

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

12FE4M5

Emmer for Congress

ADDRESS (number and street)

PO Box 998

Check if different than previously reported. (ACC)

Anoka

MN

55303

2. FEC IDENTIFICATION NUMBER

C C00545749

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT NEW OR AMENDED

MN 06

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

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

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

Election on 11 / 04 / 2014 in the State of MN

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

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

Election on / / in the State of

5. Covering Period

10 / 01 / 2014 through 10 / 15 / 2014

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

Type or Print Name of Treasurer Jennifer Niska

Signature of Treasurer Jennifer Niska

[Electronically Filed]

Date

10 / 29 / 2014

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

Table with 8 columns for Office Use Only

FEC FORM 3 (Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Emmer for Congress**

Report Covering the Period: From:   /     To:   /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	167053.28	1727577.77
(b) Total Contribution Refunds (from Line 20(d)) .....	400.00	2325.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	166653.28	1725252.77
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	206941.05	1550328.90
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	1980.12
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	206941.05	1548348.78
8. Cash on Hand at Close of Reporting Period (from Line 27).....	175798.99	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	178182.00	

**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

**Emmer for Congress**

Report Covering the Period: From:   /     To:   /

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	77899.00	962916.03
(ii) Unitemized.....	53154.28	542711.74
(iii) TOTAL of contributions from individuals ▶	131053.28	1505627.77
(b) Political Party Committees.....	0.00	200.00
(c) Other Political Committees (such as PACs).....	36000.00	221750.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	167053.28	1727577.77
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	1980.12
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	167053.28	1729557.89

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	206941.05	1550328.90
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	400.00	2325.00
(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)).....	400.00	2325.00
21. OTHER DISBURSEMENTS .....	0.00	1105.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	207341.05	1553758.90

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	216086.76
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	167053.28
25. SUBTOTAL (add Line 23 and Line 24).....	383140.04
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	207341.05
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	175798.99

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 121
	<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)  
**Emmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Phyllis Pohl**

Mailing Address 10510 Laurel Estates Ln

City State Zip Code  
Lake Worth FL 33449-8639

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**683.00**

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

**Transaction ID : A1146CC34BFC848B198C**

Amount of Each Receipt this Period  
**75.00**

**B.** Full Name (Last, First, Middle Initial)  
**Russell S King**

Mailing Address 3 Red Forest Hts

City State Zip Code  
Saint Paul MN 55127-6353

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

Name of Employer Occupation  
King Capital Corporation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5100.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : A4F1D790E9CA0467EBD3**

Amount of Each Receipt this Period  
**2850.00**

REFUND PENDING

**C.** Full Name (Last, First, Middle Initial)  
**Teresa A Regard**

Mailing Address 720 E Cherry Ln

City State Zip Code  
Arlington Heights IL 60004-3217

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**400.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : AF810E459B53B41F7A0A**

Amount of Each Receipt this Period  
**100.00**

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

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

**3025.00**

**SCHEDULE A (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 121
	<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)  
**Emmer for Congress**

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

Mailing Address 815A Hilltop Ave Ext

City Abingdon State MD Zip Code 21009-1306

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **295.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 11 / 2014

**Transaction ID : A54A2735E5D214033A2C**

Amount of Each Receipt this Period  
**65.00**

**B.** Full Name (Last, First, Middle Initial)  
**Philip E Ritch**

Mailing Address 146 Kaluamoo St

City Kailua State HI Zip Code 96734-2144

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **330.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 14 / 2014

**Transaction ID : AD6D180BD4BBB4D449E2**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 7623 Hayfield Rd

City Alexandria State VA Zip Code 22315-4034

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 08 / 2014

**Transaction ID : AFB5E2F6801ED4417904**

Amount of Each Receipt this Period  
**50.00**

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

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

**165.00**

**SCHEDULE A (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 121
	<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)  
**Emmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Peggy Sauer**

