailing Address 104 HARWOOD CT

City LOS GATOS State CA Zip Code 95032-5151

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

Name of Employer KCK Occupation ADVISOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2015

Transaction ID : SA11.34656

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WILLIAM BLOOMER

Mailing Address 630 INDIAN MOUND ST

City WAYZATA State MN Zip Code 55391-1759

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

Name of Employer LEXUS OF WAYZATA Occupation BUSINESS OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2015

Transaction ID : SA11.34660

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
HARRY FRANKMAN

Mailing Address 777 FAIRFIELD CIRCLE

City MINNETONKA State MN Zip Code 55305-1489

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

Name of Employer SELF Occupation ATTY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2015

Transaction ID : SA11.34659

Amount of Each Receipt this Period
 25.00
 CONTRIBUTION

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 30 OF 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
MICHAEL CARUSI

Mailing Address 2112 WEBSTER STREET

City PALO ALTO State CA Zip Code 94301-4051

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

Name of Employer ADVANCED TECHNOLOGY VENTU Occupation EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 07 / 2015

Transaction ID : SA11.34662

Amount of Each Receipt this Period
5400.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MICHAEL CARUSI

Mailing Address 2112 WEBSTER STREET

City PALO ALTO State CA Zip Code 94301-4051

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

Name of Employer ADVANCED TECHNOLOGY VENTU Occupation EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 07 / 2015

Transaction ID : SA11.34662B

Amount of Each Receipt this Period
-2700.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

C. Full Name (Last, First, Middle Initial)
MICHAEL CARUSI

Mailing Address 2112 WEBSTER STREET

City PALO ALTO State CA Zip Code 94301-4051

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

Name of Employer ADVANCED TECHNOLOGY VENTU Occupation EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 07 / 2015

Transaction ID : SA11.35245

Amount of Each Receipt this Period
2700.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

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

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

5400.00

**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 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
ALLAN WILL

Mailing Address **414 SAND HILL CIRCLE**

City **MENLO PARK** State **CA** Zip Code **94025-7107**

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

Name of Employer **EBR SYSTEMS, INC.** Occupation **CHAIRMAN, CEO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 07 / 2015

Transaction ID : SA11.34661

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ALLAN WILL

Mailing Address **414 SAND HILL CIRCLE**

City **MENLO PARK** State **CA** Zip Code **94025-7107**

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

Name of Employer **EBR SYSTEMS, INC.** Occupation **CHAIRMAN, CEO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 07 / 2015

Transaction ID : SA11.34661B

Amount of Each Receipt this Period
-2300.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

C. Full Name (Last, First, Middle Initial)
ALLAN WILL

Mailing Address **414 SAND HILL CIRCLE**

City **MENLO PARK** State **CA** Zip Code **94025-7107**

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

Name of Employer **EBR SYSTEMS, INC.** Occupation **CHAIRMAN, CEO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 07 / 2015

Transaction ID : SA11.35203

Amount of Each Receipt this Period
2300.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

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 32 OF 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
BRIAN BRILLE

Mailing Address **3 EAST 92ND STREET**

City **NEW YORK** State **NY** Zip Code **10128-0607**

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

Name of Employer **CROWN STERLING** Occupation **CHAIRMAN**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 09 / 2015

Transaction ID : SA11.34666

Amount of Each Receipt this Period
5400.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BRIAN BRILLE

Mailing Address **3 EAST 92ND STREET**

City **NEW YORK** State **NY** Zip Code **10128-0607**

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

Name of Employer **CROWN STERLING** Occupation **CHAIRMAN**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 09 / 2015

Transaction ID : SA11.34666B

Amount of Each Receipt this Period
-2700.00
 CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

C. Full Name (Last, First, Middle Initial)
BRIAN BRILLE

Mailing Address **3 EAST 92ND STREET**

City **NEW YORK** State **NY** Zip Code **10128-0607**

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

Name of Employer **CROWN STERLING** Occupation **CHAIRMAN**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 09 / 2015

Transaction ID : SA11.35209

Amount of Each Receipt this Period
2700.00
 CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

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

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

5400.00

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

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

FOR LINE NUMBER: PAGE 33 OF 172
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
GREGORY CASCIARO

Mailing Address 133 W. POPLAR AVE

City State Zip Code
SAN MATEO CA 94402-1151

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

Name of Employer Occupation
SELF EMPLOYED MEDICAL EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 09 / 2015

Transaction ID : SA11.34665

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LAURA DEEM

Mailing Address 357 WESTRIDGE DR.

City State Zip Code
PORTOLA VALLEY CA 94028-7716

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

Name of Employer Occupation
SELF GRAPHIC DESIGN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 09 / 2015

Transaction ID : SA11.34669

Amount of Each Receipt this Period
 5400.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
LAURA DEEM

Mailing Address 357 WESTRIDGE DR.

City State Zip Code
PORTOLA VALLEY CA 94028-7716

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

Name of Employer Occupation
SELF GRAPHIC DESIGN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 09 / 2015

Transaction ID : SA11.34669B

Amount of Each Receipt this Period
 -2700.00
 CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

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

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

7400.00

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

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

FOR LINE NUMBER: PAGE 34 OF 172
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
LAURA DEEM

Mailing Address 357 WESTRIDGE DR.

City State Zip Code
PORTOLA VALLEY CA 94028-7716

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

Name of Employer Occupation
SELF GRAPHIC DESIGN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 09 / 2015

Transaction ID : SA11.35235

Amount of Each Receipt this Period
2700.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

B. Full Name (Last, First, Middle Initial)
MARK DEEM

Mailing Address 357 WESTRIDGE DR.

City State Zip Code
PORTOLA VALLEY CA 94028-7716

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

Name of Employer Occupation
THE FOUNDRY LLC ENGINEER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 09 / 2015

Transaction ID : SA11.34668

Amount of Each Receipt this Period
5400.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MARK DEEM

Mailing Address 357 WESTRIDGE DR.

City State Zip Code
PORTOLA VALLEY CA 94028-7716

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

Name of Employer Occupation
THE FOUNDRY LLC ENGINEER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 09 / 2015

Transaction ID : SA11.34668B

Amount of Each Receipt this Period
-2700.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO GENERAL

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

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

5400.00

**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 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
MARK DEEM

Mailing Address 357 WESTRIDGE DR.

City PORTOLA VALLEY State CA Zip Code 94028-7716

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

Name of Employer THE FOUNDRY LLC Occupation ENGINEER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 09 / 2015

Transaction ID : SA11.35241

Amount of Each Receipt this Period
2700.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

B. Full Name (Last, First, Middle Initial)
SHAREEF MAHDAVI

Mailing Address 5708 HIDDEN CREEK COURT

City PLEASANTON State CA Zip Code 94566-3830

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

Name of Employer STRATHSPEY CROWN Occupation EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 09 / 2015

Transaction ID : SA11.34667

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOHN CASEY MCGLYNN

Mailing Address 440 COLERIDGE AV

City PALO ALTO State CA Zip Code 94301-3609

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

Name of Employer WILSON SONSINI Occupation ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 09 / 2015

Transaction ID : SA11.34663

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

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: PAGE 36 OF 172
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
STEPHEN OESTERLE

Mailing Address **2410 OLIVER AVE S**

City **MINNEAPOLIS** State **MN** Zip Code **55405-2449**

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

Name of Employer **NEW ENTERPRISE ASSOCIATES** Occupation **VENTURE PARTNER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 09 / 2015

Transaction ID : SA11.34664

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
EARL BRIGHT

Mailing Address **1590 JULIE LANE**

City **LOS ALTOS** State **CA** Zip Code **94024-6152**

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

Name of Employer **EXPLORAMED** Occupation **COO AND GENERAL COUNSEL**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 10 / 2015

Transaction ID : SA11.34672

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
KAREN LONG

Mailing Address **1622 HICKS AVENUE**

City **SAN JOSE** State **CA** Zip Code **95125-3827**

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

Name of Employer **SELF EMPLOYED** Occupation **MARKETING**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 10 / 2015

Transaction ID : SA11.34671

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

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: PAGE 37 OF 172
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
JENNIFER MAKOWER

Mailing Address **661 UNIVERSITY AVENUE**

City **LOS ALTOS** State **CA** Zip Code **94022-3522**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **3364.25**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 10 / 2015

Transaction ID : SA11.35274B

Amount of Each Receipt this Period
-664.25

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

B. Full Name (Last, First, Middle Initial)
JENNIFER MAKOWER

Mailing Address **661 UNIVERSITY AVENUE**

City **LOS ALTOS** State **CA** Zip Code **94022-3522**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **3364.25**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 10 / 2015

Transaction ID : SA11.35279

Amount of Each Receipt this Period
664.25

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

C. Full Name (Last, First, Middle Initial)
JOSH MAKOWER

Mailing Address **14300 MIRANDA ROAD**

City **LOS ALTOS HILLS** State **CA** Zip Code **94022-2047**

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

Name of Employer **EXPLORAMED** Occupation **FOUNDER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **3364.25**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 10 / 2015

Transaction ID : SA11.35273

Amount of Each Receipt this Period
6728.50

CONTRIBUTION

SEE REATTRIBUTION

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

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

6728.50

**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 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
JENNIFER MAKOWER

Mailing Address **661 UNIVERSITY AVENUE**

City **LOS ALTOS** State **CA** Zip Code **94022-3522**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **3364.25**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 10 / 2015

Transaction ID : SA11.35274

Amount of Each Receipt this Period
3364.25

CONTRIBUTION

**[MEMO ITEM]
REATTRIBUTION FROM SPOUSE**

B. Full Name (Last, First, Middle Initial)
JOSH MAKOWER

Mailing Address **14300 MIRANDA ROAD**

City **LOS ALTOS HILLS** State **CA** Zip Code **94022-2047**

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

Name of Employer **EXPLORAMED** Occupation **FOUNDER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **3364.25**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 10 / 2015

Transaction ID : SA11.35273B

Amount of Each Receipt this Period
-3364.25

CONTRIBUTION

**[MEMO ITEM]
REATTRIBUTION TO SPOUSE**

C. Full Name (Last, First, Middle Initial)
JOSH MAKOWER

Mailing Address **14300 MIRANDA ROAD**

City **LOS ALTOS HILLS** State **CA** Zip Code **94022-2047**

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

Name of Employer **EXPLORAMED** Occupation **FOUNDER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **3364.25**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 10 / 2015

Transaction ID : SA11.35275B

Amount of Each Receipt this Period
-664.25

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

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

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

0.00

**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 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
JOSH MAKOWER

Mailing Address 14300 MIRANDA ROAD

City State Zip Code
LOS ALTOS HILLS CA 94022-2047

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

Name of Employer Occupation
EXPLORAMED FOUNDER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3364.25

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 10 / 2015

Transaction ID : SA11.35277

Amount of Each Receipt this Period
664.25

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

B. Full Name (Last, First, Middle Initial)
DENISE ZARINS

Mailing Address 20746 VERDE VISTA LN

City State Zip Code
SARATOGA CA 95070-4829

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

Name of Employer Occupation
SELF CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 10 / 2015

Transaction ID : SA11.34670

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
TERRY LEWIS

Mailing Address 3600 MINNESOTA DRIVE SUITE 100

City State Zip Code
EDINA MN 55435-7912

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

Name of Employer Occupation
NEW YORK LIFE AGENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 11 / 2015

Transaction ID : SA11.34673

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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 40 OF 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
JAMES HAGLUND

Mailing Address 4330 BASSETT CREEK RD

City State Zip Code
GOLDEN VALLEY MN 55422-3611

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

Name of Employer Occupation
CENTRAL CONTAINER OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 13 / 2015

Transaction ID : SA11.34674

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
RONALD SCHUTZ

Mailing Address 865 NAVAHO RD

City State Zip Code
MEDINA MN 55340-9487

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

Name of Employer Occupation
ROBBINS KAPLAN ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 17 / 2015

Transaction ID : SA11.34676

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ERIK ENGELSON

Mailing Address 401 ENCINAL AVE

City State Zip Code
MENLO PARK CA 94025-3106

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

Name of Employer Occupation
MEDINA MEDICAL CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 25 / 2015

Transaction ID : SA11.34751

Amount of Each Receipt this Period
5400.00
CONTRIBUTION

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

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

7400.00

**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 172
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) ERIK ENGELSON		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 25 / 2015
Mailing Address 401 ENCINAL AVE		Transaction ID : SA11.34751B
City MENLO PARK	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -2700.00
Name of Employer MEDINA MEDICAL	Occupation CEO	CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	[MEMO ITEM] REDESIGNATION TO GENERAL

Full Name (Last, First, Middle Initial) ERIK ENGELSON		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 25 / 2015
Mailing Address 401 ENCINAL AVE		Transaction ID : SA11.35218
City MENLO PARK	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer MEDINA MEDICAL	Occupation CEO	CONTRIBUTION
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	[MEMO ITEM] REDESIGNATION FROM PRIMARY

Full Name (Last, First, Middle Initial) MICHAEL GILLIS		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 25 / 2015
Mailing Address 11622 NORMANDALE BLVD		Transaction ID : SA11.34745
City MINNEAPOLIS	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF	CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	250.00
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: PAGE 42 OF 172
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
GREGORY GRAVES
 Mailing Address 4613 DREXEL AVE
 City State Zip Code
 EDINA MN 55424-1133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 ENTEGRIS CFO
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 25 / 2015
Transaction ID : SA11.34748
 Amount of Each Receipt this Period
 2700.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DENNIS HEDTKE
 Mailing Address 7616 ERICK STREET
 7616 ERICK ST
 City State Zip Code
 GREENFIELD MN 55357-8724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 REQUESTED REQUESTED
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 25 / 2015
Transaction ID : SA11.34737
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. PAUL B. KOHLS
 Mailing Address 2510 AUBURN DR
 2510 AUBURN DR.
 City State Zip Code
 VICTORIA MN 55386-9616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 ALLIANZ DIRECTOR OF GOVERNMENT RELATIONS
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 25 / 2015
Transaction ID : SA11.34736
 Amount of Each Receipt this Period
 300.00
 CONTRIBUTION

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 43 OF 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
THOMAS P. LOWE

Mailing Address **2630 W. LAFAYETTE**

City **EXCELSIOR** State **MN** Zip Code **55331-9417**

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

Name of Employer **LYMAN LUMBER CO.** Occupation **CORP EXEC**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 25 / 2015

Transaction ID : SA11.34747

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
THOMAS PRESCOTT

Mailing Address **26977 N 98TH WAY**

City **SCOTTSDALE** State **AZ** Zip Code **85262-8423**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFC** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 25 / 2015

Transaction ID : SA11.34750

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. LAURIE L. TOSTRUD

Mailing Address **1490 SOMERSET CT**

City **SAINT PAUL** State **MN** Zip Code **55118-2826**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 25 / 2015

Transaction ID : SA11.34749

Amount of Each Receipt this Period
2700.00
 CONTRIBUTION

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

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

4700.00

**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 172
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) MRS. LAURIE L. TOSTRUD		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 30 / 2015
Mailing Address 1490 SOMERSET CT		Transaction ID : SA11.34749B
City SAINT PAUL	State MN Zip Code 55118-2826	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -2700.00
Name of Employer HOMEMAKER	Occupation HOMEMAKER	CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	[MEMO ITEM] REDESIGNATION TO GENERAL

Full Name (Last, First, Middle Initial) MRS. LAURIE L. TOSTRUD		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 30 / 2015
Mailing Address 1490 SOMERSET CT		Transaction ID : SA11.35295
City SAINT PAUL	State MN Zip Code 55118-2826	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer HOMEMAKER	Occupation HOMEMAKER	CONTRIBUTION
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	[MEMO ITEM] REDESIGNATION FROM PRIMARY

Full Name (Last, First, Middle Initial) MICHAEL SAVINO		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 02 / 2015
Mailing Address 52 FOREST AVE		Transaction ID : SA11.34754
City PARAMUS	State NJ Zip Code 07652-5200	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer CERTIFIED FINANCIAL SERVICES,LLC	Occupation GENERAL AGENT/CO-OWNER	CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	500.00
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: PAGE 45 OF 172
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
NICHOLAS NELSON

Mailing Address 20495 CAROL LN N

City State Zip Code
ROGERS MN 55374-9033

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

Name of Employer Occupation
FAEGRE BAKER DANIELS ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 07 / 2015

Transaction ID : SA11.34756

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WILLIAM YOST

Mailing Address 9463 OLYMPIA DRIVE

City State Zip Code
EDEN PRAIRIE MN 55347-2845

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 08 / 2015

Transaction ID : SA11.34758

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WILLIAM YOST

Mailing Address 9463 OLYMPIA DRIVE

City State Zip Code
EDEN PRAIRIE MN 55347-2845

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 08 / 2015

Transaction ID : SA11.34758B

Amount of Each Receipt this Period
 -1000.00
 CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

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 46 OF 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
WILLIAM YOST

