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FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

1 011111 0	For An Aut	horized Com	mittee	Offic	Office Use Only			
NAME OF COMMITTEE (in full)	TYPE OR PRINT		ample: If typing, type er the lines.	12FE4M5				
Gerson for Congress	S							
ADDRESS (number and street)	PO Box 1465							
▼								
Check if different than previously reported. (ACC)	Burnsville			MN 553	37			
	NUMBED W	CITY ▲		STATE A	ZIP CODE ▲			
2. FEC IDENTIFICATION C C00523738	NOMBER V	3. IS THIS REPORT	NEW (N) OR	AMENDED (A)	STATE ▼ DISTRICT MN 02			
4. TYPE OF REPORT ((a) Quarterly Reports:	(Choose One)	o) 12-Day PRE	E-Election Report for t	the:				
April 15 Quarter	hy Bonort (O1)		Primary (12P)	General (12G)	Runoff (12R)			
July 15 Quarterly			Convention (12C)	Special (12S)				
	rterly Report (Q3)	Election on	M M / D	D / Y Y Y Y	in the State of			
January 31 Year	-End Report (YE) (c	30-Day POS	T -Election Report for	the:				
			General (30G)	Runoff (30R)	Special (30S)			
Termination Rep	ort (TER)	Election on	M M / D =	/ Y " Y " Y " Y	in the State of			
5. Covering Period	10 / 01 /	2018	through	M M / D D / Y 12 31	y y y 2018			
I certify that I have examined	Gerson, David, ,		nowledge and belief in	t is true, correct and co	mplete.			
Signature of Treasurer	Gerson, David, , ,		[Electronically Filed]	Date 01	23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
NOTE: Submission of false, err	oneous, or incomplete i	information may	subject the person sig	ning this Report to the pe	enalties of 52 U.S.C. §30109			
Office Use Only				F	FEC FORM 3 (Revised 05/2016)			

SUMMARY PAGE

of Receipts and Disbursements

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FEC Form 3 (Revised 05/2016)

Write or Type Committee Name Gerson for Congress

2018 10 2018 12 01 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 0.00 0.00 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 0.00 0.00 (subtract Line 6(b) from Line 6(a)) 7. Net Operating Expenditures (a) Total Operating Expenditures 0.00 0.00 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 0.00 0.00 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 103539.64 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 275000.00 Schedule C and/or Schedule D).....

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 05/2016)

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Write or Type Committee Name

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

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

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 05/2016)

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COLUMN A COLUMN B II. DISBURSEMENTS **Total This Period Election Cycle-to-Date** 0.00 0.00 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER 0.00 0.00 AUTHORIZED COMMITTEES 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed 0.00 0.00 by the Candidate..... 0.00 0.00 (b) Of All Other Loans (c) TOTAL LOAN REPAYMENTS 0.00 0.00 (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: Individuals/Persons Other 0.00 0.00 Than Political Committees 0.00 0.00 (b) Political Party Committees..... Other Political Committees 0.00 0.00 (such as PACs) TOTAL CONTRIBUTION REFUNDS 0.00 0.00 (add Lines 20(a), (b), and (c))..... 0.00 0.00 21. OTHER DISBURSEMENTS 22. TOTAL DISBURSEMENTS 0.00 0.00 (add Lines 17, 18, 19(c), 20(d), and 21) III. CASH SUMMARY 103539.64 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...... 0.00 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... 103539.64 25. SUBTOTAL (add Line 23 and Line 24)..... 0.00 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...... 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD 103539.64 (subtract Line 26 from Line 25).....

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

PAGE 5 OF

FOR LINE NUMBER:
(check only one)

13a

						130
AME OF COMMITTEE (In Full) Gerson for Congress					Transa	ction ID : SC/10.4392
LOAN SOURCE Full Name (Last,	First, Mi	ddle Initial)			Memo Item	Election: 2012
Gerson, David, Adam, ,					j wemo item	rimary
						General
Mailing Address PO Box 1465						Other (specify)
City		State	ZIP Coc	е		
Burnsville		MN	55337			Personal Funds of the Candidate
Original Amount of Loan		Cumulative Pay	yment To	Date	Bal	ance Outstanding at Close of This Period
16554	.96		7	0.00		16554.96
TERMS Date Incurred		D	Date Due		Interest Rat	
^M 05 ^M / ^D 29 ^D / Y Ž01Ž	Υ	M M / D D	/ Y 1/	1/2020 Y		0.00
List All Endorsers or Guarantors	(if any) t	o Loan Source				
1. Full Name (Last, First, Middle In	,			Name of Em	ployer	
Mailing Address				Occupation		
			ŀ	Amount		
City	State	ZIP Code	Guaranteed Outstanding:		7 7	
2. Full Name (Last, First, Middle Ini	tial)			Name of Em	ployer	
Mailing Address				Occupation		
	T			Amount		
City	State	ZIP Code		Guaranteed Outstanding:		9
3. Full Name (Last, First, Middle In	tial)			Name of Employer		
Mailing Address				Occupation		
	T			Amount		
City	State	ZIP Code		Guaranteed Outstanding:		9 9
4. Full Name (Last, First, Middle In	tial)	'		Name of Em	ployer	
Mailing Address				Occupation		
				Amount		
City	State	ZIP Code		Guaranteed Outstanding:		9 9
SUBTOTALS This Period This Page (c	ntional\					
TO TALE THIS FOR THIS FAGE (C	יףנוטוומו).					16554.96
TOTALS This Period (last page in this	line only	y)			▶	, ,
Carry outstanding balance only to LIN	NE 3, Sc	nedule D, for this	s line. If n	o Schedule	D, carry for	ward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4365
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2012
Gerson, David, Adam, ,	madie miliary	Memo Item Clection: 2012
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
10000.00		0.00 10000.00
TERMS Date Incurred	[Date Due Interest Rate Secured: (If none, enter 0)
M07 ^M / D19 ^D / Y Ž01Ž Y	M M / D D	/ Y YNAY Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	·	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optiona	N	
CODICIALO IIIIS I ellou IIIIS Page (optiona		10000.00
TOTALS This Period (last page in this line o	nly)	······································
Carry outstanding balance only to LINE 3, S	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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OF