Mailing Address 3100 Edward St NE

City State Zip Code  
Minneapolis MN 55418-2355

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : ADB42EF232D8D424BA7D**

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Dorance David Ryerse JR**

Mailing Address 1520 Green Trees Rd

City State Zip Code  
Wayzata MN 55391-9788

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : AC32971C1A13D4A30877**

Amount of Each Receipt this Period

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

Mailing Address 2455 E Woodstone Dr

City State Zip Code  
Hayden ID 83835-8114

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : A0336CCDA512248DBAD3**

Amount of Each Receipt this Period

**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 8 OF 121
	<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)  
**Emmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Faye I Westall**

Mailing Address 145 Smithfield Way

City State Zip Code  
Fredericksburg VA 22406-8435

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
280.00

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

**Transaction ID : AB39A77B1892045A3B42**

Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
**Mrs Maejel A Graf**

Mailing Address 68 Elena Ave

City State Zip Code  
Atherton CA 94027-4026

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 07 / 2014

**Transaction ID : A78158C97FCF845BF9DD**

Amount of Each Receipt this Period  
400.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr Brian T Jackson**

Mailing Address 7014 Shay Ct

City State Zip Code  
Highland CA 92346-7700

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

Name of Employer Information Requested Occupation Information Requested  
None Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
245.00

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

**Transaction ID : ADF3A73C47E71419EA0B**

Amount of Each Receipt this Period  
30.00

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

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

455.00



**SCHEDULE A (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 121
	<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)  
**Emmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs Joyce E Jones**

Mailing Address 1302 NE Trilein Dr

City Ankeny State IA Zip Code 50021-4510

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **345.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 14 / 2014**

**Transaction ID : AD116E8831BF34A829D7**

Amount of Each Receipt this Period  
**50.00**

**B.** Full Name (Last, First, Middle Initial)  
**Annie Weeks**

Mailing Address 3411 Rock Ln

City Irondale State AL Zip Code 35210-3708

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **535.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 06 / 2014**

**Transaction ID : AA67A7D8ED61C4B51B10**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Judith Somerset Clark**

Mailing Address 19781 Grand View Dr

City Topanga State CA Zip Code 90290-3313

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **700.00**

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

**Transaction ID : A5BC67249354C4717987**

Amount of Each Receipt this Period  
**200.00**

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

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

**350.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 121
	<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)  
**Emmer for Congress**

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

Mailing Address 7535 Utopia Pkwy

City State Zip Code  
Fresh Meadows NY 11366-1500

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
210.00

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

**Transaction ID : A96B9E4C1C40E404C8D3**

Amount of Each Receipt this Period  
40.00

**B.** Full Name (Last, First, Middle Initial)  
**Don Warmington**

Mailing Address 12 Randy Johnson St

City State Zip Code  
Superior WI 54880-5522

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

Name of Employer Occupation  
Superior Bev. Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 15 / 2014

**Transaction ID : A3A2E1EA791C34593A6D**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Robert M Kittredge**

Mailing Address 622 N Dartmouth Rd

City State Zip Code  
Spokane Valley WA 99206-3821

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
520.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 06 / 2014

**Transaction ID : AA8D96A57BD8E437BA81**

Amount of Each Receipt this Period  
50.00

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

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

340.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 121
	<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)  
**Emmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Ruth M Olson**

Mailing Address 3350 Maplewood Ct

City State Zip Code  
Fargo ND 58104-6224

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : A5EB7AD6D1CD44C7390C**

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**Gene Fiscarelli (RET)**

Mailing Address 5020 W Mockingbird Ln

City State Zip Code  
Mc Neal AZ 85617-9677

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : A19F7E3F28A17440FB66**

Amount of Each Receipt this Period

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

Mailing Address PO Box 7066

City State Zip Code  
Carmel By The Sea CA 93921-7066

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : A35FE3DA30CED4E6CA14**

Amount of Each Receipt this Period

**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 12 OF 121
	<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)  
**Emmer for Congress**