Mailing Address 9463 OLYMPIA DRIVE

City: EDEN PRAIRIE State: MN Zip Code: 55347-2845

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

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 3700.00

Date of Receipt: 12 / 08 / 2015

Transaction ID : SA11.35269

Amount of Each Receipt this Period: 1000.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

B. Full Name (Last, First, Middle Initial)
ROBERT SCHNELL

Mailing Address 1130 OLD CRYSTAL BAY ROAD

City: ORONO State: MN Zip Code: 55391-9368

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

Name of Employer: CHRISTENSEN GROUP Occupation: INSURANCE BROKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 3000.00

Date of Receipt: 12 / 09 / 2015

Transaction ID : SA11.34759

Amount of Each Receipt this Period: 1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ROBERT SCHNELL

Mailing Address 1130 OLD CRYSTAL BAY ROAD

City: ORONO State: MN Zip Code: 55391-9368

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

Name of Employer: CHRISTENSEN GROUP Occupation: INSURANCE BROKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 3000.00

Date of Receipt: 12 / 09 / 2015

Transaction ID : SA11.34759B

Amount of Each Receipt this Period: -300.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO GENERAL

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: PAGE 47 OF 172
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
ROBERT SCHNELL
 Mailing Address 1130 OLD CRYSTAL BAY ROAD
 City State Zip Code
 ORONO MN 55391-9368
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CHRISTENSEN GROUP INSURANCE BROKER
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 09 2015
Transaction ID : SA11.35254
 Amount of Each Receipt this Period
 300.00
 CONTRIBUTION
[MEMO ITEM]
 REDESIGNATION FROM PRIMARY

B. Full Name (Last, First, Middle Initial)
BOB BROOKS
 Mailing Address 1107 NORTH PITT STREET
 City State Zip Code
 ALEXANDRIA VA 22314-1430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 ALPINE GROUP, INC. EXECUTIVE VICE PRESIDENT
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 10 2015
Transaction ID : SA11.34760
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MARK KNIEF
 Mailing Address 529 S 10TH ST
 City State Zip Code
 MINNEAPOLIS MN 55404-1013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARGILL GENERAL MANAGER
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 11 2015
Transaction ID : SA11.34761
 Amount of Each Receipt this Period
 2700.00
 CONTRIBUTION

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

3200.00

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

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

FOR LINE NUMBER: PAGE 48 OF 172
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
MR. KIRK E. STAPLETON

Mailing Address 3840 INGLEWOOD AVE S

City SAINT LOUIS PARK State MN Zip Code 55416-4924

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

Name of Employer OPTUMHEALTH Occupation HEALTHCARE EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 13 / 2015

Transaction ID : SA11.34762

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MARTHA M. HEAD

Mailing Address 1616 WEST 22ND ST

City MINNEAPOLIS State MN Zip Code 55405-2401

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

Name of Employer SELF Occupation BUSINESS

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 14 / 2015

Transaction ID : SA11.34763

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MARTHA M. HEAD

Mailing Address 1616 WEST 22ND ST

City MINNEAPOLIS State MN Zip Code 55405-2401

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

Name of Employer SELF Occupation BUSINESS

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 14 / 2015

Transaction ID : SA11.34763B

Amount of Each Receipt this Period
 -2000.00
 CONTRIBUTION

[MEMO ITEM]
 REDESIGNATION TO GENERAL

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 49 OF 172
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) MARTHA M. HEAD		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 14 / 2015
Mailing Address 1616 WEST 22ND ST		Transaction ID : SA11.35294
City MINNEAPOLIS	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer SELF	Occupation BUSINESS	CONTRIBUTION
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	[MEMO ITEM] REDESIGNATION FROM PRIMARY

Full Name (Last, First, Middle Initial) SUSAN MARK		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 15 / 2015
Mailing Address 1820 BERKSHIRE LN N		Transaction ID : SA11.35210
City PLYMOUTH	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5400.00
Name of Employer INFORMATION REQUESTED PER BEST EFFC	Occupation INFORMATION REQUESTED PER BEST EFF	CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	

Full Name (Last, First, Middle Initial) SUSAN MARK		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 15 / 2015
Mailing Address 1820 BERKSHIRE LN N		Transaction ID : SA11.35210B
City PLYMOUTH	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -2700.00
Name of Employer INFORMATION REQUESTED PER BEST EFFC	Occupation INFORMATION REQUESTED PER BEST EFF	CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	[MEMO ITEM] REDESIGNATION TO GENERAL

SUBTOTAL of Receipts This Page (optional).....	5400.00
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 50 OF 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
SUSAN MARK

Mailing Address 1820 BERKSHIRE LN N

City State Zip Code
PLYMOUTH MN 55441-3723

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 15 2015

Transaction ID : SA11.35212

Amount of Each Receipt this Period
2700.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

B. Full Name (Last, First, Middle Initial)
ANDREW SHORE

Mailing Address 5904 NORTH 22ND STREET

City State Zip Code
ARLINGTON VA 22205-3327

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

Name of Employer Occupation
ATTORNEY JOCHUM SHORE & TROSSEVIN PC

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 15 2015

Transaction ID : SA11.34765

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
RALPH CHU

Mailing Address 4601 BROWDALE AV

City State Zip Code
EDINA MN 55424-1144

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

Name of Employer Occupation
CHU VISION INSTITUTE OPHTHALMOLOGIST

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 16 2015

Transaction ID : SA11.34767

Amount of Each Receipt this Period
1500.00

CONTRIBUTION

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: PAGE 51 OF 172
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
RALPH CHU

Mailing Address **4601 BROWDALE AV**

City **EDINA** State **MN** Zip Code **55424-1144**

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

Name of Employer **CHU VISION INSTITUTE** Occupation **OPHTHALMOLOGIST**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
12 / 16 / 2015

Transaction ID : SA11.34767B

Amount of Each Receipt this Period
-300.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

B. Full Name (Last, First, Middle Initial)
RALPH CHU

Mailing Address **4601 BROWDALE AV**

City **EDINA** State **MN** Zip Code **55424-1144**

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

Name of Employer **CHU VISION INSTITUTE** Occupation **OPHTHALMOLOGIST**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
12 / 16 / 2015

Transaction ID : SA11.35250

Amount of Each Receipt this Period
300.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

C. Full Name (Last, First, Middle Initial)
CHAD DUNKLEY

Mailing Address **3240 GARHAM HILL ROAD**

City **ORONO** State **MN** Zip Code **55356-5500**

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

Name of Employer **NEW HORIZON ACADEMY** Occupation **CEO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
12 / 16 / 2015

Transaction ID : SA11.34766

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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: PAGE 52 OF 172
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
RICHARD POPE

Mailing Address **22 BRYCEWOOD DR**

City **DIX HILLS** State **NY** Zip Code **11746-4913**

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

Name of Employer **GUARDIAN** Occupation **SALES**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
12 / 16 / 2015

Transaction ID : SA11.34769

Amount of Each Receipt this Period
1500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JEFF DICK

Mailing Address **18709 RIDGEWOOD RD
18709 RIDGEWOOD RD**

City **WAYZATA** State **MN** Zip Code **55391-3657**

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

Name of Employer **SELF** Occupation **SURGEON**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
12 / 17 / 2015

Transaction ID : SA11.34820

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
SUSAN DUNKLEY

Mailing Address **3405 ANNAPOLIS LANE NORTH, #100**

City **PLYMOUTH** State **MN** Zip Code **55447-5343**

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

Name of Employer **NEW HORIZON ENTERPRISES** Occupation **PRESIDENT OF NEW HORIZON ENTERPRIS**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
12 / 17 / 2015

Transaction ID : SA11.34900

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

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 53 OF 172
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) WILLIAM DUNKLEY		Date of Receipt M M / D D / Y Y Y Y Y 12 / 17 / 2015	
Mailing Address 3405 ANNAPOLIS LANE NORTH, #100		Transaction ID : SA11.34899	
City PLYMOUTH	State MN	Zip Code 55447-5343	Amount of Each Receipt this Period _____ 1000.00 CONTRIBUTION
FEC ID number of contributing federal political committee.		_____ C	
Name of Employer NEW HORIZON ENTERPRISES	Occupation ATTORNEY/CEO		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2000.00		

Full Name (Last, First, Middle Initial) BRUCE W. FIEDLER		Date of Receipt M M / D D / Y Y Y Y Y 12 / 17 / 2015	
Mailing Address 5955 LAKE LINDEN CT 5955 LAKE LINDEN CT		Transaction ID : SA11.34822	
City EXCELSIOR	State MN	Zip Code 55331-2907	Amount of Each Receipt this Period _____ 250.00 CONTRIBUTION
FEC ID number of contributing federal political committee.		_____ C	
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		

Full Name (Last, First, Middle Initial) LORLEI R. HALL		Date of Receipt M M / D D / Y Y Y Y Y 12 / 17 / 2015	
Mailing Address 9125 TRAIL HAVEN RD 9125 TRAIL HAVEN RD		Transaction ID : SA11.34780	
City CORCORAN	State MN	Zip Code 55340-9654	Amount of Each Receipt this Period _____ 100.00 CONTRIBUTION
FEC ID number of contributing federal political committee.		_____ C	
Name of Employer HOMEMAKER	Occupation HOMEMAKER		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 350.00		

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 54 OF 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
MICHELE HALL

Mailing Address **945 KATELLA ST**

City **LAGUNA BEACH** State **CA** Zip Code **92651-3705**

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

Name of Employer
INFORMATION REQUESTED PER BEST EFFC

Occupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 17 / 2015

Transaction ID : SA11.34778

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MICHELE HALL

Mailing Address **945 KATELLA ST**

City **LAGUNA BEACH** State **CA** Zip Code **92651-3705**

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

Name of Employer
INFORMATION REQUESTED PER BEST EFFC

Occupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 17 / 2015

Transaction ID : SA11.34778B

Amount of Each Receipt this Period
-2300.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

C. Full Name (Last, First, Middle Initial)
MICHELE HALL

Mailing Address **945 KATELLA ST**

City **LAGUNA BEACH** State **CA** Zip Code **92651-3705**

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

Name of Employer
INFORMATION REQUESTED PER BEST EFFC

Occupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 17 / 2015

Transaction ID : SA11.35248

Amount of Each Receipt this Period
2300.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

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: PAGE 55 OF 172
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
CHRISTOPHER HILGER

Mailing Address 260 S MISSISSIPPI RIVER BLVD

City ST. PAUL State MN Zip Code 55105-1209

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

Name of Employer SECURIAN Occupation PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 17 / 2015

Transaction ID : SA11.34875

Amount of Each Receipt this Period
 3400.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CHRISTOPHER HILGER

Mailing Address 260 S MISSISSIPPI RIVER BLVD

City ST. PAUL State MN Zip Code 55105-1209

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

Name of Employer SECURIAN Occupation PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 17 / 2015

Transaction ID : SA11.34875B

Amount of Each Receipt this Period
 -700.00
 CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

C. Full Name (Last, First, Middle Initial)
CHRISTOPHER HILGER

Mailing Address 260 S MISSISSIPPI RIVER BLVD

City ST. PAUL State MN Zip Code 55105-1209

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

Name of Employer SECURIAN Occupation PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11.35213B

Amount of Each Receipt this Period
 -2700.00
 CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

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

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

3400.00

**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 172
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) A. CHRISTOPHER HILGER		Date of Receipt M M / D D / Y Y Y Y Y 12 / 31 / 2015
Mailing Address 260 S MISSISSIPPI RIVER BLVD		Transaction ID : SA11.35214B
City State Zip Code ST. PAUL MN 55105-1209	Amount of Each Receipt this Period -700.00	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation SECURIAN PRESIDENT	CONTRIBUTION [MEMO ITEM] REDESIGNATION TO PRIMARY
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	

Full Name (Last, First, Middle Initial) B. CHRISTOPHER HILGER		Date of Receipt M M / D D / Y Y Y Y Y 12 / 31 / 2015
Mailing Address 260 S MISSISSIPPI RIVER BLVD		Transaction ID : SA11.35300
City State Zip Code ST. PAUL MN 55105-1209	Amount of Each Receipt this Period 700.00	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation SECURIAN PRESIDENT	CONTRIBUTION [MEMO ITEM] REDESIGNATION FROM GENERAL
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	

Full Name (Last, First, Middle Initial) C. CHRISTOPHER HILGER		Date of Receipt M M / D D / Y Y Y Y Y 12 / 31 / 2015
Mailing Address 260 S MISSISSIPPI RIVER BLVD		Transaction ID : SA11.35301
City State Zip Code ST. PAUL MN 55105-1209	Amount of Each Receipt this Period 2700.00	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation SECURIAN PRESIDENT	CONTRIBUTION [MEMO ITEM] REDESIGNATION FROM PRIMARY
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	0.00

**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 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
PAT JUENEMANN

Mailing Address 10976 MISSISSIPPI DR.

City State Zip Code
CHAMPLIN MN 55316-3504

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

Name of Employer Occupation
SUBURBAN RADIOLOGY PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 17 / 2015

Transaction ID : SA11.34893

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ALFRED KASID

Mailing Address 5601 DEWEY HILL RD
5601 DEWEY HILL RD

City State Zip Code
EDINA MN 55439-1922

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 17 / 2015

Transaction ID : SA11.34781

Amount of Each Receipt this Period
100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
GARY L. OIE

Mailing Address 1739 ROWE PL
1739 ROWE PL

City State Zip Code
SAINT PAUL MN 55106-6830

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 17 / 2015

Transaction ID : SA11.34807

Amount of Each Receipt this Period
100.00
CONTRIBUTION

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: PAGE 58 OF 172
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
DAVID PAUBA

Mailing Address 5300 OAK GROVE PWY

City State Zip Code
MINNEAPOLIS MN 55443-4039

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 17 / 2015

Transaction ID : SA11.34892

Amount of Each Receipt this Period
200.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ANNA QUARNSTROM

Mailing Address 4385 TRENTON LN N APT 211
4385 TRENTON LN N APT 211

City State Zip Code
PLYMOUTH MN 55442-2858

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 17 / 2015

Transaction ID : SA11.34811

Amount of Each Receipt this Period
100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JUDY SCHEFERS

Mailing Address 2540 CASCO POINT RD

City State Zip Code
WAYZATA MN 55391-9721

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 17 / 2015

Transaction ID : SA11.34880

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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

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

1300.00

**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 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
BETH SCHNELL

Mailing Address 1130 S. OLD CRYSTAL BAY ROAD

City WAYZATA State MN Zip Code 55391-9368

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

Name of Employer SPARBOE FARMS, INC. Occupation PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 17 / 2015

Transaction ID : SA11.34777

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BEVERLY SHUPE

Mailing Address 5705 HYLAND COURTS DR #F
5705 HYLAND COURTS DR. # F # D

City BLOOMINGTON State MN Zip Code 55437-1932

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
285.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 17 / 2015

Transaction ID : SA11.34813

Amount of Each Receipt this Period
 75.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MARK STESIN

Mailing Address 2000 NORWAY PINE CIR.
2000 NORWAY PINE CIR

City MINNETONKA State MN Zip Code 55305-2417

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

Name of Employer SELF Occupation PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 17 / 2015

Transaction ID : SA11.34786

Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

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

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

2175.00

**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 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
JERRY TOSTRUD

Mailing Address 8171 BAY COLONY DR PH S
8171 BAY COLONY DR. PH S

City NAPLES State FL Zip Code 34108-7567

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 17 / 2015

Transaction ID : SA11.34787

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOYCE VOGT

Mailing Address 1138 MARNIE CT.
1138 MARNIE CT S

City MAPLEWOOD State MN Zip Code 55119-6019

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

Name of Employer MN HOUSE OF REPRESENTATIVES Occupation LEGISLATIVE AID

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 17 / 2015

Transaction ID : SA11.34815

Amount of Each Receipt this Period
50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
SHANNON ZERZAN

Mailing Address 6907 ANDOVER DR

City ALEXANDRIA State VA Zip Code 22307-1702

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 17 / 2015

Transaction ID : SA11.34882

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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 61 OF 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
ROB HOLT

Mailing Address 18756 MELROSE CHASE

City State Zip Code
EDEN PRAIRIE MN 55347-3479

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

Name of Employer Occupation
SUPER RADIATOR COILS PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 18 / 2015

Transaction ID : SA11.34902

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PAUL WALSER

Mailing Address 165 GROVE LANE E

City State Zip Code
WAYZATA MN 55391-1618

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

Name of Employer Occupation
WALSER AUTOMOTIVE CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 18 / 2015

Transaction ID : SA11.34901

Amount of Each Receipt this Period
2000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
GAYLE DEVRIES

Mailing Address 3125 FOX STREET

City State Zip Code
ORONO MN 55356-9732

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

Name of Employer Occupation
N/A HOUSEWIFE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 21 / 2015

Transaction ID : SA11.34905

Amount of Each Receipt this Period
5400.00
CONTRIBUTION

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

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

8400.00

**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 172
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) GAYLE DEVRIES		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 21 / 2015
Mailing Address 3125 FOX STREET		Transaction ID : SA11.34905B
City ORONO	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -2700.00
Name of Employer N/A	Occupation HOUSEWIFE	CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	[MEMO ITEM] REDESIGNATION TO GENERAL