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Transaction ID: SC/10.4381 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D24D M 07M Ž01Ž YNA Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

PAGE 8
FOR LINE NUMBER: (check only one)

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				Detailed of	arriiriary r aş					13b
AME OF COMMITTEE (In Full) Gerson for Congress					Transac	tion ID	: SC/10.446	8		
LOAN SOURCE Full Name (Last, Gerson, David, Adam, , Mailing Address PO Box 1465	First, Mid	dle Initial)			Memo Item	G	on: 2012 rimary eneral ther (specif	y) ▼		
City Burnsville		State MN	ZIP Cod 55337	e		×	Personal Fu	nds of the	Cano	didate
Original Amount of Loan Cumulative Payment To			Oate 0.00	Bala	ince Ou	tstanding at		This I	Period	
TERMS Date Incurred Date Due					nterest Rate If none, enter 0.		% (apr)	Secure		No
List All Endorsers or Guarantors		Loan Source								
1. Full Name (Last, First, Middle I	nitial)			Name of Emp	lloyer					
Mailing Address				Occupation						
City State ZIP Code				Amount Guaranteed Outstanding:		,	,			
2. Full Name (Last, First, Middle In	itial)	•		Name of Emp	loyer					
Mailing Address				Occupation						
City	State	ZIP Code		Amount Guaranteed Outstanding:		7	7			
3. Full Name (Last, First, Middle In	itial)			Name of Emp	loyer					
Mailing Address				Occupation						
City	State	ZIP Code		Amount Guaranteed Outstanding:		7	7			
4. Full Name (Last, First, Middle In	itial)	•		Name of Emp	loyer					
Mailing Address				Occupation						
City	State	ZIP Code		Amount Guaranteed Outstanding:		7	7			
SUBTOTALS This Period This Page (··•			7	5.00	
Carry outstanding balance only to LII	NE 3, Sch	edule D, for this	line. If n	o Schedule D	, carry forv	vard to	appropriat	e line of S	umm	arv.

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

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FOR LINE NUMBER: (check only one)

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OF

				3D
AME OF COMMITTEE (In Full) Gerson for Congress			Transaction ID : SC/10.4128	
LOAN SOURCE Full Name (Last, First Gerson, David, Adam, , Mailing Address PO Box 1465	, Middle Initial)		☐ Memo Item	
	Ctata	710.0		_
City Burnsville	State MN	ZIP C 5533	Y Personal Funds of the Candid	date
Original Amount of Loan	Cumulati	ve Payment T	To Date Balance Outstanding at Close of This Pe	eriod
Original Amount of Loan Cumulative Payment To 5000.00			0.00 5000.00	
TERMS Date Incurred		Date Due	le Interest Rate Secured:	
M07 ^M / D26 ^D / Y Z01Z Y	M M /	D D / Y	Y YNAY Y 0.00	No
List All Endorsers or Guarantors (if a	ny) to Loan So	ource		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
			Amount	
City	te ZIP Co	de	Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
			Amount	
City	te ZIP Co	de	Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
			Amount	
City	te ZIP Co	de	Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
			Amount	
City	te ZIP Co	de	Guaranteed Outstanding:	
SUBTOTALS This Period This Page (option	·		, date of	
TOTALS This Period (last page in this line	only)			
Carry outstanding balance only to LINE 3	, Schedule D, f	or this line. I	If no Schedule D, carry forward to appropriate line of Summa	ry.