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

Mailing Address 6428 Rocky Ln

City Paradise State CA Zip Code 95969-2630

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
269.00

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

**Transaction ID : AB2FB536532DB4167AA1**

Amount of Each Receipt this Period  
76.00

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

Mailing Address 125 Quassaick Ave

City New Windsor State NY Zip Code 12553-6635

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1100.00

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

**Transaction ID : A6B646A82A7DE41FF920**

Amount of Each Receipt this Period  
350.00

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

Mailing Address 3479 Sherman Rd

City Jackson State WI Zip Code 53037-9778

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 14 / 2014

**Transaction ID : AB6DC852D574E41B580D**

Amount of Each Receipt this Period  
75.00

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

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

501.00

**SCHEDULE A (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 121
	<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)  
**Emmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs E Mardell Endresen**

Mailing Address 57 Tennis Club Dr

City Rancho Mirage State CA Zip Code 92270-2572

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

Name of Employer None Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 06 / 2014

**Transaction ID : AFA87120E03D441B2BE8**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 905 10th St S

City Virginia State MN Zip Code 55792-3208

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

Name of Employer Norri Distributing Company Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 14 / 2014

**Transaction ID : A2BAEE8D1D02C4FDA937**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 28655 Old Towne Rd

City Chisago City State MN Zip Code 55013-9504

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

Name of Employer Power Dynamics Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : ACFF1E679F1E94FCCB75**

Amount of Each Receipt this Period  
100.00

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

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

550.00

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

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

FOR LINE NUMBER: PAGE 14 OF 121  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Emmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr Robert E Hall**

Mailing Address 9221 Wadsworth Pkwy

City Broomfield State CO Zip Code 80021-4598

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : AD08AC0101F8F4F18959**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Allen Alrneson**

Mailing Address 225 Ellsworth St SE

City Sleepy Eye State MN Zip Code 56085-1864

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 14 / 2014

**Transaction ID : A84B1088C607E4ED78F9**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 220 Myrtle St. E

City Stillwater State MN Zip Code 55082-5033

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : AC05C5ADF24CA4C1CBF5**

Amount of Each Receipt this Period  
1000.00

**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: PAGE 15 OF 121  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Emmer for Congress**

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

Mailing Address 12494 N Royal Ln

City State Zip Code  
Mequon WI 53092-8554

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
700.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 14 2014

**Transaction ID : A700C72C10E8491BB70**

Amount of Each Receipt this Period  
400.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr Melbourne K McCrea**

Mailing Address 47148 145th St

City State Zip Code  
Twin Brooks SD 57269-5325

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
375.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 14 2014

**Transaction ID : A3708A1F3F0A94F12965**

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
**Miss Virginia H Rahja**

Mailing Address 2940 E 94th PI Apt 1019

City State Zip Code  
Tulsa OK 74137-8724

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 14 2014

**Transaction ID : A87658735BB094F61995**

Amount of Each Receipt this Period  
50.00

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 121
	<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)  
**Emmer for Congress**

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

Mailing Address 3501 White Settlement Rd

City Willow Park	State TX	Zip Code 76087-7209
---------------------	-------------	------------------------

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

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
260.00

Date of Receipt  

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

**Transaction ID : ABF1230387D9142A3BD6**

Amount of Each Receipt this Period  
75.00

**B.** Full Name (Last, First, Middle Initial)  
**Mrs Marina Timmermans**

Mailing Address 1703 Main St

City Lynden	State WA	Zip Code 98264-9115
----------------	-------------	------------------------

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

Name of Employer None	Occupation Homemaker
--------------------------	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
308.00

Date of Receipt  

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

**Transaction ID : AF7691539DB3F463D8FD**

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr James B Salmi**

Mailing Address E5059 Sunset Rd

City Ironwood	State MI	Zip Code 49938-9340
------------------	-------------	------------------------

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

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
353.00

Date of Receipt  

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

**Transaction ID : A813BA145FB3341BEB9D**

Amount of Each Receipt this Period  
100.00

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

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

225.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 121
	<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)  
**Emmer for Congress**

Full Name (Last, First, Middle Initial) <b>Mr. Larry W Weidig</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address 3819 S 18th St		<b>Transaction ID : A57A328B3B38A47A7865</b>
City Sheboygan	State WI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer None	Occupation Retired	Election Cycle-to-Date 275.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Madeleine Soudee</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 02 / 2014
Mailing Address 2325 20th St NW		<b>Transaction ID : ABD115AC2FB9E420E9A1</b>
City Washington	State DC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer None	Occupation Retired	Election Cycle-to-Date 400.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Mary Anne Cole</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 131 Tenbury Rd		<b>Transaction ID : A0EC7F41E93464FAF96B</b>
City Lutherville Timoni	State MD	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
Name of Employer None	Occupation Retired	Election Cycle-to-Date 265.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	135.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 121
	<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)  
**Emmer for Congress**