Full Name (Last, First, Middle Initial) GAYLE DEVRIES		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 21 / 2015
Mailing Address 3125 FOX STREET		Transaction ID : SA11.35220
City ORONO	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer N/A	Occupation HOUSEWIFE	CONTRIBUTION
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	[MEMO ITEM] REDESIGNATION FROM PRIMARY

Full Name (Last, First, Middle Initial) TIMOTHY DEVRIES		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 21 / 2015
Mailing Address 3125 FOX STREET		Transaction ID : SA11.34904
City ORONO	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5400.00
Name of Employer NORWEST EQUITY PARTNERS	Occupation MANAGING GENERAL PARTNER	CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	

SUBTOTAL of Receipts This Page (optional).....	5400.00
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 63 OF 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
TIMOTHY DEVRIES

Mailing Address **3125 FOX STREET**

City **ORONO** State **MN** Zip Code **55356-9732**

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

Name of Employer **NORWEST EQUITY PARTNERS** Occupation **MANAGING GENERAL PARTNER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 21 / 2015

Transaction ID : SA11.34904B

Amount of Each Receipt this Period
-2700.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

B. Full Name (Last, First, Middle Initial)
TIMOTHY DEVRIES

Mailing Address **3125 FOX STREET**

City **ORONO** State **MN** Zip Code **55356-9732**

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

Name of Employer **NORWEST EQUITY PARTNERS** Occupation **MANAGING GENERAL PARTNER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 21 / 2015

Transaction ID : SA11.35260

Amount of Each Receipt this Period
2700.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

C. Full Name (Last, First, Middle Initial)
HANSON GIFFORD

Mailing Address **3180 WOODSIDE RD**

City **WOODSIDE** State **CA** Zip Code **94062-2553**

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

Name of Employer **THE FOUNDRY** Occupation **INVENTOR**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 21 / 2015

Transaction ID : SA11.34907

Amount of Each Receipt this Period
2700.00

CONTRIBUTION

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

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

2700.00

**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 172
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) HANSON GIFFORD		Date of Receipt M M / D D / Y Y Y Y Y 12 / 21 / 2015	
Mailing Address 3180 WOODSIDE RD		Transaction ID : SA11.34907B	
City WOODSIDE	State CA	Zip Code 94062-2553	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -2700.00	
Name of Employer THE FOUNDRY	Occupation INVENTOR		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00		
		CONTRIBUTION [MEMO ITEM] REDESIGNATION TO GENERAL	

Full Name (Last, First, Middle Initial) HANSON GIFFORD		Date of Receipt M M / D D / Y Y Y Y Y 12 / 21 / 2015	
Mailing Address 3180 WOODSIDE RD		Transaction ID : SA11.35225	
City WOODSIDE	State CA	Zip Code 94062-2553	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00	
Name of Employer THE FOUNDRY	Occupation INVENTOR		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00		
		CONTRIBUTION [MEMO ITEM] REDESIGNATION FROM PRIMARY	

Full Name (Last, First, Middle Initial) WENDELL MADDOX		Date of Receipt M M / D D / Y Y Y Y Y 12 / 21 / 2015	
Mailing Address 7500 EQUITABLE DR.		Transaction ID : SA11.34906	
City EDEN PRAIRIE	State MN	Zip Code 55344-3673	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer ION CORP	Occupation CEO		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		
		CONTRIBUTION	

SUBTOTAL of Receipts This Page (optional).....	500.00
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: PAGE 65 OF 172
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
WALTER WHITE

Mailing Address 4833 MCDONALD DR CR N

City State Zip Code
STILLWATER MN 55082-2150

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

Name of Employer Occupation
INFO REQUESTED INFO REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 21 / 2015

Transaction ID : SA11.34903

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PAUL FOGELBERG

Mailing Address 870 HUNT FARM ROAD

City State Zip Code
ORONO MN 55356-9318

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

Name of Employer Occupation
PROF ED GROUP ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 22 / 2015

Transaction ID : SA11.34909

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
SCOTT ROLLIN

Mailing Address 2050 WOODSTONE DR

City State Zip Code
VICTORIA MN 55386-9642

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

Name of Employer Occupation
SELF MGMT COMPENSATION

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 22 / 2015

Transaction ID : SA11.34908

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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 66 OF 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
MICHAEL REGER

Mailing Address 3565 FREDERICK AVE

City WAYZATA State MN Zip Code 55391-9732

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

Name of Employer NORTHEN OIL AND GAS INC. Occupation EXEC

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 23 / 2015

Transaction ID : SA11.34910

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. TIMOTHY R. BAER

Mailing Address 6201 BALDER LANE

City EDINA State MN Zip Code 55439-1101

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

Name of Employer TARGET CORPORATION Occupation EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11.34911

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NEEL JOHNSON

Mailing Address 349 SALEM CHURCH RD

City SUNFISH LAKE State MN Zip Code 55118-4720

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

Name of Employer WELLS FARGO Occupation BANKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 27 / 2015

Transaction ID : SA11.34912

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

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 67 OF 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
ELAM BAER

Mailing Address 60 S 6TH ST SUITE 2535

City State Zip Code
MINNEAPOLIS MN 55402-4406

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 28 / 2015

Transaction ID : SA11.35037

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ROBERT BEACH

Mailing Address 2450 PROVIDENCE PATH

City State Zip Code
MAPLE PLAIN MN 55359-8611

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 28 / 2015

Transaction ID : SA11.35042

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
LESLIE BELCHER

Mailing Address 8323 WOODACRE ST

City State Zip Code
ALEXANDRIA VA 22308-1627

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 28 / 2015

Transaction ID : SA11.35027

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

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

3750.00

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

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

FOR LINE NUMBER: PAGE 68 OF 172
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
KJELL BERGH

Mailing Address 4950 NEAL AVE N
4950 NEAL AVE N

City State Zip Code
STILLWATER MN 55082-1071

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

Name of Employer Occupation
BORTON VOLVO OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2015

Transaction ID : SA11.34983

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
KJELL BERGH

Mailing Address 4950 NEAL AVE N
4950 NEAL AVE N

City State Zip Code
STILLWATER MN 55082-1071

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

Name of Employer Occupation
BORTON VOLVO OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2015

Transaction ID : SA11.34983B

Amount of Each Receipt this Period
 -300.00
 CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

C. Full Name (Last, First, Middle Initial)
KJELL BERGH

Mailing Address 4950 NEAL AVE N
4950 NEAL AVE N

City State Zip Code
STILLWATER MN 55082-1071

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

Name of Employer Occupation
BORTON VOLVO OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2015

Transaction ID : SA11.35233

Amount of Each Receipt this Period
 300.00
 CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

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: PAGE 69 OF 172
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
KATHLEEN Q. BLACK
 Mailing Address **6528 75TH ST**
 City State Zip Code
CABIN JOHN MD 20818-1421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
COCA-COLA DIRECTOR GOVERNMENT AFFAIRS
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 28 2015
Transaction ID : SA11.35032
 Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
TERRY BRYCE
 Mailing Address **16828 GRAYS BAY BLVD**
16828 GRAYS BAY BLVD
 City State Zip Code
WAYZATA MN 55391-2921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
T. BRYCE & ASSOCIATES CEO
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 28 2015
Transaction ID : SA11.34964
 Amount of Each Receipt this Period
100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BARB COSSACK
 Mailing Address **3545 HOFFMAN RD EAST**
 City State Zip Code
VADNAIS HEIGHTS MN 55110-5376
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
TIMBERLAND TRANSPORTATION TRANSPORTATION
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 28 2015
Transaction ID : SA11.34914
 Amount of Each Receipt this Period
2700.00
 CONTRIBUTION

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

3050.00

**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 172
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) A. GEOFF DAVIS		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 28 / 2015
Mailing Address 1929 WEDGEWOOD LANE		Transaction ID : SA11.35030
City HEBRON	State KY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period CONTRIBUTION 1000.00
Name of Employer REPUBLIC CONSULTING	Occupation MANAGING PARTNER	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) B. DENNIS J. DOYLE		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 28 / 2015
Mailing Address 9924 DELL ROAD		Transaction ID : SA11.34913
City EDEN PRAIRIE	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period CONTRIBUTION 5000.00
Name of Employer WILDAMERE	Occupation CEO	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	REFUND OF \$600 ON 1/25/2016 SEE REATTRIBUTION

Full Name (Last, First, Middle Initial) C. DENNIS J. DOYLE		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2015
Mailing Address 9924 DELL ROAD		Transaction ID : SA11.34913B
City EDEN PRAIRIE	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period CONTRIBUTION -600.00
Name of Employer WILDAMERE	Occupation CEO	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	[MEMO ITEM] REFUND OF \$600 ON 1/25/2016 REATTRIBUTION TO SPOUSE

SUBTOTAL of Receipts This Page (optional).....	6000.00
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 71 OF 172
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) DENNIS J. DOYLE		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2015
Mailing Address 9924 DELL ROAD		Transaction ID : SA11.35316B
City EDEN PRAIRIE	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -2700.00
Name of Employer WILDAMERE	Occupation CEO	CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	[MEMO ITEM] REFUND OF \$600 ON 1/25/2016 REDESIGNATION TO GENERAL

Full Name (Last, First, Middle Initial) DENNIS J. DOYLE		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2015
Mailing Address 9924 DELL ROAD		Transaction ID : SA11.35319
City EDEN PRAIRIE	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer WILDAMERE	Occupation CEO	CONTRIBUTION
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	[MEMO ITEM] REFUND OF \$600 ON 1/25/2016 REDESIGNATION FROM PRIMARY

Full Name (Last, First, Middle Initial) MS. MEGAN DOYLE		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2015
Mailing Address 9924 DELL RD		Transaction ID : SA11.35315
City EDEN PRAIRIE	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00
Name of Employer HOMEMAKER	Occupation HOMEMAKER	CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00	[MEMO ITEM] REFUND OF \$600 ON 1/25/2016 REATTRIBUTION FROM SPOUSE

SUBTOTAL of Receipts This Page (optional).....	0.00
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 72 OF 172
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) MARK EVENSTAD		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 28 / 2015
Mailing Address 2520 CEDAR RIDGE RD		Transaction ID : SA11.35038
City WAYZATA	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5400.00
Name of Employer UPSHER-SMITH	Occupation CEO	CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	

Full Name (Last, First, Middle Initial) MARK EVENSTAD		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 28 / 2015
Mailing Address 2520 CEDAR RIDGE RD		Transaction ID : SA11.35038B
City WAYZATA	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -2700.00
Name of Employer UPSHER-SMITH	Occupation CEO	CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	[MEMO ITEM] REDESIGNATION TO GENERAL

Full Name (Last, First, Middle Initial) MARK EVENSTAD		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 28 / 2015
Mailing Address 2520 CEDAR RIDGE RD		Transaction ID : SA11.35243
City WAYZATA	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer UPSHER-SMITH	Occupation CEO	CONTRIBUTION
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	[MEMO ITEM] REDESIGNATION FROM PRIMARY

SUBTOTAL of Receipts This Page (optional).....	5400.00
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: PAGE 73 OF 172
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
SHANNON EVENSTAD

Mailing Address 2520 CEDAR RIDGE RD

City WAYZATA State MN Zip Code 55391-2621

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2015

Transaction ID : SA11.35039

Amount of Each Receipt this Period
5400.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SHANNON EVENSTAD

Mailing Address 2520 CEDAR RIDGE RD

City WAYZATA State MN Zip Code 55391-2621

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2015

Transaction ID : SA11.35039B

Amount of Each Receipt this Period
-2700.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

C. Full Name (Last, First, Middle Initial)
SHANNON EVENSTAD

Mailing Address 2520 CEDAR RIDGE RD

City WAYZATA State MN Zip Code 55391-2621

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2015

Transaction ID : SA11.35256

Amount of Each Receipt this Period
2700.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

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

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

5400.00

**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 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
BEHREND FOSTER

Mailing Address 1722 N NELSON ST

City ARLINGTON State VA Zip Code 22207-3643

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

Name of Employer AHIP Occupation GOVERNMENT AFFAIRS REP

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2015

Transaction ID : SA11.35035

Amount of Each Receipt this Period
 CONTRIBUTION **1000.00**

B. Full Name (Last, First, Middle Initial)
NANCY GRAZZINI-OLSON

Mailing Address 9280 OVERLAND DR.

City PRIOR LAKE State MN Zip Code 55372-3418

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

Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2015

Transaction ID : SA11.34994

Amount of Each Receipt this Period
 CONTRIBUTION **250.00**

C. Full Name (Last, First, Middle Initial)
DENNIS HEDTKE

Mailing Address 7616 ERICK STREET
7616 ERICK ST

City GREENFIELD State MN Zip Code 55357-8724

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2015

Transaction ID : SA11.34978

Amount of Each Receipt this Period
 CONTRIBUTION **250.00**

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: PAGE 75 OF 172
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
JAMES HYLAND

Mailing Address 1101 PENNSYLVANIA AVE NW

City WASHINGTON State DC Zip Code 20004-2504

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2015

Transaction ID : SA11.35031

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
GREG S. KLEIN

Mailing Address 10804 W 141ST ST

City OVERLAND PARK State KS Zip Code 66221-8084

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

Name of Employer Occupation
INLAND TRUCK PARTS CFO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2015

Transaction ID : SA11.35029

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DOUGLAS LINDER

Mailing Address 5108 SCRIVER RD
5108 SCRIVER RD

City EDINA State MN Zip Code 55436-1148

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2015

Transaction ID : SA11.34980

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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 76 OF 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
WILLIAM WILLIAM LURTON

Mailing Address **PO BOX 408**
P.O. BOX 408

City **LONG LAKE** State **MN** Zip Code **55356-0408**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 28 / 2015

Transaction ID : SA11.34982

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JEFFREY MCMILLEN

Mailing Address **8623 LEROY PLACE**

City **FAIRFAX** State **VA** Zip Code **22031-3306**

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

Name of Employer **AKIN GUMP** Occupation **PARTNER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 28 / 2015

Transaction ID : SA11.35033

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
RUTH MORRELL

Mailing Address **10641 WASHBURN AVE S**
10641 WASHBURN AVE S

City **BLOOMINGTON** State **MN** Zip Code **55431-3704**

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
205.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 28 / 2015

Transaction ID : SA11.34941

Amount of Each Receipt this Period
30.00
 CONTRIBUTION

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

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

780.00

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

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

FOR LINE NUMBER: PAGE 77 OF 172
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
MR. RUSS NELSON

Mailing Address 7117 WEST SHORE DR
7117 W SHORE DR.

City State Zip Code
MINNEAPOLIS MN 55435-4040

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

Name of Employer Occupation
SELF EMPLOYED CPA

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 28 / 2015

Transaction ID : SA11.34981

Amount of Each Receipt this Period
300.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MICHAEL R. ROBINSON

Mailing Address 11671 WILD HERON PT
11671 WILD HERON PT

City State Zip Code
EDEN PRAIRIE MN 55347-4756

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 28 / 2015

Transaction ID : SA11.34977

Amount of Each Receipt this Period
200.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DAVID W. SCHEER

Mailing Address 14513 PERRY ST

City State Zip Code
OVERLAND PARK KS 66221-7543

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

Name of Employer Occupation
INLAND TRUCK PARTS CO. CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 28 / 2015

Transaction ID : SA11.35028

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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: PAGE 78 OF 172
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
FRANK W. SPAHN

Mailing Address 17083 TERREY PINE DRIVE
17083 TERREY PINE DR.

City EDEN PRAIRIE State MN Zip Code 55347-1165

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

Name of Employer SIGNUS MEDICAL Occupation CFO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2015

Transaction ID : SA11.34963

Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
FRANK W. SPAHN

Mailing Address 17083 TERREY PINE DRIVE
17083 TERREY PINE DR.