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

FOR LINE NUMBER: (check only one)

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				13b
NAME OF COMMITTEE (In Full) Gerson for Congress			Tra	ansaction ID : SC/10.4389
9				
LOAN SOURCE Full Name (Last, First, Mid	ddle Initial)		☐ Memo	
Gerson, David, Adam, ,				X Primary General
Mailing Address PO Box 1465				Other (specify) ▼
City	State	ZIP Code		➤ Personal Funds of the Candidate
Burnsville	MN	55337		reisonal runus of the Candidate
Original Amount of Loan	Cumulative Pay	yment To Da	ate	Balance Outstanding at Close of This Period
5000.00	3	7	0.00	5000.00
TERMS Date Incurred		Date Due	Interest (If none,	t Rate Secured:
M08 ^M / D01 ^D / Y Ž01Ž Y	M M / D D	/ Y Y	na ^Y	0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any) t	o Loan Source			
1. Full Name (Last, First, Middle Initial)		١	lame of Employer	
Mailing Address		C	Occupation	
			mount Guaranteed	
City State	City State ZIP Code			· · · · · · · · · · · · · · · · · · ·
2. Full Name (Last, First, Middle Initial)		١	lame of Employer	
Mailing Address		C	Occupation	
			mount	
City	ZIP Code		Guaranteed Outstanding:	9 9
3. Full Name (Last, First, Middle Initial)		N	lame of Employer	
Mailing Address		C	Occupation	
			mount	
City	ZIP Code		Guaranteed Outstanding:	7
4. Full Name (Last, First, Middle Initial)		N	lame of Employer	
Mailing Address		C	Occupation	
			mount	
City State	ZIP Code		Guaranteed Outstanding:	7 7 7
CLIPTOTAL & This Deviced This Dame (anti-one)		'		
SUBTOTALS This Period This Page (optional). TOTALS This Period (last page in this line only			<u>^</u>	5000.00
Carry outstanding balance only to LINE 3. Sci	nedule D for this	s line. If no	Schedule D. carry	forward to appropriate line of Summary

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

FOR LINE NUMBER: (check only one)

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	13b

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Transaction ID: SC/10.4129 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 ^D10^D ^M80^M Ž01Ž YNA Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4470
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Election: 0040
Gerson, David, Adam, ,	viidale Illitial)	☐ Memo Item
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
6.00		0.00 6.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
^M 08 ^M / □10 □ / □ Ž01Ž □ Y	M M / D D	/ Y YNA Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	·	Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (options	al)	
CODICIALS THIS FEHOU THIS FAGE (OPHONE	٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠	6.00
TOTALS This Period (last page in this line of	only)	······································
Carry outstanding balance only to LINE 3,	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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13a 13b

OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4130
LOAN SOURCE Full Name (Last, First, M	Middle Initial)	Memo Item Election: 2012
Gerson, David, Adam, ,	madio miliary	Memo Item Clection: 2012
Mailing Address PO Box 1465		Other (specify) ▼
City	State	ZIP Code Second Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
1000.00	,	0.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M08M / D17D / Y Ž01Ž Y	M M / D D	/ Y YNAY Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any)	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	1	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional	l)·····	1000.00
TOTALS This Period (last page in this line o	nly)	······································
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4131
LOAN SOURCE Full Name (Last, First, I	Middle Initial)	Memo Item Election: 2012
Gerson, David, Adam, ,	viidale iiitialy	Memo Item Clection: 2012
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
1000.00	l ,	0.00 1000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M08M / D20D / Y Ž01Ž Y	M M / D D	0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any) to Loan Source	
Full Name (Last, First, Middle Initial)	<u>, </u>	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
	I	Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
CURTOTAL C This Deviced This Degre (entires	Λ.	
SUBTOTALS This Period This Page (optional		1000.00
TOTALS This Period (last page in this line of	nly)	······································
Carry outstanding balance only to LINE 3, 5	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

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FOR LINE NUMBER: (check only one)

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		Det	alled Summary Page	e	13b	
AME OF COMMITTEE (In Full)		•	Transact	tion ID : SC/10.4442		
Gerson for Congress						
LOAN SOURCE Full Name (Last, First, Mid	ddle Initial)		☐ Memo Item	Election: 2014		
Gerson, David, Adam, ,				x Primary General		
Mailing Address PO Box 1465				Other (specify)		
City	State	ZIP Code				
Burnsville	MN	55337		Personal Funds of the Ca	andidate	
Original Amount of Loan	Cumulative Pay	ment To Date	Balar	nce Outstanding at Close of Thi	is Period	
479.33			0.00	479.:	33	
TERMS Date Incurred	D	ate Due	Interest Rate (If none, enter			
M02M / D22D / Y Ž01Š Y	M M / D D	/ Y 1/1/2020	Y 0.0	% (apr) Yes	x No	
List All Endorsers or Guarantors (if any) t	o Loan Source					
Full Name (Last, First, Middle Initial)		Name	of Employer			
Mailing Address		Occup	ation			
			Amount Guaranteed			
City	ZIP Code	Outsta		7 7 7	_	
2. Full Name (Last, First, Middle Initial)			of Employer			
Mailing Address		Occup	ation			
		Amour Guarar			1	
City	ZIP Code	Outsta		9	_	
3. Full Name (Last, First, Middle Initial)		Name	of Employer			
Mailing Address		Occup	ation			
		Amour			1	
City	ZIP Code	Guarar Outsta		7	_	
4. Full Name (Last, First, Middle Initial)	•	Name	of Employer			
Mailing Address		Occup	ation			
		Amour			7	
City	ZIP Code	Guarar Outsta		7	_	
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Use separate schedule(s) for each category of the Detailed Summary Page