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

Mailing Address 420 S Banana River Blvd

City Cocoa Beach State FL Zip Code 32931-3321

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **525.00**

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

**Transaction ID : AADB7EE7150914D018FD**

Amount of Each Receipt this Period  
**180.00**

**B.** Full Name (Last, First, Middle Initial)  
**Richard Wulff**

Mailing Address 2240 Superior Ave

City Cumberland State WI Zip Code 54829-9208

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **220.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 06 / 2014

**Transaction ID : AC3137E84063D45D1B57**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 2004 Charter Oaks Ct

City Saint Cloud State MN Zip Code 56303-1211

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

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

**Transaction ID : AF36D2788F14F4D1EBCF**

Amount of Each Receipt this Period  
**100.00**

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

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

**380.00**

**SCHEDULE A (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 121
	<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)  
**Emmer for Congress**

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

Mailing Address 5570 Smetana Dr

City State Zip Code  
Hopkins MN 55343-9022

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

Name of Employer Occupation Information Requested  
Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : AA06819B97D9544BAAA3**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Harold Theisen**

Mailing Address 10010 CO RD 13SE

City State Zip Code  
Delano MN 55328-8200

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

Name of Employer Occupation Information Requested  
retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

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

**Transaction ID : A1BE9B92BF0384D8DA29**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 113 Gloster Rd NW

City State Zip Code  
Lawrenceville GA 30044-4470

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

Name of Employer Occupation Information Requested  
Self-Employed Clergy

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
235.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 14 / 2014

**Transaction ID : AD40C06CC64C54475889**

Amount of Each Receipt this Period  
25.00

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

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

475.00

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

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

FOR LINE NUMBER: PAGE 20 OF 121  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Emmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Robert L Walden**

Mailing Address 34 NW 1144 Pvt Rd

City Leeton State MO Zip Code 64761

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
453.00

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

**Transaction ID : A881E05EA3E12401BBEF**

Amount of Each Receipt this Period  
60.00

**B.** Full Name (Last, First, Middle Initial)  
**Brian Stanley**

Mailing Address 4500 Pecan Meadow Ct

City Fort Worth State TX Zip Code 76140-8508

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
700.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 08 / 2014

**Transaction ID : A95C8ECD9CDB244DB827**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 909 Cottonwood St

City Woodland State CA Zip Code 95695-4314

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
380.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 06 / 2014

**Transaction ID : AADE964FF17024A1E9E9**

Amount of Each Receipt this Period  
45.00

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

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

305.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 121
	<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)  
**Emmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr James M Jones**

Mailing Address 4510 S Komensky Ave

City State Zip Code  
Chicago IL 60632-4032

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Self-Employed REAL ESTATE RENTAL

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : ADBCD6E6DF8D84917ADC**

Amount of Each Receipt this Period

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

Mailing Address 2905 Lexington Ave S

City State Zip Code  
Eagan MN 55121-1589

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Gresser Co. President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : A9047A8FAFF8447A082E**

Amount of Each Receipt this Period

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

Mailing Address 2455 E Woodstone Dr

City State Zip Code  
Hayden ID 83835-8114

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : A4B06F05D3262426CADC**

Amount of Each Receipt this Period

**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 22 OF 121
	<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)  
**Emmer for Congress**

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

Mailing Address 8106 Highwood Dr, Apt Y232

City Minneapolis State MN Zip Code 55438-1054

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

Name of Employer Gray Plant Mooty Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : A4A554FB34FB64FA89BB**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**Joan K Chitrea**