City EDEN PRAIRIE State MN Zip Code 55347-1165

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

Name of Employer SIGNUS MEDICAL Occupation CFO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2015

Transaction ID : SA11.34979

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JAY TOMSON

Mailing Address 12 BRIARSTONE COURT

City MASON CITY State IA Zip Code 50401-4647

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

Name of Employer INFORMATION REQUESTED PER BEST EFF(Occupation INFORMATION REQUESTED PER BEST EFF(

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2015

Transaction ID : SA11.35041

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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 79 OF 172
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) CLARK WINSLOW		Date of Receipt M M / D D / Y Y Y Y Y 12 / 28 / 2015	
Mailing Address 337 BELVEDERE AVE		Transaction ID : SA11.35040	
City BELVEDERE	State CA	Zip Code 94920-2426	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00	
Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00		

Full Name (Last, First, Middle Initial) WALTER BARRY		Date of Receipt M M / D D / Y Y Y Y Y 12 / 29 / 2015	
Mailing Address 2960 GALE RD		Transaction ID : SA11.35087	
City WAYZATA	State MN	Zip Code 55391-2626	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 7400.00		

REFUNDED \$2000 ON 1/25/2016 REFUND TO BE ISSUED

Full Name (Last, First, Middle Initial) BRENT BLACKKEY		Date of Receipt M M / D D / Y Y Y Y Y 12 / 29 / 2015	
Mailing Address 28020 WOODSIDE ROAD		Transaction ID : SA11.35083	
City EXCELSIOR	State MN	Zip Code 55331-7952	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer HOLIDAY COMPANIES	Occupation PRESIDENT		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00		

SUBTOTAL of Receipts This Page (optional).....	3750.00
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 80 OF 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
JIM BUTTS

Mailing Address 2590 CASCO POINT ROAD

City WAYZATA State MN Zip Code 55391-9721

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2015

Transaction ID : SA11.35086

Amount of Each Receipt this Period
 1400.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
RUSS MICHALETZ

Mailing Address 5301 EVANSWOOD LANE

City EDINA State MN Zip Code 55436-1134

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

Name of Employer DELOITTE Occupation ATY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2015

Transaction ID : SA11.35088

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CAROLL H. NEUBAUER

Mailing Address 1790 DEER RUN ROAD

City BETHLEHEM State PA Zip Code 18015-5019

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

Name of Employer B. BRAUN MEDICAL INC Occupation CFO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2015

Transaction ID : SA11.35085

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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 81 OF 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
MARGUERITE RANGEL

Mailing Address 8383 WILSHIRE BLVD, SUITE 212

City State Zip Code
BEVERLY HILLS CA 90211-2432

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

Name of Employer Occupation
SELF FINANCIAL ADVISOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 29 / 2015

Transaction ID : SA11.35081

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
STEVE VANDERBOOM

Mailing Address 2290 HOLLYBUSH ROAD

City State Zip Code
MEDINA MN 55340-9470

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

Name of Employer Occupation
PACE ANALYTICAL SERVICES INC. PRESIDENT/CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 29 / 2015

Transaction ID : SA11.35084

Amount of Each Receipt this Period
2000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MICHAEL BARRY

Mailing Address 2020 DWIGHT LANE

City State Zip Code
MINNETONKA MN 55305-2518

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

Name of Employer Occupation
TWIN CITY FAN COMPANIES PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5100.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 30 / 2015

Transaction ID : SA11.35090

Amount of Each Receipt this Period
2500.00
CONTRIBUTION

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 82 OF 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
MR. GREG JOHNSON

Mailing Address **W10840 875TH AVE.**

City **RIVER FALLS** State **WI** Zip Code **54022-4730**

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

Name of Employer **WEBER JOHNSON PUBLIC AFFAIRS** Occupation **CONSULTANT**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 30 / 2015

Transaction ID : SA11.35089

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
GLEN NELSON

Mailing Address **500 TONKAWA RD**

City **LONG LAKE** State **MN** Zip Code **55356-9724**

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

Name of Employer **GDN HOLDINGS** Occupation **SELF-EMPLOYED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 30 / 2015

Transaction ID : SA11.35091

Amount of Each Receipt this Period
4400.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
GLEN NELSON

Mailing Address **500 TONKAWA RD**

City **LONG LAKE** State **MN** Zip Code **55356-9724**

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

Name of Employer **GDN HOLDINGS** Occupation **SELF-EMPLOYED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 30 / 2015

Transaction ID : SA11.35091B

Amount of Each Receipt this Period
-1700.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

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

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

4900.00

**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 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
GLEN NELSON

Mailing Address 500 TONKAWA RD

City State Zip Code
LONG LAKE MN 55356-9724

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

Name of Employer Occupation
GDN HOLDINGS SELF-EMPLOYED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 31 / 2015

Transaction ID : SA11.35221B

Amount of Each Receipt this Period
-1000.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO GENERAL

B. Full Name (Last, First, Middle Initial)
GLEN NELSON

Mailing Address 500 TONKAWA RD

City State Zip Code
LONG LAKE MN 55356-9724

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

Name of Employer Occupation
GDN HOLDINGS SELF-EMPLOYED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 30 / 2015

Transaction ID : SA11.35222

Amount of Each Receipt this Period
1700.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

C. Full Name (Last, First, Middle Initial)
GLEN NELSON

Mailing Address 500 TONKAWA RD

City State Zip Code
LONG LAKE MN 55356-9724

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

Name of Employer Occupation
GDN HOLDINGS SELF-EMPLOYED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 31 / 2015

Transaction ID : SA11.35287

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

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

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

0.00

**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 172
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) GEORGE ELI ANDERSON		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2015
Mailing Address 11412 MISSISSIPPI DR N 11412 MISSISSIPPI DR. N		Transaction ID : SA11.35164
City CHAMPLIN	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period CONTRIBUTION 2000.00
Name of Employer CROWN IRON WORKS	Occupation ENGR	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) CHARLES ASENSIO		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2015
Mailing Address 201 S NARCISSUS AVE		Transaction ID : SA11.35142
City WEST PALM BEACH	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period CONTRIBUTION 1000.00
Name of Employer INFORMATION REQUESTED PER BEST EFFC	Occupation INFORMATION REQUESTED PER BEST EFF	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) KEITH BARES		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2015
Mailing Address 2152 MEDINA RD		Transaction ID : SA11.35115
City MEDINA	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period CONTRIBUTION 500.00
Name of Employer CC MANAGEMENT LLC	Occupation INVESTMENT	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

SUBTOTAL of Receipts This Page (optional).....	3500.00
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 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
GREGORY A. BEAM

Mailing Address 6976 W 84TH STREET CIR

City State Zip Code
MINNEAPOLIS MN 55438-1173

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

Name of Employer Occupation
BEAM SYSTEMS AND CONSULTING INC CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 31 2015

Transaction ID : SA11.35097

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
GREGORY A. BEAM

Mailing Address 6976 W 84TH STREET CIR

City State Zip Code
MINNEAPOLIS MN 55438-1173

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

Name of Employer Occupation
BEAM SYSTEMS AND CONSULTING INC CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 31 2015

Transaction ID : SA11.35097B

Amount of Each Receipt this Period
-1300.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

C. Full Name (Last, First, Middle Initial)
GREGORY A. BEAM

Mailing Address 6976 W 84TH STREET CIR

City State Zip Code
MINNEAPOLIS MN 55438-1173

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

Name of Employer Occupation
BEAM SYSTEMS AND CONSULTING INC CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 31 2015

Transaction ID : SA11.35224

Amount of Each Receipt this Period
1300.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

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: PAGE 86 OF 172
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
TIMOTHY BECKEN

Mailing Address 3203 CRESTMOOR DR

City State Zip Code
WOODBURY MN 55125-5010

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

Name of Employer Occupation
CEMSTONE PRODUCTS COMPANY SENIOR VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11.35138

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WILLIAM BLOOMER

Mailing Address 630 INDIAN MOUND ST

City State Zip Code
WAYZATA MN 55391-1759

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

Name of Employer Occupation
LEXUS OF WAYZATA BUSINESS OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11.35103

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WILLIAM BLOOMER

Mailing Address 630 INDIAN MOUND ST

City State Zip Code
WAYZATA MN 55391-1759

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

Name of Employer Occupation
LEXUS OF WAYZATA BUSINESS OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11.35103B

Amount of Each Receipt this Period
 -300.00
 CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

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 87 OF 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
WILLIAM BLOOMER

Mailing Address **630 INDIAN MOUND ST**

City **WAYZATA** State **MN** Zip Code **55391-1759**

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

Name of Employer **LEXUS OF WAYZATA** Occupation **BUSINESS OWNER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SA11.35268

Amount of Each Receipt this Period
300.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

B. Full Name (Last, First, Middle Initial)
SUSAN BRUNOFF

Mailing Address **334 W CEDAR ST.
334 W CEDAR ST**

City **NEW HOLLAND** State **PA** Zip Code **17557-1202**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SA11.35163

Amount of Each Receipt this Period
400.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DOROTHY BUCKINGHAM

Mailing Address **4200 40TH AVE N
APT 112**

City **ROBBINSDALE** State **MN** Zip Code **55422-2200**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SA11.35126

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

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

1400.00

**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 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
JEFFERY ENGLER

Mailing Address 5425 BOONE ANE N

City NEW HOPE State MN Zip Code 55428-

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

Name of Employer **BORDER FOODS INC** Occupation **EXEC**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11.35112

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LEE ENGLER

Mailing Address 5425 BOONE AVE NORTH

City NEW HOPE State MN Zip Code 55428-3614

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

Name of Employer **MARVIN DEVELOPMENT** Occupation **PRESIDENT**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11.35109

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
EUGENE O. GULLINGSRUD

Mailing Address 10411 WHITE TAIL CROSSING

City EDEN PRAIRIE State MN Zip Code 55347-5026

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

Name of Employer **EDINA EYE PHYSICIANS** Occupation **OPHTHALMOLOGIST**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11.35092

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

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: PAGE 89 OF 172
(check only one)
 11a 12
 11b 13a
 11c 13b
 11d 14
 15

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NAME OF COMMITTEE (In Full)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
EDWARD HAMM

Mailing Address **243 S BEACH RD**

City **HOBE SOUND** State **FL** Zip Code **33455-2512**

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

Name of Employer **ACOMA OIL** Occupation **PARTNER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SA11.35128

Amount of Each Receipt this Period
800.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
GORDON JENSEN

Mailing Address **10689 SONOMA RDG**

City **EDEN PRAIRIE** State **MN** Zip Code **55347-1169**

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

Name of Employer **NORMAN JENSEN, INC.** Occupation **EXEC**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SA11.35130

Amount of Each Receipt this Period
300.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
STEPHEN KAIRIES

Mailing Address **6801 W 83RD STREET**

City **BLOOMINGTON** State **MN** Zip Code **55438-1262**

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

Name of Employer **ACCESS FINANCIAL SERVICES, INC.** Occupation **FOUNDER/CFO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SA11.35102

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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 90 OF 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
JOHN KINKEAD

Mailing Address 693 MONTCALM PL

City SAINT PAUL State MN Zip Code 55116-1745

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11.35177

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
TIMOTHY LAWRENCE

Mailing Address 700 5TH ST NW 2ND FLOOR

City WASHINGTON State DC Zip Code 20001-2752

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

Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11.35179

Amount of Each Receipt this Period
 5400.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
TIMOTHY LAWRENCE

Mailing Address 700 5TH ST NW 2ND FLOOR

City WASHINGTON State DC Zip Code 20001-2752

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

Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11.35179B

Amount of Each Receipt this Period
 -2700.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO GENERAL

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

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

6400.00

**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 91 OF 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
TIMOTHY LAWRENCE

Mailing Address **700 5TH ST NW 2ND FLOOR**

City **WASHINGTON** State **DC** Zip Code **20001-2752**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SA11.35262

Amount of Each Receipt this Period
2700.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

B. Full Name (Last, First, Middle Initial)
LAURENCE F. LEJEUNE

Mailing Address **2820 COUNTY RD 24**

City **LONG LAKE** State **MN** Zip Code **55356-9538**

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

Name of Employer **LEJEUNE INVESTMENT CO** Occupation **CEO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SA11.35182

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
LAURENCE F. LEJEUNE

Mailing Address **2820 COUNTY RD 24**

City **LONG LAKE** State **MN** Zip Code **55356-9538**

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

Name of Employer **LEJEUNE INVESTMENT CO** Occupation **CEO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SA11.35182B

Amount of Each Receipt this Period
-300.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

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: PAGE 92 OF 172
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
LAURENCE F. LEJEUNE

Mailing Address **2820 COUNTY RD 24**

City **LONG LAKE** State **MN** Zip Code **55356-9538**

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

Name of Employer **LEJEUNE INVESTMENT CO** Occupation **CEO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SA11.35303

Amount of Each Receipt this Period
300.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

B. Full Name (Last, First, Middle Initial)
DR. RICHARD L. LINDSTROM

Mailing Address **2811 WESTWOOD RD.**

City **WAYZATA** State **MN** Zip Code **55391-9787**

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

Name of Employer **SELF** Occupation **PHYSICIAN**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SA11.35095

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. RICHARD L. LINDSTROM

Mailing Address **2811 WESTWOOD RD.**

City **WAYZATA** State **MN** Zip Code **55391-9787**

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

Name of Employer **SELF** Occupation **PHYSICIAN**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SA11.35095B

Amount of Each Receipt this Period
-300.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

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 93 OF 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
DR. RICHARD L. LINDSTROM

Mailing Address 2811 WESTWOOD RD.

City WAYZATA State MN Zip Code 55391-9787

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

Name of Employer SELF Occupation PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11.35252

Amount of Each Receipt this Period
300.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

B. Full Name (Last, First, Middle Initial)
CHARLES MCCROSSAN

Mailing Address PO BOX 1240

City MAPLE GROVE State MN Zip Code 55311-6240

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

Name of Employer C.S. MCCROSSAN INC Occupation EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11.35176

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
PETER J. MIHAJLOV

Mailing Address 30 ECHO BAY DR

City EXCELSIOR State MN Zip Code 55331-9586

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

Name of Employer PARASOLE RESTAURANT HOLDINGS Occupation RESTAURANT OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11.35131

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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: PAGE 94 OF 172
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
MS. A. LYNN MISSELT

Mailing Address 4425 DUNHAM DR
4425 DUNHAM DR.

City State Zip Code
EDINA MN 55435-4139

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SA11.35161

Amount of Each Receipt this Period
100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DONALD OREN

Mailing Address 3105 SANDY HOOK DRIVE

City State Zip Code
ROSEVILLE MN 55113-2128

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

Name of Employer Occupation
DART CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SA11.35127

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BENJAMIN T. PELTIER

Mailing Address 16 WILDFLOWER PLACE

City State Zip Code
NORTH OAKS MN 55127-6221

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

Name of Employer Occupation
MN HOSPITAL ASSOCIATION VICE PRESIDENT LEGAL SERVICES

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SA11.35106

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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 95 OF 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
LAWRENCE POBUDA

Mailing Address **8149 E WINGSPAN WAY**

City **SCOTTSDALE** State **AZ** Zip Code **85255-6451**

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

Name of Employer **THE OPUS GROUP** Occupation **COMMERCIAL REAL ESTATE**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SA11.35141

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DENNIS POTTEBAUM

Mailing Address **12795 16TH AVE N**

City **MINNEAPOLIS** State **MN** Zip Code **55441-4556**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFC** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SA11.35172

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
PAUL ROE

Mailing Address **8104 HIGHWOOD DR G309**
8104 HIGHWOOD DR. APT G309

City **BLOOMINGTON** State **MN** Zip Code **55438-3028**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SA11.35162

Amount of Each Receipt this Period
150.00

CONTRIBUTION

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

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

1400.00

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

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

FOR LINE NUMBER: PAGE 96 OF 172
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
PATRICK RYAN

Mailing Address 105 CLAY CLIFFE DR.

City State Zip Code
EXCELSIOR MN 55331-9512

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

Name of Employer Occupation
RYAN CONSTRUCTION EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11.35099

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
FRANK W. SPAHN

Mailing Address 17083 TERREY PINE DRIVE
17083 TERREY PINE DR.

City State Zip Code
EDEN PRAIRIE MN 55347-1165

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

Name of Employer Occupation
SIGNUS MEDICAL CFO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11.35096

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WARREN STALEY

Mailing Address P.O. BOX 19000

City State Zip Code
AVON CO 81620-9010

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11.35114

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

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 97 OF 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
EUGENE STORMS

Mailing Address 9178 BRECKENRIDGE LANE

City State Zip Code
EDEN PRAIRIE MN 55347-3442

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

Name of Employer Occupation
NORTHWESTERN MUTUAL FINANCIAL ADVISOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 31 2015

Transaction ID : SA11.35129

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JAMES STRANDE

Mailing Address 5241 VIKING DR

City State Zip Code
EDINA MN 55435-5313

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

Name of Employer Occupation
ADVANCE INS AGENCY INS. AGENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 31 2015

Transaction ID : SA11.35100

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
SCOTT SUNDET

Mailing Address 7113 LANHAM LANE

City State Zip Code
EDINA MN 55439-1821

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

Name of Employer Occupation
CLARUS MEDICAL CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 31 2015

Transaction ID : SA11.35119

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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 98 OF 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
ALAN TENNESSEN

Mailing Address 1900 GARLAND LN N

City PLYMOUTH State MN Zip Code 55447-2274

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11.35175

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CHRIS TIEDEMAN

Mailing Address 3038 ASPEN LAKE DRIVE NE

City BLAINE State MN Zip Code 55449-7517

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

Name of Employer SELF Occupation CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11.35118

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOEL TILSNER

Mailing Address 2505 SYLVAN RD S

City MINNETONKA State MN Zip Code 55305-2816

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

Name of Employer TILSNER CARTON Occupation PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11.35181

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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 99 OF 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
MAURICE J. WAGENER

Mailing Address 1420 BOHNS POINT RD

City WAYZATA State MN Zip Code 55391-9308

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

Name of Employer SELF Occupation AUTOMOTIVE DEALER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11.35108

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOHN WEBER

Mailing Address 7701 RIDGECREST DRIVE

City ALEXANDRIA State VA Zip Code 22308-1052

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

Name of Employer MERCURY Occupation LOBBYIST

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11.35117

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOSEPH WEIS

Mailing Address 2227 7TH ST NW

City ROCHESTER State MN Zip Code 55901-0206

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

Name of Employer INFORMATION REQUESTED PER BEST EFF(Occupation INFORMATION REQUESTED PER BEST EFF(

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11.35180

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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: PAGE 100 OF 172
(check only one)
 11a 12
 11b 13a
 11c 13b
 11d 14
 15

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NAME OF COMMITTEE (In Full)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
PULMONARY FIBROSIS ADVOCATES

Mailing Address 12401 MINNETONKA BLVD STE 200

City MINNETONKA State MN Zip Code 55305-3971

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 0.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11.35193

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

REFUNDED \$1000 ON 1/18/2016 REFUNDED \$1,000.00 ON 12/31/2015

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 / 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 / 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).....