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4444
LOAN SOURCE Full Name (Last, First, I	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item Clection: 2014	
Mailing Address PO Box 1465	Other (specify)	
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
3000.00	,	0.00 3000.00
TERMS Date Incurred	[Date Due Interest Rate Secured: (If none, enter 0)
M02M / D25D / Y Ž01Š Y	M M / D D	7
List All Endorsers or Guarantors (if any) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	<u> </u>	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	!	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
CURTOTALC This Deviced This Days (autisms	.n	
SUBTOTALS This Period This Page (optional		3000.00
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Use separate schedule(s) for each category of the Detailed Summary Page

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OF

										130
AME OF COMMITTEE (In Full) Gerson for Congress					Trans	action I	D : SC/10.	1464		
LOAN SOURCE Full Name (Last, Gerson, David, Adam, , Mailing Address	First, Mic	ddle Initial)			Memo Ite	'''	etion: 20° Primary General Other (spe			
PO Box 1465								, only) \		
City		State MN	ZIP Code 55337			×	Personal	Funds	of the C	andidate
Burnsville Original Amount of Loan				to.	D	olonoo () utotondine	r at Clar	oo of Th	
Original Amount of Loan	.00	Cumulative Pay	ment to ba	0.00		alarice C	Outstanding	y at Glos	3000.	
TERMS Date Incurred		D	ate Due		Interest Ra			S	Secured:	
M03 ^M / D26 ^D / Y Ž013	Υ	M M / D D	/ Y 1/1/2	20Ž0 Y		0.00	% (apı	·) [Yes	x No
List All Endorsers or Guarantors	(if any) t	o Loan Source								
1. Full Name (Last, First, Middle In	nitial)		Na	ame of Emp	ployer					
Mailing Address			O	ccupation						
				mount		-				7
City	State	ZIP Code		uaranteed utstanding:		7			W	_
2. Full Name (Last, First, Middle In	itial)		Na	Name of Employer						
Mailing Address				ccupation						
City	State	ZIP Code	G	nount uaranteed utstanding:		7			4	
3. Full Name (Last, First, Middle In	itial)		Na	ame of Emp	ployer					
Mailing Address			O	ccupation						
City	State	ZIP Code	G	mount uaranteed utstanding:		-7	,			
4. Full Name (Last, First, Middle Initial)			Na	ame of Emp	ployer					
Mailing Address			O	ccupation						
City	State	ZIP Code	G	mount uaranteed utstanding:		- 7				
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carry outstanding balance only to Lif	1L 0, 301	icadie D, ioi tilis	, iiiie. II IIO	ocnedule L	ر, carry ic	, walu l	o appropr	iate iiile	o o ou	minai y.

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

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			Detailed Guillinary I	age	13b
NAME OF COMMITTEE (In Full)			Trans	action ID : SC/10.4502	
Gerson for Congress					
LOAN SOURCE Full Name (Last, First, Mic	ldle Initial)		☐ Memo Itei	m Election: 2014	
Gerson, David, Adam, ,		x Primary			
				General	
Mailing Address PO Box 1465				Other (specify)	
City	State	ZIP Code)		
Burnsville	MN	55337		Personal Funds of the	Candidate
Original Amount of Loan	Cumulative Pay	yment To D	ate Ba	alance Outstanding at Close of T	his Period
4000.00			0.00	4000	0.00
TERMS Date Incurred	D	Date Due	Interest Ra		<u></u> :
M04 ^M / P18 ^D / Y Ž013 Y	M M / D D	/ Y 1		0.00 % (apr) Yes	s x No
List All Endorsers or Guarantors (if any) to	o Loan Source				
1. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
		<u> </u>	Amount		
City	ZIP Code		Guaranteed Outstanding:	7 7 7	
2. Full Name (Last, First, Middle Initial)	<u>'</u>		Name of Employer		
Mailing Address			Occupation		
			Amount		
City State	ZIP Code		Guaranteed Outstanding:	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
3. Full Name (Last, First, Middle Initial)	3. Full Name (Last, First, Middle Initial)				
Mailing Address		1	Occupation		
			Amount		
City	ZIP Code		Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
			Amount		
City State	ZIP Code	I	Guaranteed Outstanding:	7 7 7 7 7	
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Use separate schedule(s) for each category of the Detailed Summary Page