Mailing Address 1980 Silverleaf Cir Unit M207

City Carlsbad State CA Zip Code 92009-8444

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 02 / 2014

**Transaction ID : A7DAE5BEEB42B43DDB7B**

Amount of Each Receipt this Period  
**120.00**

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

Mailing Address 713 Trillium Cir

City Maryville State TN Zip Code 37804-3655

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **560.00**

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

**Transaction ID : A53CEAD10F9DC40DFA2D**

Amount of Each Receipt this Period  
**50.00**

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

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

**1170.00**

**SCHEDULE A (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 121
	<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)  
**Emmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr Max D Linn**

Mailing Address **PO Box 945**

City **Fort Sumner** State **NM** Zip Code **88119-0945**

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2750.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**10 / 14 / 2014**

**Transaction ID : A3A5EF169FE07401DB5D**

Amount of Each Receipt this Period  
**800.00**

**B.** Full Name (Last, First, Middle Initial)  
**Harry J Kirschner**

Mailing Address **2395 Sunset Dr**

City **Ventura** State **CA** Zip Code **93001-2450**

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

Name of Employer **None** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**425.00**

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

**Transaction ID : A60417F4889D148D29A6**

Amount of Each Receipt this Period  
**45.00**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs Margaret Bernheim**

Mailing Address **PO Box 6928**

City **Bend** State **OR** Zip Code **97708-6928**

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

Name of Employer **None** Occupation **Homemaker**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**290.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**10 / 15 / 2014**

**Transaction ID : A861C043F78954276BE4**

Amount of Each Receipt this Period  
**56.00**

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

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

**901.00**

**SCHEDULE A (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 121
	<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)  
**Emmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr James B Salmi**

Mailing Address E5059 Sunset Rd

City Ironwood State MI Zip Code 49938-9340

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
253.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 07 / 2014

**Transaction ID : AB4AD93AB569341028BA**

Amount of Each Receipt this Period  
53.00

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

Mailing Address PO Box 7066

City Carmel By The Sea State CA Zip Code 93921-7066

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 02 / 2014

**Transaction ID : AD0F2F56672FB4B6A9BC**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 713 Trillium Cir

City Maryville State TN Zip Code 37804-3655

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
510.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 02 / 2014

**Transaction ID : A15E3A23D511F488EA14**

Amount of Each Receipt this Period  
25.00

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

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

378.00



**SCHEDULE A (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 121
	<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)  
**Emmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr Frank Guarisco**

Mailing Address **PO Box 579**

City **Patterson** State **LA** Zip Code **70392-0579**

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

Name of Employer **Self-Employed** Occupation **Insurance Agency**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**10 / 02 / 2014**

**Transaction ID : AB9A6FA45B524472FBCF**

Amount of Each Receipt this Period  
**150.00**

**B.** Full Name (Last, First, Middle Initial)  
**Edgar O'Brien**

Mailing Address **5333 Minnehaha Blvd.**

City **Minneapolis** State **MN** Zip Code **55424-1406**

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

Name of Employer **O'Brien-Staley Partners** Occupation **CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**10 / 08 / 2014**

**Transaction ID : A19C7F31AA8474832ACC**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**Mr Herbert Levin**

Mailing Address **724 E Grinnell Dr**

City **Burbank** State **CA** Zip Code **91501-1720**

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **922.00**

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

**Transaction ID : AB64FA25088E04BC9B51**

Amount of Each Receipt this Period  
**50.00**

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

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

**1200.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 121
	<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)  
**Emmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dr Walter T Bew Jr**

Mailing Address 2009 Shore Road

City Linwood State NJ Zip Code 08221-2123

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **258.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 14 / 2014

**Transaction ID : AA555D92C9BBE49C7B8A**

Amount of Each Receipt this Period  
**25.00**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. James M Walsh**

Mailing Address 1454 E Eldridge Ave

City Saint Paul State MN Zip Code 55109-3520

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **375.00**

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

**Transaction ID : A6D29E6AE73D24DE3BAA**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 3479 Sherman Rd

City Jackson State WI Zip Code 53037-9778

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **325.00**

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

**Transaction ID : AA8BAF2BE228C4AF5BC2**

Amount of Each Receipt this Period  
**50.00**

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

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

**125.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 121
	<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)  
**Emmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr William J Cowles**