1000.00

267818.50

**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 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
AMERICAN WIND ENERGY ASSOCIATION WINDPAC

Mailing Address 1501 M ST NW

City State Zip Code
D.C. DC 20005-1700

FEC ID number of contributing federal political committee. **C C00259572**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 28 / 2015

Transaction ID : SA11.34645

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DLA PIPER PAC

Mailing Address 500 8TH STREET NW

City State Zip Code
WASHINGTON DC 20004-2131

FEC ID number of contributing federal political committee. **C C00151340**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 28 / 2015

Transaction ID : SA11.34649

Amount of Each Receipt this Period
750.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DUKE ENERGY CORPORATION PAC

Mailing Address 550 S TRYON ST

City State Zip Code
CHARLOTTE NC 28202-4200

FEC ID number of contributing federal political committee. **C C00083535**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 28 / 2015

Transaction ID : SA11.34643

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

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

2750.00

**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 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
HOGAN LOVELLS POLITICAL ACTION COMMITTEE

Mailing Address 555 13TH ST NW

City State Zip Code
D.C. DC 20004-1109

FEC ID number of contributing federal political committee. **C C00261339**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2015

Transaction ID : SA11.34646

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS

Mailing Address 2901 TELESTAR COURT

City State Zip Code
FALLS CHURCH VA 22042-1260

FEC ID number of contributing federal political committee. **C C00005249**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2015

Transaction ID : SA11.34638

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NEXTERA ENERGY PAC

Mailing Address P.O. BOX 14000

City State Zip Code
JUNO BEACH FL 33408-0420

FEC ID number of contributing federal political committee. **C C00064774**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2015

Transaction ID : SA11.34642

Amount of Each Receipt this Period
 1500.00

CONTRIBUTION

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: PAGE 103 OF 172
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
PG&E CORPORATION EMPLOYEES ENERGYPAC

Mailing Address **77 BEALE STREET, MAIL CODE: B29H**

City **SF** State **CA** Zip Code **94105-1814**

FEC ID number of contributing federal political committee. **C C00177469**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 28 / 2015

Transaction ID : SA11.34648

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PINNACLE WEST CAPITAL CORPORATION PAC

Mailing Address **801 PENNSYLVANIA AVE NW**

City **D.C.** State **DC** Zip Code **20004-2615**

FEC ID number of contributing federal political committee. **C C00015933**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 28 / 2015

Transaction ID : SA11.34644

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
PRINPAC

Mailing Address **711 HIGH STREET**

City **DES MOINES** State **IA** Zip Code **50392-0001**

FEC ID number of contributing federal political committee. **C C00128918**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 28 / 2015

Transaction ID : SA11.34647

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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: PAGE 104 OF 172
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
RETAIL LEADERS PAC

Mailing Address 1700 N. MOORE ST.
SUITE 2250

City ARLINGTON State VA Zip Code 22209-1933

FEC ID number of contributing federal political committee. **C C00112763**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 28 / 2015

Transaction ID : SA11.34640

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
RETAILPAC

Mailing Address 325 7TH STREET NW
SUITE 1100

City WASHINGTON State DC Zip Code 20004-2825

FEC ID number of contributing federal political committee. **C C00040329**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 28 / 2015

Transaction ID : SA11.34636

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
TIAA-CREF PAC

Mailing Address 1101 PENNSYLVANIA AVE. NW
SUITE 800

City WASHINGTON State DC Zip Code 20004-2526

FEC ID number of contributing federal political committee. **C C00431361**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 28 / 2015

Transaction ID : SA11.34635

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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: PAGE 105 OF 172
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
WAL-MART STORES, INC PAC

Mailing Address 701 8TH STREET, NW
SUITE 200

City WASHINGTON State DC Zip Code 20001-3917

FEC ID number of contributing federal political committee. **C C00093054**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 28 / 2015

Transaction ID : SA11.34650

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WINE & SPIRITS WHOLESALERS OF AMERICA PAC

Mailing Address 805 FIFTEENTH ST., 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1879.56

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 28 / 2015

Transaction ID : SA11.34641

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WINTHROP AND WEINSTINE FEDERAL POLITICAL FUND

Mailing Address 225 S 6TH STE 3500

City MINNEAPOLIS State MN Zip Code 55402-4629

FEC ID number of contributing federal political committee. **C C00277988**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 28 / 2015

Transaction ID : SA11.34637

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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 106 OF 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
ACTION COMMITTEE FOR RURAL ELECTRIFICATION

Mailing Address 4301 WILSON BLVD

City ARLINGTON State VA Zip Code 22203-1867

FEC ID number of contributing federal political committee. **C** C00008169

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 25 / 2015

Transaction ID : SA11.34708

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
AIR LINE PILOTS ASSOCIATION PAC

Mailing Address 1625 MASSACHUSETTS AVE NW

City WASHINGTON State DC Zip Code 20036-2212

FEC ID number of contributing federal political committee. **C** C00035451

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 25 / 2015

Transaction ID : SA11.34715

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
AMERICAN PSYCHOLOGICAL ASSOCIATION PRACTICE ORGANI

Mailing Address PO BOX 65353

City WASHINGTON State DC Zip Code 20035-5353

FEC ID number of contributing federal political committee. **C** C00522094

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 25 / 2015

Transaction ID : SA11.34712

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

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 107 OF 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
AMERICAN SOCIETY OF ASSOCIATION EXECUTIVES APAC

Mailing Address 1575 I ST NW

City WASHINGTON State DC Zip Code 20005-1105

FEC ID number of contributing federal political committee. **C** C00041566

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 25 / 2015

Transaction ID : SA11.34714

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BEST BUY EMPLOYEE POLITICAL FORUM

Mailing Address 7601 PENN AVENUE SOUTH

City RICHFIELD State MN Zip Code 55423-8500

FEC ID number of contributing federal political committee. **C** C00405076

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 25 / 2015

Transaction ID : SA11.34699

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BRISTOL-MYERS SQUIBB COMPANY

Mailing Address 801 PENNSYLVANIA AVE NW
SUITE 325

City WASHINGTON State DC Zip Code 20004-3634

FEC ID number of contributing federal political committee. **C** C00035675

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 25 / 2015

Transaction ID : SA11.34700

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

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: PAGE 108 OF 172
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
DOCTOR VOICE FOR PATIENT CHOICE PAC
 Mailing Address 4040 MACARTHUR BLVD STE 210
 City State Zip Code
 NEWPORT BEACH CA 92660-2515
 FEC ID number of contributing federal political committee. **C C00527796**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 25 / 2015
Transaction ID : SA11.34701
 Amount of Each Receipt this Period
 3000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
HEARPAC
 Mailing Address 1444 I STREET, NW
 SUITE 700
 City State Zip Code
 WASHINGTON DC 20005-6542
 FEC ID number of contributing federal political committee. **C C00437798**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 25 / 2015
Transaction ID : SA11.34704
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
HOME DEPOT PAC
 Mailing Address 1155 F STREET NW
 SUITE 400
 City State Zip Code
 WASHINGTON DC 20004-1346
 FEC ID number of contributing federal political committee. **C C00284885**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 9500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 25 / 2015
Transaction ID : SA11.34703
 Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

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 109 OF 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
MCGUIREWOODS LLP

Mailing Address **1 JAMES CTR**

City **RICHMOND** State **VA** Zip Code **23219-4089**

FEC ID number of contributing federal political committee. **C C00225342**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
11 / 25 / 2015

Transaction ID : SA11.34713

Amount of Each Receipt this Period
1500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF MUTUAL INSURANCE COMPANIES PAC

Mailing Address **3601 VINCENNES ROAD**

City **INDIANAPOLIS** State **IN** Zip Code **46268-1154**

FEC ID number of contributing federal political committee. **C C00170258**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **3500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
11 / 25 / 2015

Transaction ID : SA11.34706

Amount of Each Receipt this Period
2500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NATIONAL BEER WHOLESALERS ASSOC

Mailing Address **1101 KING ST.
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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
11 / 25 / 2015

Transaction ID : SA11.34702

Amount of Each Receipt this Period
2500.00
 CONTRIBUTION

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 110 OF 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
NEW YORK LIFE INSURANCE PAC

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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 25 / 2015

Transaction ID : SA11.34711

Amount of Each Receipt this Period
3000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
NUCLEAR ENERGY INSTITUTE PAC

Mailing Address **1776 I STREET NW 4TH FLOOR**

City **WASHINGTON** State **DC** Zip Code **20006-3759**

FEC ID number of contributing federal political committee. **C C00239848**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 25 / 2015

Transaction ID : SA11.34705

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
PACIFIC LIFE INSURANCE PAC

Mailing Address **700 NEWPORT CENTER DR.**

City **NEWPORT BEACH** State **CA** Zip Code **92660-6307**

FEC ID number of contributing federal political committee. **C C00068528**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 25 / 2015

Transaction ID : SA11.34709

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

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 111 OF 172
	<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	

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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
PACIFIC LIFE INSURANCE PAC

Mailing Address 700 NEWPORT CENTER DR.

City State Zip Code
NEWPORT BEACH CA 92660-6307

FEC ID number of contributing federal political committee. **C** C00068528

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 25 / 2015

Transaction ID : SA11.34709B

Amount of Each Receipt this Period
-1000.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO GENERAL

B. Full Name (Last, First, Middle Initial)
PACIFIC LIFE INSURANCE PAC

Mailing Address 700 NEWPORT CENTER DR.

City State Zip Code
NEWPORT BEACH CA 92660-6307

FEC ID number of contributing federal political committee. **C** C00068528

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 25 / 2015

Transaction ID : SA11.34710

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

C. Full Name (Last, First, Middle Initial)
XCEL ENERGY EMPLOYEE PAC

Mailing Address 325 7TH STREET NW
SUITE 550

City State Zip Code
WASHINGTON DC 20004-2833

FEC ID number of contributing federal political committee. **C** C00107771

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 25 / 2015

Transaction ID : SA11.34707

Amount of Each Receipt this Period
4000.00

CONTRIBUTION

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 112 OF 172
	<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)
Friends of Erik Paulsen

A. DELOITTE & TOUCHE FEDERAL POLITICAL ACTION CTTE

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 365

City: WASHINGTON State: DC Zip Code: 20044-0365

FEC ID number of contributing federal political committee: **C C00211318**

Name of Employer: _____ Occupation: _____

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date: _____

Date of Receipt: 12 / 17 / 2015

Transaction ID : SA11.34770

Amount of Each Receipt this Period: 5000.00

CONTRIBUTION

B. MEDICAL DEVICE MANUFACTURERS ASSOCIATION PAC

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 34591

City: D.C. State: DC Zip Code: 20043-4591

FEC ID number of contributing federal political committee: **C C00484162**

Name of Employer: _____ Occupation: _____

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date: _____

Date of Receipt: 12 / 17 / 2015

Transaction ID : SA11.34771

Amount of Each Receipt this Period: 2500.00

CONTRIBUTION

C. MORGAN STANLEY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address 1585 BROADWAY

City: NY State: NY Zip Code: 10036-8200

FEC ID number of contributing federal political committee: **C C00337626**

Name of Employer: _____ Occupation: _____

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date: _____

Date of Receipt: 12 / 17 / 2015

Transaction ID : SA11.34774

Amount of Each Receipt this Period: 1000.00

CONTRIBUTION

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

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

8500.00

**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 113 OF 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
POWERPAC OF THE EDISON ELECTRIC INSTITUTE

Mailing Address 701 PENNSYLVANIA AVE NW

City State Zip Code
D.C. DC 20004-2608

FEC ID number of contributing federal political committee. **C** C00095869

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 17 / 2015

Transaction ID : SA11.34773

Amount of Each Receipt this Period
1500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SECURIAN, INC PAC

Mailing Address 400 ROBERT ST N

City State Zip Code
ST PAUL MN 55101-2037

FEC ID number of contributing federal political committee. **C** C00120006

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 17 / 2015

Transaction ID : SA11.34776

Amount of Each Receipt this Period
3500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
THE DOW CHEMICAL COMPANY EMPLOYEES PAC (DOWPAC)

Mailing Address 2030 DOW CENTER

City State Zip Code
MIDLAND MI 48674-1500

FEC ID number of contributing federal political committee. **C** C00074096

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 17 / 2015

Transaction ID : SA11.34772

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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 114 OF 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
THE GRANT THORNTON LLP POLITICAL ACTION COMMITTEE

Mailing Address 171 N CLARK ST

City CHGO State IL Zip Code 60601-3306

FEC ID number of contributing federal political committee. **C** C00408260

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 17 / 2015

Transaction ID : SA11.34775

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
3M COMPANY PAC

Mailing Address 1425 K STREET, N.W.
SUITE 300

City WASHINGTON State DC Zip Code 20005-3565

FEC ID number of contributing federal political committee. **C** C00084475

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2015

Transaction ID : SA11.35057

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ABBOTT LABORATORIES EMPLOYEE PAC (AEPAC)

Mailing Address 100 ABBOTT PARK ROAD

City ABBOTT PARK State IL Zip Code 60064-3502

FEC ID number of contributing federal political committee. **C** C00040279

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2015

Transaction ID : SA11.35061

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

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 115 OF 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
AGSH&F CIVIC ACTION COMMITTEE

Mailing Address 1333 NEW HAMPSHIRE AVE., NW

City WASHINGTON State DC Zip Code 20036-1500

FEC ID number of contributing federal political committee. **C** C00104901

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2015

Transaction ID : SA11.35066

Amount of Each Receipt this Period
750.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
AICPA PAC

Mailing Address PALLADIAN CORPORATE CENTER, 200 LE

City DURHAM State NC Zip Code 27707-

FEC ID number of contributing federal political committee. **C** C00077321

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2015

Transaction ID : SA11.35062

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
AMERICAN COUNCIL OF ENGINEERING COMPANIES PAC

Mailing Address 1015 15TH ST NW

City WASHINGTON State DC Zip Code 20005-2605

FEC ID number of contributing federal political committee. **C** C00010868

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2015

Transaction ID : SA11.35072

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

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

6750.00

**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 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
AMERICAN ELECTRIC POWER PAC

Mailing Address 1 RIVERSIDE PLAZA - 26TH FLOOR

City State Zip Code
COLUMBUS OH 43215-2355

FEC ID number of contributing federal political committee. **C** C00096842

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2015

Transaction ID : SA11.35079

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
AMERICAN RENTAL ASSOC PAC ARAPAC

Mailing Address 1900 19TH ST.