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4545
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item Clection: 2014	
Mailing Address PO Box 1465	Other (specify)	
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
4000.00		0.00 4000.00
TERMS Date Incurred	[Date Due Interest Rate Secured: (If none, enter 0)
M 05M / D13D / Y Z013 Y	M M / D D	/ Y 1Ў1/2Ŏ Y 0.00
List All Endorsers or Guarantors (if any) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	·	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
CURTOTAL C. This Deviced This Daws (antisys	N.	
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Carry outstanding balance only to LINE 3, S	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

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FOR LINE NUMBER: (check only one)

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				13b
NAME OF COMMITTEE (In Full)			Tra	ansaction ID : SC/10.4591
Gerson for Congress				
LOAN SOURCE Full Name (Last, First, Mic	ddle Initial)		☐ Memo	Item Election: 2014
Gerson, David, Adam, ,				x Primary
A4 32 A 11				General
Mailing Address PO Box 1465				Other (specify)
City	State	ZIP Code		Personal Funds of the Candidat
Burnsville	MN	55337		
Original Amount of Loan	Cumulative Pay	yment To Da	ate	Balance Outstanding at Close of This Period
5000.00	7		0.00	5000.00
TERMS Date Incurred	С	Date Due	Interest (If none,	t Rate Secured:
M06 ^M / D10 ^D / Y Ž013 Y	M M / D D	/ Y 1½	1/2Ŏ Y	0.00 % (apr) Yes X N
List All Endorsers or Guarantors (if any) t	o Loan Source			
1. Full Name (Last, First, Middle Initial)		N	lame of Employer	
Mailing Address		C	Occupation	
		A	mount	
City State	ZIP Code		Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)	1	٨	lame of Employer	
Mailing Address		C	Occupation	
			mount	
City	ZIP Code		Guaranteed Outstanding:	9 9 9
3. Full Name (Last, First, Middle Initial)		٨	lame of Employer	
Mailing Address		C	occupation	
		A	mount	
City	ZIP Code		Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initial)		N	lame of Employer	
Mailing Address		C	Occupation	
			mount	
City State	ZIP Code		Guaranteed Outstanding:	7
SUBTOTALS This Period This Page (optional)		<u> </u>		5000.00
TOTALS This Period (last page in this line only				5000.00
Carry outstanding balance only to LINE 3. Sci	nedule D for this	s line. If no	Schedule D. carn	v forward to appropriate line of Summary

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OF

		130
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4622
	1-11- 1141 15	
LOAN SOURCE Full Name (Last, First, Mic Gerson, David, Adam, ,	aaie Initial)	☐ Memo Item Election: 2014 ▼ Primary
Mailing Address PO Box 1465		General Other (specify) ▼
City	State	ZIP Code
Burnsville	MN	55337 Personal Funds of the Candidate
Original Amount of Loan	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period
131.12	,	0.00
TERMS Date Incurred	D	ate Due Interest Rate Secured: (If none, enter 0)
M06M / D30D / Y Ž01Š Y	M M / D D	/ Y 1/1/20 Y 0.00
List All Endorsers or Guarantors (if any) to	o Loan Source	
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	1	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	•	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)		131.12
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Carry outstanding balance only to LINE 3, Sch	nedule D, for this	line. If no Schedule D, carry forward to appropriate line of Summary.

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5169
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item Clection: 2014	
Mailing Address PO Box 1465	Other (specify)	
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
5000.00		0.00 5000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured:
M07 ^M / D05 ^D / Y 2013 Y	M M / D D	0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any	/) to Loan Source	
1. Full Name (Last, First, Middle Initial)	,	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	1	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
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OF

AME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5170
LOAN SOURCE Full Name (Last, First, M Gerson, David, Adam, ,	iddle Initial)	Memo Item Election: 2014 X Primary General
Mailing Address PO Box 1465	Other (specify) ▼	
City	State	ZIP Code * Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan 5000.00	Cumulative Pa	ment To Date Balance Outstanding at Close of This Period 0.00 5000.00
7 7 7	9	9 9 9
TERMS Date Incurred		ate Due Interest Rate Secured: (If none, enter 0)
M07 ^M / D29 ^D / Y Ž013 Y	M M / D D	/
List All Endorsers or Guarantors (if any)	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
	710.0.1	Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed
	Zir Code	Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed
Oity	Zii Oode	Outstanding:
SUBTOTALS This Period This Page (optional)		5000.00
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Carry outstanding balance only to LINE 3 Se	hedule D. for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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OF