City State Zip Code
MOLINE IL 61265-4179

FEC ID number of contributing federal political committee. **C** C00107615

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2015

Transaction ID : SA11.35067

Amount of Each Receipt this Period
 2500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
AMSTED INDUSTRIES, INC. PAC

Mailing Address TWO PRUDENTIAL PLAZA
180 N STETSON AVE STE 1800

City State Zip Code
CHICAGO IL 60601-6808

FEC ID number of contributing federal political committee. **C** C00438358

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2015

Transaction ID : SA11.35058

Amount of Each Receipt this Period
 2000.00

CONTRIBUTION

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 117 OF 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
AUSTIN INDUSTRIES COMPANIES PAC

Mailing Address PO BOX 1590

City State Zip Code
DALLAS TX 75221-1590

FEC ID number of contributing federal political committee. **C C00093179**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 29 / 2015

Transaction ID : SA11.35070

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BIOMARIN PHARMACEUTICAL

Mailing Address 2350 KERNER BLVD SUITE 250

City State Zip Code
SAN RAFAEL CA 94901-5596

FEC ID number of contributing federal political committee. **C C00543371**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 29 / 2015

Transaction ID : SA11.35075

Amount of Each Receipt this Period
2700.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BIOTECHNOLOGY INDUSTRY ORGANIZATION PAC

Mailing Address 1201 MARYLAND AVE, SW
STE. 900

City State Zip Code
WASHINGTON DC 20024-6129

FEC ID number of contributing federal political committee. **C C00355677**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 29 / 2015

Transaction ID : SA11.35077

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

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

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

7200.00

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

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	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
BURNS & MCDONNELL, INC. PAC

Mailing Address 9400 WARK PARKWAY

City KANSAS CITY State MO Zip Code 64114-3319

FEC ID number of contributing federal political committee. **C** C00442913

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2015

Transaction ID : SA11.35064

Amount of Each Receipt this Period
 1500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ELI LILLY AND COMPANY PAC

Mailing Address 555 TWELFTH STREET, N.W.
SUITE 650, SOUTH TOWER

City WASHINGTON State DC Zip Code 20004-1209

FEC ID number of contributing federal political committee. **C** C00082792

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2015

Transaction ID : SA11.35068

Amount of Each Receipt this Period
 2000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ESOP PAC

Mailing Address 1726 M. STREET, N.W.
SUITE 501

City WASHINGTON State DC Zip Code 20036-4522

FEC ID number of contributing federal political committee. **C** C00196089

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2015

Transaction ID : SA11.35065

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

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 119 OF 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
GEP ADMINISTRATIVE SERVICES INC EMPLOYEE PAC

Mailing Address 2350 KERNER BLVD SUITE 250

City SAN RAFAEL State CA Zip Code 94901-5596

FEC ID number of contributing federal political committee. **C** C00439661

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2015

Transaction ID : SA11.35071

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
HOLDEN INDUSTRIES INC PAC

Mailing Address 500 LAKE COOK RD SUITE 400

City DEERFIELD State IL Zip Code 60015-5269

FEC ID number of contributing federal political committee. **C** C00543561

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2015

Transaction ID : SA11.35074

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
INTERNATIONAL COUNCIL OF SHOPPING CENTERS PAC

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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2015

Transaction ID : SA11.35060

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

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 120 OF 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
INVESTMENT COMPANY INSTITUTE ICI PAC

Mailing Address 1401 H STREET NW #1200

City WASHINGTON State DC Zip Code 20005-2110

FEC ID number of contributing federal political committee. **C** C00105981

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 7500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2015

Transaction ID : SA11.35054

Amount of Each Receipt this Period
 2500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOHNSON & JOHNSON PAC

Mailing Address ONE JOHNSON & JOHNSON PLAZA

City NEW BRUNSWICK State NJ Zip Code 08933-0001

FEC ID number of contributing federal political committee. **C** C00010983

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2015

Transaction ID : SA11.35059

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MESSER CONSTRUCTION CO PAC

Mailing Address 5158 FISHWICK DR

City CINCINNATI State OH Zip Code 45216-2216

FEC ID number of contributing federal political committee. **C** C00435990

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2015

Transaction ID : SA11.35069

Amount of Each Receipt this Period
 2000.00

CONTRIBUTION

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 121 OF 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
MMC CORP PAC

Mailing Address 10955 LOWELL STE 350

City OVERLAND PARK State KS Zip Code 66210-2408

FEC ID number of contributing federal political committee. **C C00509356**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2015

Transaction ID : SA11.35053

Amount of Each Receipt this Period
 2000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MORGAN STANLEY POLITICAL ACTION COMMITTEE

Mailing Address 1585 BROADWAY

City NY State NY Zip Code 10036-8200

FEC ID number of contributing federal political committee. **C C00337626**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2015

Transaction ID : SA11.35076

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF ENROLLED AGENTS

Mailing Address 1120 CONNECTICUT AVE NW STE 460

City WASHINGTON State DC Zip Code 20036-3953

FEC ID number of contributing federal political committee. **C C00415372**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2015

Transaction ID : SA11.35073

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

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 122 OF 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
REALTORS PAC

Mailing Address 430 N. MICHIGAN AVE

City CHICAGO State IL Zip Code 60611-4011

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2015

Transaction ID : SA11.35063

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

Mailing Address 3930 PENDER DRIVE
SUITE 340

City FAIRFAX State VA Zip Code 22030-0986

FEC ID number of contributing federal political committee. **C** C00120030

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2015

Transaction ID : SA11.35080

Amount of Each Receipt this Period
 750.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
SOLAR ENERGY INDUSTRIES ASSOCIATION PAC

Mailing Address 600 14TH STREET NW
#400

City WASHINGTON State DC Zip Code 20005-2013

FEC ID number of contributing federal political committee. **C** C00421982

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2015

Transaction ID : SA11.35078

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

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

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

2750.00

**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 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
VERIZON COMMUNICATIONS INC. GOOD GOVERNMENT CLUB

Mailing Address 1300 I ST. NW
4TH FLOOR

City WASHINGTON State DC Zip Code 20005-3314

FEC ID number of contributing federal political committee. **C C00186288**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2015

Transaction ID : SA11.35055

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
VERIZON COMMUNICATIONS INC. GOOD GOVERNMENT CLUB

Mailing Address 1300 I ST. NW
4TH FLOOR

City WASHINGTON State DC Zip Code 20005-3314

FEC ID number of contributing federal political committee. **C C00186288**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2015

Transaction ID : SA11.35056

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ALTICOR PAC

Mailing Address 7575 FULTON STREET EAST

City ADA State MI Zip Code 49355-0001

FEC ID number of contributing federal political committee. **C C00034884**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11.35139

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

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 124 OF 172
	<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)
Friends of Erik Paulsen

A. AMEREN FED PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1331 PENNSYLVANIA AVE., NW
 SUITE 505S
 City WASHINGTON State DC Zip Code 20004-1710
 FEC ID number of contributing federal political committee. **C C00206136**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015
Transaction ID : SA11.35191
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. BOEING PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1200 WILSON BOULEVARD
 City ARLINGTON State VA Zip Code 22209-2300
 FEC ID number of contributing federal political committee. **C C00142711**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015
Transaction ID : SA11.35184
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. DELOITTE & TOUCHE FEDERAL POLITICAL ACTION CTTE
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 365
 City WASHINGTON State DC Zip Code 20044-0365
 FEC ID number of contributing federal political committee. **C C00211318**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015
Transaction ID : SA11.35186
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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 125 OF 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
DEXTER APACHE HOLDINGS, INC PAC

Mailing Address **2211 WEST GRIMES AVE**

City **FAIRFIELD** State **IA** Zip Code **52556-2681**

FEC ID number of contributing federal political committee. **C C00523613**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SA11.35140

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
GARNEY PAC

Mailing Address **1333 N.W. VIVION ROAD**

City **KANSAS CITY** State **MO** Zip Code **64118-4554**

FEC ID number of contributing federal political committee. **C C00442905**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SA11.35132

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
INDEPENDENT INSURANCE AGENTS PAC

Mailing Address **20 F STREET NW SUITE 610**

City **WASHINGTON** State **DC** Zip Code **20001-6707**

FEC ID number of contributing federal political committee. **C C00022343**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SA11.35187

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

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

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

8500.00

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

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

FOR LINE NUMBER: PAGE 126 OF 172
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
MAKING AMERICA PROSPEROUS PAC

Mailing Address P.O. BOX 2485

City State Zip Code
SPRINGFIELD VA 22152-0485

FEC ID number of contributing federal political committee. **C C00445379**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 31 2015

Transaction ID : SA11.35280

Amount of Each Receipt this Period
300.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MICROSOFT CORP PAC

Mailing Address 16011 NE 36TH WAY

City State Zip Code
REDMOND WA 98052-6301

FEC ID number of contributing federal political committee. **C C00227546**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 31 2015

Transaction ID : SA11.35185

Amount of Each Receipt this Period
2000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS

Mailing Address 2901 TELESTAR COURT

City State Zip Code
FALLS CHURCH VA 22042-1260

FEC ID number of contributing federal political committee. **C C00005249**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 31 2015

Transaction ID : SA11.35135

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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

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

3300.00

**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 127 OF 172
	<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)
Friends of Erik Paulsen

A. NATIONAL ASSOCIATION OF CHAIN DRUG STORES (NACDS)

Full Name (Last, First, Middle Initial)
Mailing Address 1776 WILSON BLVD STE 200

City ARLINGTON State VA Zip Code 22209-2516

FEC ID number of contributing federal political committee. **C C00022368**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11.35190

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

B. PFIZER PAC

Full Name (Last, First, Middle Initial)
Mailing Address 325 7THSTREET NW SUITE 1200

City WASHINGTON State DC Zip Code 20004-2820

FEC ID number of contributing federal political committee. **C C00016683**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11.35133

Amount of Each Receipt this Period
 4000.00

CONTRIBUTION

C. PFIZER PAC

Full Name (Last, First, Middle Initial)
Mailing Address 325 7THSTREET NW SUITE 1200

City WASHINGTON State DC Zip Code 20004-2820

FEC ID number of contributing federal political committee. **C C00016683**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11.35134

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

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: PAGE 128 OF 172
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
PRUDENTIAL FINANCIAL INC, PAC

Mailing Address 751 BROAD STREET

City State Zip Code
NEWARK NJ 07102-3714

FEC ID number of contributing federal political committee. **C C00127779**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 31 2015

Transaction ID : SA11.35136

Amount of Each Receipt this Period
2500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PRUDENTIAL FINANCIAL INC, PAC

Mailing Address 751 BROAD STREET

City State Zip Code
NEWARK NJ 07102-3714

FEC ID number of contributing federal political committee. **C C00127779**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 31 2015

Transaction ID : SA11.35137

Amount of Each Receipt this Period
2500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
RGA REINSURANCE COMPANY PAC

Mailing Address 1370 TIMBERLAKE MANOR PKWY

City State Zip Code
CHESTERFIELD MO 63017-6039

FEC ID number of contributing federal political committee. **C C00461129**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 31 2015

Transaction ID : SA11.35188

Amount of Each Receipt this Period
2000.00
CONTRIBUTION

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 129 OF 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
ST. JUDE MEDICAL PAC

Mailing Address **ONE MASSACHUSETTS AVE., NW
SUITE 330**

City **WASHINGTON** State **DC** Zip Code **20001-1424**

FEC ID number of contributing federal political committee. **C C00305029**

Name of Employer _____ Occupation _____

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ **4000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SA11.35183

Amount of Each Receipt this Period
 _____ **2000.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
UNITED TECHNOLOGIES UTPAC

Mailing Address **1101 PENNSYLVANIA AVENUE, NW
10TH FLOOR**

City **WASHINGTON** State **DC** Zip Code **20004-2566**

FEC ID number of contributing federal political committee. **C C00035683**

Name of Employer _____ Occupation _____

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ **3000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SA11.35189

Amount of Each Receipt this Period
 _____ **1000.00**

CONTRIBUTION

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).....

_____ **3000.00**

_____ **136750.00**

**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 172
	<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)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
ANCHOR BANK

Mailing Address 3950 PINEWOOD LANE NORTH

City State Zip Code
PLYMOUTH MN 55441-9336

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
426.40

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 05 / 2015

Transaction ID : SA15.2467

Amount of Each Receipt this Period
118.66

INTEREST INCOME

B. Full Name (Last, First, Middle Initial)
ANCHOR BANK

Mailing Address 3950 PINEWOOD LANE NORTH

City State Zip Code
PLYMOUTH MN 55441-9336

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
426.40

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2015

Transaction ID : SA15.2466

Amount of Each Receipt this Period
153.31

INTEREST INCOME

C. Full Name (Last, First, Middle Initial)
STAR BANK

Mailing Address 250 PRAIRIE CENTER DR

City State Zip Code
EDEN PRAIRIE MN 55344-5370

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
726.66

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 09 / 2015

Transaction ID : SA15.2523

Amount of Each Receipt this Period
245.27

INTEREST

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

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

517.24

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

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

FOR LINE NUMBER: PAGE 131 OF 172
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Erik Paulsen

A. Full Name (Last, First, Middle Initial)
ANCHOR BANK

Mailing Address 3950 PINEWOOD LANE NORTH

City State Zip Code
PLYMOUTH MN 55441-9336

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
426.40

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 06 / 2015

Transaction ID : SA15.2465

Amount of Each Receipt this Period
 154.43
 INTEREST INCOME

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 / 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 / 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).....

154.43

671.67

**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 132 OF 172			
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) A. AMERICAN EXPRESS			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015	
Mailing Address BOX 0001			Amount of Each Disbursement this Period 7.95	
City LOS ANGELES	State CA	Zip Code 90096	Transaction ID : SB17.I2433	
Purpose of Disbursement CREDIT CARD FEE		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. CMDI--CRIMSON			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015	
Mailing Address 7704 LEESBURG PIKE			Amount of Each Disbursement this Period 233.97	
City FALLS CHURCH	State VA	Zip Code 22043	Transaction ID : SB17.I2444	
Purpose of Disbursement CREDIT CARD FEES		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) C. INTUIT SOFTWARE & SUPPLIES			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015	
Mailing Address 2632 MARINE WAY			Amount of Each Disbursement this Period 358.27	
City MOUNTAIN VIEW	State CA	Zip Code 94093	Transaction ID : SB17.I2451	
Purpose of Disbursement OFFICE SUPPLIES		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional).....	600.19
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 133 OF 172			
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial)
A. GGF ACCOUNTING

Mailing Address 6570 FLYING CLOUD DRIVE
SUITE 0621

City EDEN PRAIRIE State MN Zip Code 55344

Purpose of Disbursement ACCOUNTING SERVICES CONSULTING

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 02 / 2015

Amount of Each Disbursement this Period: 3000.00

Transaction ID : SB17.I2450

Full Name (Last, First, Middle Initial)
B. LLE CAMPAIGN MANAGEMENT

Mailing Address 1230 ORONO OAKS DRIVE

City ORONO State MN Zip Code 55356

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 02 / 2015

Amount of Each Disbursement this Period: 2000.00

Transaction ID : SB17.I2453

Full Name (Last, First, Middle Initial)
C. STAR BANK

Mailing Address 250 PRAIRIE CENTER DR

City EDEN PRAIRIE State MN Zip Code 55344-5370

Purpose of Disbursement RENT

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 02 / 2015

Amount of Each Disbursement this Period: 1100.00

Transaction ID : SB17.I2458

SUBTOTAL of Disbursements This Page (optional) 6100.00

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 134 OF 172	
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) A. STEVEN GORDON & ASSOCIATES			Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015	
Mailing Address 507 CAPITOL COURT NE, #100			Amount of Each Disbursement this Period 523.70	
City WASHINGTON	State DC	Zip Code 20002	Transaction ID : SB17.I2460	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT				
Candidate Name			Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. USPS			Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015	
Mailing Address 8725 COLUMBINE ROAD			Amount of Each Disbursement this Period 1000.00	
City EDEN PRAIRIE	State MN	Zip Code 55344	Transaction ID : SB17.I2462	
Purpose of Disbursement POSTAGE				
Candidate Name			Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input 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 10 / 05 / 2015	
Mailing Address BOX 0001			Amount of Each Disbursement this Period 622.01	
City LOS ANGELES	State CA	Zip Code 90096	Transaction ID : SB17.I2434	
Purpose of Disbursement CREDIT CARD FEE				
Candidate Name			Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional)	2145.71
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 135 OF 172			
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) A. STEPHEN CHANG		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2015
Mailing Address 3098 ONTARIO ROAD		Amount of Each Disbursement this Period 461.75 Transaction ID : SB17.I2407
City LITTLE CANADA	State MN	
Zip Code 55117	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. JACOB COLEMAN		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2015
Mailing Address 2413 DUPONT AVENUE SOUTH APT. 3		Amount of Each Disbursement this Period 461.75 Transaction ID : SB17.I2406
City MINNEAPOLIS	State MN	
Zip Code 55405	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. JOSI HELLIER		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2015
Mailing Address 5941 WOODDALE AVENUE		Amount of Each Disbursement this Period 203.17 Transaction ID : SB17.I2405
City EDINA	State MN	
Zip Code 55424	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1126.67
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 136 OF 172			
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) A. J.P. YATES		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2015
Mailing Address 436 SARATOGA ST SOUTH		Amount of Each Disbursement this Period 901.33 Transaction ID : SB17.I2404
City ST. PAUL	State MN Zip Code 55105	
Purpose of Disbursement PAYROLL	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. CBIZ PAYROLL		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2015
Mailing Address 6040 EARLE BROWN DRIVE SUITE 250		Amount of Each Disbursement this Period 71.81 Transaction ID : SB17.I2403
City BROOKLYN CENTER	State MN Zip Code 55430	
Purpose of Disbursement PAYROLL SERVICES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. CBIZ PAYROLL		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2015
Mailing Address 6040 EARLE BROWN DRIVE SUITE 250		Amount of Each Disbursement this Period 571.17 Transaction ID : SB17.I2408
City BROOKLYN CENTER	State MN Zip Code 55430	
Purpose of Disbursement PAYROLL TAXES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1544.31
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 137 OF 172			
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) A. PUBLIC STORAGE		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2015
Mailing Address 6570 FLYING CLOUD DRIVE		Amount of Each Disbursement this Period 210.00
City EDEN PRAIRIE State MN Zip Code 55344	Purpose of Disbursement RENT	
Candidate Name	Category/Type	Transaction ID : SB17.I2455
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B. SFM		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2015
Mailing Address P.O. BOX 583178		Amount of Each Disbursement this Period 842.00
City MINNEAPOLIS State MN Zip Code 55458	Purpose of Disbursement WORKERS COMP	
Candidate Name	Category/Type	Transaction ID : SB17.I2456
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) C. SHANNA WOODBURY CONSULTING, LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2015
Mailing Address P.O. BOX 120697		Amount of Each Disbursement this Period 10169.37
City ST. PAUL State MN Zip Code 55112	Purpose of Disbursement FINANCE CONSULTING	
Candidate Name	Category/Type	Transaction ID : SB17.I2457
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	11221.37
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 138 OF 172	
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) A. CMDI--CRIMSON		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2015
Mailing Address 7704 LEESBURG PIKE		Amount of Each Disbursement this Period 695.45 Transaction ID : SB17.I2445
City FALLS CHURCH	State VA	
Zip Code 22043	Purpose of Disbursement CREDIT CARD FEES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. STEPHEN CHANG		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2015
Mailing Address 3098 ONTARIO ROAD		Amount of Each Disbursement this Period 107.32 Transaction ID : SB17.I2459
City LITTLE CANADA	State MN	
Zip Code 55117	Purpose of Disbursement MILEAGE REIMBURSEMENT	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. PINNACLE DIRECT		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2015
Mailing Address 15260 113TH STREET NORTH		Amount of Each Disbursement this Period 12985.26 Transaction ID : SB17.I2452
City STILLWATER	State MN	
Zip Code 55082	Purpose of Disbursement DIRECT MAIL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	13788.03
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 139 OF 172	
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) A. LAURIE ESAU		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2015
Mailing Address 1230 ORONO OAKS DRIVE		Amount of Each Disbursement this Period 161.00 Transaction ID : SB17.I2463
City ORONO State MN Zip Code 55356	Purpose of Disbursement TELEPHONE	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. EXORO GROUP		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2015
Mailing Address 10 WEST 100 SOUTH SUITE 300		Amount of Each Disbursement this Period 2586.75 Transaction ID : SB17.I2449
City SALT LAKE CITY State UT Zip Code 84101	Purpose of Disbursement FUNDRAISING EXPENSES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. JACOBSON, MAGNUSON, ANDERSON, & HALLORAN		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2015
Mailing Address 180 EAST FIFTH STREET SUITE 940		Amount of Each Disbursement this Period 590.00 Transaction ID : SB17.I2454
City ST. PAUL State MN Zip Code 55101	Purpose of Disbursement COMPLIANCE CONSULTING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3337.75
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 140 OF 172			
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) A. STEVEN GORDON & ASSOCIATES			Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2015	
Mailing Address 507 CAPITOL COURT NE, #100			Amount of Each Disbursement this Period 1388.17	
City WASHINGTON	State DC	Zip Code 20002	Transaction ID : SB17.I2461	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. CENTURYLINK			Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015	
Mailing Address P.O. BOX 91154			Amount of Each Disbursement this Period 276.96	
City SEATTLE	State WA	Zip Code 98111	Transaction ID : SB17.I2443	
Purpose of Disbursement TELEPHONES		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. CMDI--CRIMSON			Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015	
Mailing Address 7704 LEESBURG PIKE			Amount of Each Disbursement this Period 264.00	
City FALLS CHURCH	State VA	Zip Code 22043	Transaction ID : SB17.I2446	
Purpose of Disbursement CREDIT CARD FEES		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	1929.13
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 141 OF 172	
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) A. CMDI--CRIMSON		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2015
Mailing Address 7704 LEESBURG PIKE		Amount of Each Disbursement this Period 217.45
City FALLS CHURCH	State VA	
Zip Code 22043	Purpose of Disbursement CREDIT CARD FEES	Transaction ID : SB17.I2447
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input 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 10 / 29 / 2015
Mailing Address BOX 0001		Amount of Each Disbursement this Period 5447.27
City LOS ANGELES	State CA	
Zip Code 90096	Purpose of Disbursement CREDIT CARD PAYMENT	Transaction ID : SB17.I2435
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. CMDI--CRIMSON		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2015
Mailing Address 7704 LEESBURG PIKE		Amount of Each Disbursement this Period 800.00
City FALLS CHURCH	State VA	
Zip Code 22043	Purpose of Disbursement COMPLIANCE CONSULTING	Transaction ID : SB17.I2438
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5664.72
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 142 OF 172			
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial)
A. DELTA AIR

Mailing Address P.O. BOX 20706

City ATLANTA State GA Zip Code 30320

Purpose of Disbursement AIR FARE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 10 / 2015

Amount of Each Disbursement this Period: 487.20

Transaction ID : SB17.I2441

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. DELTA AIR

Mailing Address P.O. BOX 20706

City ATLANTA State GA Zip Code 30320

Purpose of Disbursement AIR FARE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 10 / 2015

Amount of Each Disbursement this Period: 487.20

Transaction ID : SB17.I2442

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
C. ESCAPE ADVENTURES

Mailing Address 10575 DISCOVERY DRIVE

City LAS VEGAS State NV Zip Code 89135

Purpose of Disbursement MISCELLANEOUS

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 09 / 19 / 2015

Amount of Each Disbursement this Period: 323.98

Transaction ID : SB17.I2436

[MEMO ITEM]

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 143 OF 172			
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) A. FILOMENA			Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2015
Mailing Address 1063 WISCONSIN AVENUE			Amount of Each Disbursement this Period 210.41
City WASHINGTON	State DC	Zip Code 20007	Transaction ID : SB17.I2439 [MEMO ITEM]
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. WYNN LAS VEGAS HOTEL			Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2015
Mailing Address 3131 SOUTH LAS VEGAS BLVD.			Amount of Each Disbursement this Period 1286.12
City LAS VEGAS	State NV	Zip Code 89109	Transaction ID : SB17.I2437 [MEMO ITEM]
Purpose of Disbursement MISCELLANEOUS		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) C. WYNN LAS VEGAS HOTEL			Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2015
Mailing Address 3131 SOUTH LAS VEGAS BLVD.			Amount of Each Disbursement this Period 512.96
City LAS VEGAS	State NV	Zip Code 89109	Transaction ID : SB17.I2440 [MEMO ITEM]
Purpose of Disbursement HOTEL LODGING		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input 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 144 OF 172			
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) A. CMDI--CRIMSON		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2015
Mailing Address 7704 LEESBURG PIKE		Amount of Each Disbursement this Period 344.64 Transaction ID : SB17.I2448
City FALLS CHURCH	State VA	
Zip Code 22043	Purpose of Disbursement CREDIT CARD FEE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ERIK PAULSEN		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 9158 E. STARING LANE		Amount of Each Disbursement this Period 132.02 Transaction ID : SB17.I2485
City EDEN PRAIRIE	State MN	
Zip Code 55347	Purpose of Disbursement TELEPHONES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input checked="" type="checkbox"/> Primary <input 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 11 / 02 / 2015
Mailing Address BOX 0001		Amount of Each Disbursement this Period 7.95 Transaction ID : SB17.I2468
City LOS ANGELES	State CA	
Zip Code 90096	Purpose of Disbursement CREDIT CARD FEES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	484.61
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 145 OF 172			
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial)
A. GGF ACCOUNTING

Mailing Address 6570 FLYING CLOUD DRIVE
SUITE 0621

City EDEN PRAIRIE State MN Zip Code 55344

Purpose of Disbursement ACCOUNTING SERVICES CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 02 / 2015

Amount of Each Disbursement this Period: 3000.00

Transaction ID : SB17.I2487

Full Name (Last, First, Middle Initial)
B. LLE CAMPAIGN MANAGEMENT

Mailing Address 1230 ORONO OAKS DRIVE

City ORONO State MN Zip Code 55356

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 02 / 2015

Amount of Each Disbursement this Period: 2000.00

Transaction ID : SB17.I2503

Full Name (Last, First, Middle Initial)
C. PUBLIC STORAGE

Mailing Address 6570 FLYING CLOUD DRIVE

City EDEN PRAIRIE State MN Zip Code 55344

Purpose of Disbursement RENT

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 03 / 2015

Amount of Each Disbursement this Period: 210.00

Transaction ID : SB17.I2492

SUBTOTAL of Disbursements This Page (optional) 5210.00

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 146 OF 172			
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) A. JACOB COLEMAN			Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2015	
Mailing Address 2413 DUPONT AVENUE SOUTH APT. 3			Amount of Each Disbursement this Period 461.75	
City MINNEAPOLIS	State MN	Zip Code 55405	Transaction ID : SB17.I2432	
Purpose of Disbursement PAYROLL		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. JOSI HELLIER			Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2015	
Mailing Address 5941 WOODDALE AVENUE			Amount of Each Disbursement this Period 203.18	
City EDINA	State MN	Zip Code 55424	Transaction ID : SB17.I2431	
Purpose of Disbursement PAYROLL		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. DESIREE KOETZLE			Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2015	
Mailing Address 703 RIDGE DRIVE			Amount of Each Disbursement this Period 461.75	
City MCLEAN	State VA	Zip Code 22101	Transaction ID : SB17.I2429	
Purpose of Disbursement PAYROLL		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	1126.68
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 147 OF 172			
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) A. J.P. YATES		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2015
Mailing Address 436 SARATOGA ST SOUTH		Amount of Each Disbursement this Period 901.33 Transaction ID : SB17.I2430
City ST. PAUL	State MN Zip Code 55105	
Purpose of Disbursement PAYROLL	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input 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 11 / 05 / 2015
Mailing Address BOX 0001		Amount of Each Disbursement this Period 1226.26 Transaction ID : SB17.I2469
City LOS ANGELES	State CA Zip Code 90096	
Purpose of Disbursement CREDIT CARD FEES	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. CBIZ PAYROLL		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2015
Mailing Address 6040 EARLE BROWN DRIVE SUITE 250		Amount of Each Disbursement this Period 101.73 Transaction ID : SB17.I2427
City BROOKLYN CENTER	State MN Zip Code 55430	
Purpose of Disbursement PAYROLL SVC	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2229.32
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 148 OF 172			
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial)

A. CBIZ PAYROLL

Mailing Address 6040 EARLE BROWN DRIVE
SUITE 250

City BROOKLYN CENTER State MN Zip Code 55430

Purpose of Disbursement PAYROLL TAXES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 11 / 05 / 2015

Amount of Each Disbursement this Period: 571.16

Transaction ID : SB17.I2428

Full Name (Last, First, Middle Initial)

B. CMDI--CRIMSON

Mailing Address 7704 LEESBURG PIKE

City FALLS CHURCH State VA Zip Code 22043

Purpose of Disbursement CREDIT CARD FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 11 / 05 / 2015

Amount of Each Disbursement this Period: 239.25

Transaction ID : SB17.I2481

Full Name (Last, First, Middle Initial)

C. JOSH MAKOWER

Mailing Address 14300 MIRANDA ROAD

City LOS ALTOS HILLS State CA Zip Code 94022-2047

Purpose of Disbursement IN-KIND CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 11 / 10 / 2015

Amount of Each Disbursement this Period: 6728.50

Transaction ID : SB17.35273

SUBTOTAL of Disbursements This Page (optional)..... 7538.91

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 149 OF 172	
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) A. CENTURYLINK		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2015
Mailing Address P.O. BOX 91154		Amount of Each Disbursement this Period 276.78 Transaction ID : SB17.I2480
City SEATTLE	State WA	
Zip Code 98111	Purpose of Disbursement TELEPHONES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. CMDI--CRIMSON		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2015
Mailing Address 7704 LEESBURG PIKE		Amount of Each Disbursement this Period 1129.17 Transaction ID : SB17.I2482
City FALLS CHURCH	State VA	
Zip Code 22043	Purpose of Disbursement CREDIT CARD FEES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. CMDI--CRIMSON		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2015
Mailing Address 7704 LEESBURG PIKE		Amount of Each Disbursement this Period 102.20 Transaction ID : SB17.I2483
City FALLS CHURCH	State VA	
Zip Code 22043	Purpose of Disbursement CREDIT CARD FEES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1508.15
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 150 OF 172	
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) A. ERIK PAULSEN		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2015
Mailing Address 9158 E. STARING LANE		Amount of Each Disbursement this Period 121.93 Transaction ID : SB17.I2486
City EDEN PRAIRIE State MN Zip Code 55347	Purpose of Disbursement TELEPHONES Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. CMDI--CRIMSON		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2015
Mailing Address 7704 LEESBURG PIKE		Amount of Each Disbursement this Period 49.42 Transaction ID : SB17.I2484
City FALLS CHURCH State VA Zip Code 22043	Purpose of Disbursement CREDIT CARD FEES Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. SHANNA WOODBURY CONSULTING, LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2015
Mailing Address P.O. BOX 120697		Amount of Each Disbursement this Period 17420.59 Transaction ID : SB17.I2493
City ST. PAUL State MN Zip Code 55112	Purpose of Disbursement FINANCE CONSULTING Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	17591.94
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 151 OF 172			
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) A. 6 SMITH		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2015
Mailing Address 294 GROVE LANE EAST		Amount of Each Disbursement this Period 7255.51
City WAYZATA State MN Zip Code 55391	Category/Type	
Purpose of Disbursement FOOD/BEVERAGE	Candidate Name	Transaction ID : SB17.I2494 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. OLYMPIC HILLS GOLF CLUB		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address 10625 MOUNT CURVE ROAD		Amount of Each Disbursement this Period 515.00
City EDEN PRARIE State MN Zip Code 55347	Category/Type	
Purpose of Disbursement FOOD/BEVERAGE	Candidate Name	Transaction ID : SB17.I2495 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input 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 11 / 28 / 2015
Mailing Address BOX 0001		Amount of Each Disbursement this Period 5345.64
City LOS ANGELES State CA Zip Code 90096	Category/Type	
Purpose of Disbursement CREDIT CARD PAYMENT	Candidate Name	Transaction ID : SB17.I2470
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5345.64
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 152 OF 172			
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) A. CAPITOL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015
Mailing Address 300 FIRST STREET, S. E.		Amount of Each Disbursement this Period 464.25
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement FOOD/BEVERAGE	
Candidate Name		Transaction ID : SB17.I2471 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. CAPITOL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015
Mailing Address 300 FIRST STREET, S. E.		Amount of Each Disbursement this Period 342.70
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement FOOD/BEVERAGE	
Candidate Name		Transaction ID : SB17.I2472 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. CMDI--CRIMSON		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2015
Mailing Address 7704 LEESBURG PIKE		Amount of Each Disbursement this Period 800.00
City FALLS CHURCH State VA Zip Code 22043	Purpose of Disbursement COMPLIANCE CONSULTING	
Candidate Name		Transaction ID : SB17.I2473 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

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 153 OF 172			
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) A. DELTA AIR		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2015
Mailing Address P.O. BOX 20706		Amount of Each Disbursement this Period 616.10
City ATLANTA	State GA	Zip Code 30320
Purpose of Disbursement TRAVEL	Category/Type	
Candidate Name	Transaction ID : SB17.I2474	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) B. DELTA AIR		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2015
Mailing Address P.O. BOX 20706		Amount of Each Disbursement this Period 616.10
City ATLANTA	State GA	Zip Code 30320
Purpose of Disbursement TRAVEL	Category/Type	
Candidate Name	Transaction ID : SB17.I2475	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) C. DELTA AIR		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address P.O. BOX 20706		Amount of Each Disbursement this Period 102.10
City ATLANTA	State GA	Zip Code 30320
Purpose of Disbursement TRAVEL	Category/Type	
Candidate Name	Transaction ID : SB17.I2476	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM]	

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 154 OF 172			
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) A. DELTA AIR		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address P.O. BOX 20706		Amount of Each Disbursement this Period 402.10
City ATLANTA	State GA Zip Code 30320	
Purpose of Disbursement TRAVEL	Candidate Name	Transaction ID : SB17.I2477
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. UNITED AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address 77 W. WACKER DRIVE		Amount of Each Disbursement this Period 285.11
City CHICAGO	State IL Zip Code 60601	
Purpose of Disbursement TRAVEL	Candidate Name	Transaction ID : SB17.I2478
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. UNITED AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address 77 W. WACKER DRIVE		Amount of Each Disbursement this Period 285.11
City CHICAGO	State IL Zip Code 60601	
Purpose of Disbursement TRAVEL	Candidate Name	Transaction ID : SB17.I2479
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

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 155 OF 172	
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial)
A. GGF ACCOUNTING

Mailing Address **6570 FLYING CLOUD DRIVE
SUITE 0621**

City **EDEN PRAIRIE** State **MN** Zip Code **55344**

Purpose of Disbursement
ACCOUNTING SERVICES CONSULTING

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
11 / 28 / 2015

Amount of Each Disbursement this Period
3000.00

Transaction ID : **SB17.I2488**

Category/Type

Full Name (Last, First, Middle Initial)
B. JACOBSON, MAGNUSON, ANDERSON, & HALLORAN