		130
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5172
	1-11- 1	T =
Gerson, David, Adam, ,	adie initial)	Memo Item Election: 2014 Primary Occupation
Mailing Address PO Box 1465		General Other (specify) ▼
City	State	ZIP Code ** Personal Funds of the Candidate
Burnsville	MN	55337 Personal Funds of the Candidate
Original Amount of Loan	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period
5000.00	7	0.00 5000.00
TERMS Date Incurred	D	ate Due Interest Rate Secured: (If none, enter 0)
M 08M / D19D / Y Ž013 Y	M M / D D	/ Y 1/1/20 Y 0.00
List All Endorsers or Guarantors (if any) to	o Loan Source	
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	1	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
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		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5173
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item Election: 2014	
Mailing Address PO Box 1465	Other (specify)	
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
5000.00		0.00 5000.00
TERMS Date Incurred	Г	Date Due Interest Rate Secured: (If none, enter 0)
M09M / D12D / Y Ž01Š Y	M M / D D	/ Y 1)/1/20 Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any	/) to Loan Source	
Full Name (Last, First, Middle Initial)	,	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	1	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	•	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
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Carry outstanding balance only to LINE 3,	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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Transaction ID: SC/10.5174 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 3000.00 0.00 3000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D30 D M09M ž013 1/1/20 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 3000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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(check only one)

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		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5202
LOAN SOURCE Full Name (Last, First, N	liddle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item Election: 2014	
Mailing Address PO Box 1465	Other (specify)	
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
5000.00		0.00 5000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured:
M10M / D04D / Y Ž013 Y	M M / D D	/ Y 1ÿ1/2ŏ Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any)	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
2. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
	1	Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)	•	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	· '	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
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TOTALS This Period (last page in this line or	nly)	······································
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Transaction ID: SC/10.5203 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) M 10^M 0.00 ^D16^D ž013 1/1/20 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5205
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item Clection: 2014	
Mailing Address PO Box 1465	Other (specify)	
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
5000.00	,	0.00 5000.00
TERMS Date Incurred	[Date Due Interest Rate Secured: (If none, enter 0)
M11M / D04D / Y Ž01Š Y	M M / D D	/ Y 1//1/20 Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
CURTOTAL C. This Desired This Desire (asking		
SUBTOTALS This Period This Page (optional	11)	5000.00
TOTALS This Period (last page in this line of	only)	······
Carry outstanding balance only to LINE 3,	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5206
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item Election: 2014	
Mailing Address PO Box 1465	Other (specify)	
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
4000.00	,	0.00 4000.00
TERMS Date Incurred]	Date Due Interest Rate Secured: (If none, enter 0)
M11M / D13D / Y 2013 Y	M M / D D	/ Y 1//1/20 Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any)	to Loan Source	
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optiona)	4000 00
COLOTADO TINO I SHOU TINO I AGO (OPLIONA	,	4000.00
TOTALS This Period (last page in this line of	ly)	······································
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Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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OF

		130
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID: SC/10.5207
		·
LOAN SOURCE Full Name (Last, First, Mic Gerson, David, Adam, ,	Idle Initial)	☐ Memo Item Election: 2014 ✓ Primary
Mailing Address PO Box 1465		General Other (specify) ▼
City	State	ZIP Code
Burnsville	MN	55337 Personal Funds of the Candidate
Original Amount of Loan	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period
3000.00	9	0.00 3000.00
TERMS Date Incurred	D	ate Due Interest Rate Secured: (If none, enter 0)
M11M / D19D / Y Ž01Š Y	M M / D D	/ Y 1/1/20 Y 0.00
List All Endorsers or Guarantors (if any) to	o Loan Source	
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	,	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
	•	
SUBTOTALS This Period This Page (optional)		3000.00
TOTALS This Period (last page in this line only	y)	······································
Carry outstanding balance only to LINE 3, Sch	nedule D, for this	line. If no Schedule D, carry forward to appropriate line of Summary.

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

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NAME OF COMMITTEE (In Full)			Tra	ansaction ID : SC/10.5208	
Gerson for Congress					
LOAN SOURCE Full Name (Last, First, Mid	ddle Initial)		☐ Memo	Item Election: 2014	
Gerson, David, Adam, ,				x Primary	
Mailing Address				General	
Mailing Address PO Box 1465				Other (specify) ▼	
City	State	ZIP Code		Personal Funds of the Candid	date
Burnsville	MN	55337		To contain the state of the sta	
Original Amount of Loan	Cumulative Pay	yment To D	ate	Balance Outstanding at Close of This Pe	eriod
4000.00	2		0.00	4000.00	┙
TERMS Date Incurred	D	Date Due	Interest (If none,	st Rate Secured: e, enter 0)	
M11M / D29D / Y Ž013 Y	M M / D D	/ Y 1)	1/2Ŏ Y	0.00 % (apr) Yes	No
List All Endorsers or Guarantors (if any) t	o Loan Source				
1. Full Name (Last, First, Middle Initial)		r	lame of Employer		
Mailing Address		(Occupation		
		A	mount		
City State	ZIP Code	I	Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)	'	١	lame of Employer		
Mailing Address		(Occupation		
			mount		
City State	ZIP Code		Guaranteed Outstanding:		
3. Full Name (Last, First, Middle Initial)		١	lame of Employer		
Mailing Address		(Occupation		
		A	mount		
City State	ZIP Code		Guaranteed Outstanding:	y y	
4. Full Name (Last, First, Middle Initial)		١	lame of Employer		
Mailing Address		(Occupation		
			mount		
City	ZIP Code		Guaranteed Outstanding:		
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Use separate schedule(s) for each category of the Detailed Summary Page

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5209
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item Election: 2014	
Mailing Address PO Box 1465	Other (specify)	
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
4000.00	l ,	0.00 4000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured:
M12M / D09D / Y Ž01Š Y	M M / D D	/ Y 1ÿ1/2ŏ Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any)	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
2. Full Name (Last, First, Middle Initial)	1	Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City State	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	!	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
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Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5210
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item Clection: 2014	
Mailing Address PO Box 1465	Other (specify)	
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
3000.00		0.00 3000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M12M / D16D / Y Ž013 Y	M M / D D	/ Y 1ÿ1/2ŏ Y 0.00
List All Endorsers or Guarantors (if any	/) to Loan Source	
Full Name (Last, First, Middle Initial)	,	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	-	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
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TOTALS This Period (last page in this line	only)	······································
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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5542
LOAN SOURCE Full Name (Last, First, N	liddle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item Election: 2014	
Mailing Address PO Box 1465	Other (specify)	
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
3000.00	ļ,	0.00 3000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M01M / D08D / Y Ž014 Y	M M / D D	/ Y 1ÿ1/2ŏ Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any)	to Loan Source	
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	·	Name of Employer
Mailing Address		Occupation
	T	Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional		
CODICIALS This renor this rage (optional	,	3000.00
TOTALS This Period (last page in this line or	nly)	······································
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

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Transaction ID: SC/10.5543 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 ^D16^D M 01M ž014 1/1/20 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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Transaction ID: SC/10.5544 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 10000.00 0.00 10000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 ^D26^D M 02M ž014 1/1/20 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 10000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5587
LOAN SOURCE Full Name (Last, First, N	liddle Initial)	Election: 0044
Gerson, David, Adam,	☐ Memo Item	
Mailing Address PO Box 1465	Other (specify) ———————————————————————————————————	
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
391.00		0.00 391.00
TERMS Date Incurred]	Date Due Interest Rate Secured: (If none, enter 0)
M10M / D28D / Y Ž01Ă Y	M M / D D	/ Y YNAY Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any)	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	·	Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	•	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional		
- CODICIALS This renou this rage (optional	,	391.00
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Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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NAME OF COMMITTEE (In Full)			Tra	ansaction ID : SC/10.5608
Gerson for Congress				
LOAN SOURCE Full Name (Last, First, Mid	ddle Initial)		☐ Memo	Item Election: 2016
Gerson, David, Adam, ,				x Primary
Mailia a Adalas a				General
Mailing Address PO Box 1465				Other (specify) ▼
City	State	ZIP Code		Personal Funds of the Candida
Burnsville	MN	55337		To soon as a sure of the oral and
Original Amount of Loan	Cumulative Pay	yment To Da	ate	Balance Outstanding at Close of This Peri
3500.00	7		0.00	3500.00
TERMS Date Incurred	С	Date Due	Interest (If none,	t Rate Secured:
M03 ^M / D04 ^D / Y Ž015 Y	M M / D D	/ Y Y	NA Y	0.00 % (apr) Yes X N
List All Endorsers or Guarantors (if any) t	o Loan Source			
1. Full Name (Last, First, Middle Initial)		N	lame of Employer	
Mailing Address		C	Occupation	
		A	mount	
City State	ZIP Code		Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)		٨	lame of Employer	
Mailing Address		C	Occupation	
		A	mount	
City State	ZIP Code		Guaranteed Outstanding:	9 9 9
3. Full Name (Last, First, Middle Initial)		N	lame of Employer	
Mailing Address		C	Occupation	
		A	mount	
City State	ZIP Code		Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initial)		N	lame of Employer	
Mailing Address		C	Occupation	
			mount	
City State	ZIP Code		Guaranteed Outstanding:	7 7
SUBTOTALS This Period This Page (optional)				3500.00
TOTALS This Period (last page in this line only				3300.00
Course substanding balance substanting Co. Co.	andula D. for Att	alima 14 ===	Cahadula D. assu	y famuuud ta annuandista liisa af Ourining
Carry outstanding balance only to LINE 3. Sci	nequie I), for this	s line. It no	Schedule I), carry	v torward to appropriate line of Summary