Mailing Address **180 EAST FIFTH STREET
SUITE 940**

City **ST. PAUL** State **MN** Zip Code **55101**

Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
11 / 28 / 2015

Amount of Each Disbursement this Period
1275.03

Transaction ID : **SB17.I2489**

Category/Type

Full Name (Last, First, Middle Initial)
C. LLE CAMPAIGN MANAGEMENT

Mailing Address **1230 ORONO OAKS DRIVE**

City **ORONO** State **MN** Zip Code **55356**

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
11 / 28 / 2015

Amount of Each Disbursement this Period
3000.00

Transaction ID : **SB17.I2504**

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... **7275.03**

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 156 OF 172	
	<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)
Friends of Erik Paulsen

A. ORANGE HAT GROUP

Full Name (Last, First, Middle Initial)
Mailing Address **632 N. WASHINGTON ST.
SECOND FLOOR**

City **ALEXANDRIA** State **VA** Zip Code **22314**

Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
11 / 28 / 2015

Amount of Each Disbursement this Period
8550.00

Transaction ID : **SB17.I2490**

Category/Type

B. PINNACLE DIRECT

Full Name (Last, First, Middle Initial)
Mailing Address **15260 113TH STREET NORTH**

City **STILLWATER** State **MN** Zip Code **55082**

Purpose of Disbursement
DIRECT MAIL

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
11 / 28 / 2015

Amount of Each Disbursement this Period
7831.92

Transaction ID : **SB17.I2491**

Category/Type

C. STAR BANK

Full Name (Last, First, Middle Initial)
Mailing Address **250 PRAIRIE CENTER DR**

City **EDEN PRAIRIE** State **MN** Zip Code **55344-5370**

Purpose of Disbursement
RENT

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
11 / 28 / 2015

Amount of Each Disbursement this Period
1112.20

Transaction ID : **SB17.I2496**

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... **17494.12**

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 157 OF 172	
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial)
A. STAR BANK

Mailing Address 250 PRAIRIE CENTER DR

City EDEN PRAIRIE State MN Zip Code 55344-5370

Purpose of Disbursement RENT

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 28 / 2015

Amount of Each Disbursement this Period: 1100.00

Transaction ID : SB17.I2497

Full Name (Last, First, Middle Initial)
B. TOWNSEND GROUP

Mailing Address 1006 PENDLETON STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement FINANCE CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 28 / 2015

Amount of Each Disbursement this Period: 20489.48

Transaction ID : SB17.I2499

Full Name (Last, First, Middle Initial)
C. CASA LUCA

Mailing Address 1099 NEW YORK AVENUE NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement FOOD/BEVERAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 09 / 08 / 2015

Amount of Each Disbursement this Period: 4593.40

Transaction ID : SB17.I2500

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) 21589.48

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 158 OF 172			
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) A. EL CHALAN			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015	
Mailing Address 1924 I STREET NW			Amount of Each Disbursement this Period 476.20	
City WASHINGTON	State DC	Zip Code 20006	Transaction ID : SB17.I2502	
Purpose of Disbursement FOOD/BEVERAGE		Category/ Type	[MEMO ITEM]	
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) B. SIMPLICITY			Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2015	
Mailing Address 6402 ARLINGTON BLVD			Amount of Each Disbursement this Period 211.20	
City FALLS CHURCH	State VA	Zip Code 22042	Transaction ID : SB17.I2501	
Purpose of Disbursement FOOD/BEVERAGE		Category/ Type	[MEMO ITEM]	
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input 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 12 / 01 / 2015	
Mailing Address BOX 0001			Amount of Each Disbursement this Period 7.95	
City LOS ANGELES	State CA	Zip Code 90096	Transaction ID : SB17.I2541	
Purpose of Disbursement CREDIT CARD FEES		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	7.95
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 159 OF 172			
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) A. CMDI--CRIMSON		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2015
Mailing Address 7704 LEESBURG PIKE		Amount of Each Disbursement this Period 1.48 Transaction ID : SB17.I2544
City FALLS CHURCH	State VA	
Zip Code 22043	Purpose of Disbursement CREDIT CARD FEES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. PUBLIC STORAGE		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2015
Mailing Address 6570 FLYING CLOUD DRIVE		Amount of Each Disbursement this Period 210.00 Transaction ID : SB17.I2539
City EDEN PRAIRIE	State MN	
Zip Code 55344	Purpose of Disbursement RENT	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input 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 12 / 07 / 2015
Mailing Address BOX 0001		Amount of Each Disbursement this Period 1069.54 Transaction ID : SB17.I2542
City LOS ANGELES	State CA	
Zip Code 90096	Purpose of Disbursement CREDIT CARD FEES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1281.02
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 160 OF 172	
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) A. JACOB COLEMAN		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2015
Mailing Address 2413 DUPONT AVENUE SOUTH APT. 3		Amount of Each Disbursement this Period 461.75 Transaction ID : SB17.I2522
City MINNEAPOLIS State MN Zip Code 55405	Purpose of Disbursement PAYROLL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. DESIREE KOETZLE		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2015
Mailing Address 703 RIDGE DRIVE		Amount of Each Disbursement this Period 461.75 Transaction ID : SB17.I2521
City MCLEAN State VA Zip Code 22101	Purpose of Disbursement PAYROLL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. J.P. YATES		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2015
Mailing Address 436 SARATOGA ST SOUTH		Amount of Each Disbursement this Period 901.33 Transaction ID : SB17.I2520
City ST. PAUL State MN Zip Code 55105	Purpose of Disbursement PAYROLL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1824.83
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 161 OF 172			
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial)
A. CBIZ PAYROLL

Mailing Address 6040 EARLE BROWN DRIVE
SUITE 250

City BROOKLYN CENTER State MN Zip Code 55430

Purpose of Disbursement PAYROLL SVC

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 12 / 08 / 2015

Amount of Each Disbursement this Period: 69.62

Transaction ID : SB17.I2517

Full Name (Last, First, Middle Initial)
B. CBIZ PAYROLL

Mailing Address 6040 EARLE BROWN DRIVE
SUITE 250

City BROOKLYN CENTER State MN Zip Code 55430

Purpose of Disbursement PAYROLL TAXES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 12 / 08 / 2015

Amount of Each Disbursement this Period: 516.17

Transaction ID : SB17.I2519

Full Name (Last, First, Middle Initial)
C. INTUIT SOFTWARE & SUPPLIES

Mailing Address 2632 MARINE WAY

City MOUNTAIN VIEW State CA Zip Code 94093

Purpose of Disbursement SOFTWARE SUBSCRIPTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 12 / 09 / 2015

Amount of Each Disbursement this Period: 321.77

Transaction ID : SB17.I2549

SUBTOTAL of Disbursements This Page (optional) 907.56

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 162 OF 172			
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) A. CMDI--CRIMSON		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2015
Mailing Address 7704 LEESBURG PIKE		Amount of Each Disbursement this Period 58.24
City FALLS CHURCH	State VA	
Zip Code 22043	Purpose of Disbursement CREDIT CARD FEES	Transaction ID : SB17.I2545
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. CBIZ PAYROLL		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2015
Mailing Address 6040 EARLE BROWN DRIVE SUITE 250		Amount of Each Disbursement this Period 59.78
City BROOKLYN CENTER	State MN	
Zip Code 55430	Purpose of Disbursement PARKING SVC	Transaction ID : SB17.I2518
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. CENTURYLINK		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2015
Mailing Address P.O. BOX 91154		Amount of Each Disbursement this Period 276.77
City SEATTLE	State WA	
Zip Code 98111	Purpose of Disbursement SUBSCRIPTIONS	Transaction ID : SB17.I2543
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	394.79
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 163 OF 172			
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) A. CMDI--CRIMSON		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2015
Mailing Address 7704 LEESBURG PIKE		Amount of Each Disbursement this Period 321.25 Transaction ID : SB17.I2546
City FALLS CHURCH	State VA	
Zip Code 22043	Purpose of Disbursement CREDIT CARD FEES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. CMDI--CRIMSON		Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2015
Mailing Address 7704 LEESBURG PIKE		Amount of Each Disbursement this Period 787.10 Transaction ID : SB17.I2547
City FALLS CHURCH	State VA	
Zip Code 22043	Purpose of Disbursement CREDIT CARD FEES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ERIK PAULSEN		Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2015
Mailing Address 9158 E. STARING LANE		Amount of Each Disbursement this Period 473.65 Transaction ID : SB17.I2509
City EDEN PRAIRIE	State MN	
Zip Code 55347	Purpose of Disbursement TELEPHONE, FOOD & BEVERAGES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1582.00
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 164 OF 172			
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) A. LAURIE ESAU		Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2015
Mailing Address 1230 ORONO OAKS DRIVE		Amount of Each Disbursement this Period 217.50 Transaction ID : SB17.I2505
City ORONO State MN Zip Code 55356	Purpose of Disbursement MILEAGE, TAXI, MEALS	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. MEMBER LUNCH FUND		Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2015
Mailing Address LONGWORTH OFFICE BUILDING		Amount of Each Disbursement this Period 700.00 Transaction ID : SB17.I2510
City WASHINGTON State DC Zip Code 20515	Purpose of Disbursement FOOD/BEVERAGE	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ORANGE HAT GROUP		Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2015
Mailing Address 632 N. WASHINGTON ST. SECOND FLOOR		Amount of Each Disbursement this Period 2850.00 Transaction ID : SB17.I2516
City ALEXANDRIA State VA Zip Code 22314	Purpose of Disbursement WEB SERVICE	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3767.50
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 165 OF 172			
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) A. PINNACLE DIRECT		Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2015
Mailing Address 15260 113TH STREET NORTH		Amount of Each Disbursement this Period 18923.19 Transaction ID : SB17.I2506
City STILLWATER	State MN	
Zip Code 55082	Purpose of Disbursement DIRECT MAIL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. STAR BANK		Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2015
Mailing Address 250 PRAIRIE CENTER DR		Amount of Each Disbursement this Period 1100.00 Transaction ID : SB17.I2508
City EDEN PRAIRIE	State MN	
Zip Code 55344-5370	Purpose of Disbursement RENT	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. TOWNSEND GROUP		Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2015
Mailing Address 1006 PENDLETON STREET		Amount of Each Disbursement this Period 5812.99 Transaction ID : SB17.I2511
City ALEXANDRIA	State VA	
Zip Code 22314	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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	25836.18
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 166 OF 172			
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) A. AMBAR		Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2015
Mailing Address 523 8TH STREET SE		Amount of Each Disbursement this Period 2013.00
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement FOOD/BEVERAGE	Transaction ID : SB17.I2515
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. ATLAS ROOM		Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2015
Mailing Address 1015 H STREET NE		Amount of Each Disbursement this Period 1518.00
City WASHINGTON	State DC	
Zip Code 20002	Purpose of Disbursement FOOD/BEVERAGE	Transaction ID : SB17.I2512
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. HANKS OYSTER BAR		Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2015
Mailing Address 633 PENNSYLVANIA AVE. SE		Amount of Each Disbursement this Period 576.95
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement FOOD/BEVERAGE	Transaction ID : SB17.I2514
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
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 167 OF 172	
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) A. OCCASIONS CATERING		Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2015
Mailing Address 655 TAYLOR STREET NW		Amount of Each Disbursement this Period 1125.00
City WASHINGTON	State DC	
Zip Code 20017	Purpose of Disbursement FOOD/BEVERAGE	Transaction ID : SB17.I2513
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. AMERICAN EXPRESS		Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2015
Mailing Address BOX 0001		Amount of Each Disbursement this Period 7076.25
City LOS ANGELES	State CA	
Zip Code 90096	Purpose of Disbursement CREDIT CARD PAYMENT	Transaction ID : SB17.I2529
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. CAPITOL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015
Mailing Address 300 FIRST STREET, S. E.		Amount of Each Disbursement this Period 379.57
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement FOOD/BEVERAGE	Transaction ID : SB17.I2532
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	7076.25
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 168 OF 172	
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) A. CMDI--CRIMSON		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2015
Mailing Address 7704 LEESBURG PIKE		Amount of Each Disbursement this Period 800.00
City FALLS CHURCH	State VA Zip Code 22043	
Purpose of Disbursement COMPLIANCE CONSULTING	Category/Type	Transaction ID : SB17.I2533 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. CONGRESSIONAL INSTITUTE		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2015
Mailing Address 1700 DIAGONAL ROAD #730		Amount of Each Disbursement this Period 853.00
City ALEXANDRIA	State VA Zip Code 22314	
Purpose of Disbursement REGISTRATION FEE	Category/Type	Transaction ID : SB17.I2535 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ESTIATORIO MILOS		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2015
Mailing Address 125 WEST 55TH STREET		Amount of Each Disbursement this Period 500.00
City NEW YORK	State NY Zip Code 10019	
Purpose of Disbursement FOOD/BEVERAGE	Category/Type	Transaction ID : SB17.I2537 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input 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 169 OF 172			
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) A. FAIRMONT NEWPORT BEACH			Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015
Mailing Address 4500 MACARTHUR BLVD			Amount of Each Disbursement this Period 237.94
City NEWPORT BEACH	State CA	Zip Code 92660	
Purpose of Disbursement TRAVEL		Category/ Type	Transaction ID : SB17.I2530 [MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. FAIRMONT NEWPORT BEACH			Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015
Mailing Address 4500 MACARTHUR BLVD			Amount of Each Disbursement this Period 237.94
City NEWPORT BEACH	State CA	Zip Code 92660	
Purpose of Disbursement TRAVEL		Category/ Type	Transaction ID : SB17.I2531 [MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) C. SOUTHWEST AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2015
Mailing Address PO BOX 36647-1CR			Amount of Each Disbursement this Period 255.98
City DALLAS	State TX	Zip Code 75235	
Purpose of Disbursement TRAVEL		Category/ Type	Transaction ID : SB17.I2534 [MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input 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 170 OF 172	
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) A. VERIZON		Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2015
Mailing Address P.O. BOX 25505		Amount of Each Disbursement this Period 697.28
City LEHIGH VALLEY	State PA	
Purpose of Disbursement TELEPHONES	Zip Code 18002	Transaction ID : SB17.I2536
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. WILDFIRE RESTAURANT		Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2016
Mailing Address 8251 FLYING CLOUD DRIVE		Amount of Each Disbursement this Period 670.01
City EDEN PRAIRIE	State MN	
Purpose of Disbursement FOOD/BEVERAGE	Zip Code 55344	Transaction ID : SB17.I2538
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. SHANNA WOODBURY CONSULTING, LLC		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2015
Mailing Address P.O. BOX 120697		Amount of Each Disbursement this Period 14155.30
City ST. PAUL	State MN	
Purpose of Disbursement FINANCE CONSULTING	Zip Code 55112	Transaction ID : SB17.I2524
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	14155.30
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 171 OF 172			
	<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)
Friends of Erik Paulsen

Full Name (Last, First, Middle Initial) A. DELTA AIR		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2015
Mailing Address P.O. BOX 20706		Amount of Each Disbursement this Period 441.20
City ATLANTA	State GA	
Zip Code 30320	Purpose of Disbursement TRAVEL	Transaction ID : SB17.I2525
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. EXCELSIOR BREW		Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2015
Mailing Address 421 3RD STREET		Amount of Each Disbursement this Period 800.00
City EXCELSIOR	State MN	
Zip Code 55331	Purpose of Disbursement FOOD/BEVERAGE	Transaction ID : SB17.I2527
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. SURLY BREWING		Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2015
Mailing Address 520 MALCOLM AVENUE SE		Amount of Each Disbursement this Period 1901.84
City MINNEAPOLIS	State MN	
Zip Code 55414	Purpose of Disbursement FOOD/BEVERAGE	Transaction ID : SB17.I2526
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
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 172 OF 172			
	<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)
Friends of Erik Paulsen

A. VICTORS ON WATER

Full Name (Last, First, Middle Initial)
Mailing Address 205 WATER STREET

City EXCELSIOR State MN Zip Code 55331

Purpose of Disbursement FOOD/BEVERAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 12 / 01 / 2015

Amount of Each Disbursement this Period: 1000.00

Transaction ID : SB17.I2528

[MEMO ITEM]

B. CMDI--CRIMSON

Full Name (Last, First, Middle Initial)
Mailing Address 7704 LEESBURG PIKE

City FALLS CHURCH State VA Zip Code 22043

Purpose of Disbursement CREDIT CARD FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement: 12 / 31 / 2015

Amount of Each Disbursement this Period: 440.74

Transaction ID : SB17.I2548

C. MAKING AMERICA PROSPEROUS PAC

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 2485

City SPRINGFIELD State VA Zip Code 22152-0485

Purpose of Disbursement IN-KIND CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 12 / 31 / 2015

Amount of Each Disbursement this Period: 300.00

Transaction ID : SB17.35280

SUBTOTAL of Disbursements This Page (optional)..... 740.74

TOTAL This Period (last page this line number only)..... 192425.88