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Transaction ID: SC/10.5867 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2016 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 ^D12^D ^M80^M Ž015 YNA Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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Transaction ID: SC/10.5980 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2016 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 10000.00 0.00 10000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D08D M09M Ž015 YNA Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 10000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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AME OF COMMITTEE (In Full) Gerson for Congress					Transa	ction ID	: SC/10.60	13		
LOAN SOURCE Full Name (Last, First, Middle Initial) Gerson, David, Adam, , Mailing Address PO Box 1465					Memo Item	×	ion: 2016 Primary General Other (speci			
City Burnsville		State ZIP Code MN 55337				×	Personal F	unds of the	Cano	didate
Original Amount of Loan	unt of Loan Cumulative Payment To			Oate 0.00	Bal	ance O	utstanding a	at Close of 3393	_	Period
TERMS Date Incurred Date Due			_		nterest Rat If none, ente		% (apr)	Secure Ye	- -	No
List All Endorsers or Guarantors (= :	Loan Source								
1. Full Name (Last, First, Middle In	nitial)			Name of Emp	loyer					
Mailing Address	Mailing Address			Occupation						
City	State	ZIP Code		Amount Guaranteed Outstanding:		7	7			
2. Full Name (Last, First, Middle Initial)				Name of Employer						
Mailing Address				Occupation						
City	State	ZIP Code		Amount Guaranteed Outstanding:		7	-,			
3. Full Name (Last, First, Middle Initial)				Name of Employer						
Mailing Address				Occupation						
City	State	ZIP Code		Amount Guaranteed Outstanding:		7	- ,			
4. Full Name (Last, First, Middle Initial)				Name of Employer						
Mailing Address			Occupation							
City	State	ZIP Code		Amount Guaranteed Outstanding:		9	7			
SUBTOTALS This Period This Page (o							,	3393	2.59	
Carry outstanding balance only to LIN	IE 3, Sched	ule D. for this	line. If n	o Schedule D	carry for	ward to	appropria	te line of S	umm	arv.

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NAME OF COMMITTEE (In Full)	Trai	nsaction ID	: SC/10.6284						
Gerson for Congress									
LOAN SOURCE Full Name (Last, First, Mid	ddle Initial)		Memo I	tem Electi	ion: 2016				
Gerson, David, Adam, ,					Primary				
					General				
Mailing Address PO Box 1465 Other (specify) ▼									
City	State ZIP Code								
Burnsville	MN		Personal Funds of the Cand			didate			
Original Amount of Loan Cumulative Payment To D			ate	Balance Ou	utstanding at Close of	This	Period		
50000.00			0.00		500	00.00			
9 9	3		4		7		_		
TERMS Date Incurred		Date Due	Interest (If none,		Secui _	ed:			
M12M / D23D / Y Z01Š Y	M M / D D) / Y Y	NA ^Y Y	0.00	% (apr)	es)	κ No		
List All Endorsers or Guarantors (if any) t	o Loan Source								
1. Full Name (Last, First, Middle Initial)		N	lame of Employer						
Mailing Address		С	Occupation						
		A	mount						
City	ZIP Code		Guaranteed Outstanding:		7				
2. Full Name (Last, First, Middle Initial)	2. Full Name (Last, First, Middle Initial)			Name of Employer					
Mailing Address			occupation						
		A	mount						
City State	ZIP Code	G	luaranteed			1			
			outstanding:	7	7				
3. Full Name (Last, First, Middle Initial)			Name of Employer						
Mailing Address			Occupation						
		Α	mount						
City	ZIP Code		Suaranteed Outstanding:	7	7				
			Name of Employer						
Mailing Address			Occupation						
		A	mount						
City	ZIP Code	G	Guaranteed Outstanding:	,	7				
SUBTOTALS This Period This Page (optional)									
TOTALS This Period (last page in this line only	/)		······		, ,	-			
Carry outstanding balance only to LINE 3, Sci	nedule D. for this	s line. If no	Schedule D. carry	forward to	appropriate line of	Sumn	narv.		

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

FOR LINE NUMBER: (check only one)

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X 13a

OF

		130				
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.6765				
LOAN SOURCE Full Name (Last, First, N	liddle Initial)	Memo Item Election: 2016				
Gerson, David, Adam, ,	Memo Item Primary General					
Mailing Address PO Box 1465 Other (specify) ▼						
City	State	ZIP Code FF007 Personal Funds of the Candidate				
Burnsville	MN	55337				
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period				
25000.00	ļ,	0.00 25000.00				
TERMS Date Incurred	Γ	late Due Interest Rate Secured: (If none, enter 0)				
M03M / D30D / Y Ž016 Y	M M / D D	/ YNAY Y 0.00 % (apr) Yes X No				
List All Endorsers or Guarantors (if any)	to Loan Source					
Full Name (Last, First, Middle Initial)		Name of Employer				
Mailing Address		Occupation				
		Amount				
City State	ZIP Code	Guaranteed Outstanding:				
2. Full Name (Last, First, Middle Initial)		Name of Employer				
Mailing Address		Occupation				
		Amount				
City	ZIP Code	Guaranteed Outstanding:				
3. Full Name (Last, First, Middle Initial)		Name of Employer				
Mailing Address		Occupation				
		Amount				
City	ZIP Code	Guaranteed Outstanding:				
4. Full Name (Last, First, Middle Initial)	,	Name of Employer				
Mailing Address		Occupation				
		Amount				
City State	ZIP Code	Guaranteed Outstanding:				
SUBTOTALS This Period This Page (optional	SUBTOTALS This Period This Page (optional) 25000.00					
TOTALS This Period (last page in this line or	nly)	275000.00				
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.				