Mailing Address 9487 Anderson Canyon Rd

City Peshastin State WA Zip Code 98847-9541

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 11 / 2014

**Transaction ID : AAFD5C5B269AF4FCDAE9**

Amount of Each Receipt this Period  
**50.00**

**B.** Full Name (Last, First, Middle Initial)  
**Mr Ferenc Kacsinta**

Mailing Address 7323 Cartwright Ave

City Sun Valley State CA Zip Code 91352-5107

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **592.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 07 / 2014

**Transaction ID : A1118495950874692886**

Amount of Each Receipt this Period  
**150.00**

**C.** Full Name (Last, First, Middle Initial)  
**Dr Walter T Bew Jr**

Mailing Address 2009 Shore Road

City Linwood State NJ Zip Code 08221-2123

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **233.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 06 / 2014

**Transaction ID : A44F81A03BB6F43E7A27**

Amount of Each Receipt this Period  
**35.00**

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

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

**235.00**

**SCHEDULE A (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 121
	<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)  
**Emmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Thomas E Clair**

Mailing Address 302 Cross Creek Ct

City Pittsburgh State PA Zip Code 15237-1700

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **675.00**

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

**Transaction ID : ABC897F669E684004807**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Gregg Dick**

Mailing Address 15613 Highway 27

City Little Falls State MN Zip Code 56345-6566

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

Name of Employer D & D Been Occupation General Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : AF296E75AA36449EB950**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 14921 Roma Dr

City La Mirada State CA Zip Code 90638-3819

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **348.00**

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

**Transaction ID : A6A2CB0ADB74249E783B**

Amount of Each Receipt this Period  
**57.00**

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

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

**557.00**

**SCHEDULE A (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 121
	<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)  
**Emmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr Thomas Healey**

Mailing Address 216 Pleasant St

City State Zip Code  
Rockland MA 02370-1229

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

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

**Transaction ID : AF8ACCE8DE53D41CE834**

Amount of Each Receipt this Period  
750.00

**B.** Full Name (Last, First, Middle Initial)  
**Raymond G Tobin**

Mailing Address PO Box 710218

City State Zip Code  
San Diego CA 92171-0218

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

Name of Employer Information Requested Occupation Information Requested  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1550.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 14 / 2014

**Transaction ID : AD841332DF4254F8E8B2**

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
**Ms Jane Beneke**

Mailing Address 4201 Armstrong Pkwy

City State Zip Code  
Dallas TX 75205-3715

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

Name of Employer Information Requested Occupation Information Requested  
None Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1650.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 14 / 2014

**Transaction ID : AEC3E2E6BE1AB4325973**

Amount of Each Receipt this Period  
600.00

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

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

1650.00

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

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

FOR LINE NUMBER: PAGE 30 OF 121  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Emmer for Congress**

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

Mailing Address 5312 Lexington Ave N

City Shoreview State MN Zip Code 55126-1356

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

Name of Employer Capitol Beverage Sales Occupation Distributor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : ACD17BC2FEEF4493FA26**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Sara Thomas**

Mailing Address 177 N Highland St Apt 4207

City Memphis State TN Zip Code 38111-4777

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
421.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 06 / 2014

**Transaction ID : A683AC41386EC47CD92E**

Amount of Each Receipt this Period  
65.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr Robert T Martin**

Mailing Address 9 Diamond Dr

City Key West State FL Zip Code 33040-5633

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

Name of Employer None Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 14 / 2014

**Transaction ID : AFE6A34EEB7584478BCA**

Amount of Each Receipt this Period  
1000.00

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

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

1315.00

**SCHEDULE A (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 121
	<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)  
**Emmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Joyce M Gale**

Mailing Address 7928 E Pueblo Ave.  
Unit 55

City State Zip Code  
Mesa AZ 85208-6335

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
260.00

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

**Transaction ID : A24A1C91B30F64AE49FD**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Tim Roth**

Mailing Address PO Box 67

City State Zip Code  
Madison MN 56256-0067

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

Name of Employer Occupation  
Madison Beverage Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 15 / 2014

**Transaction ID : ADB7E5593449A42358FB**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 161 Hill Cir W

City State Zip Code  
MN AI.28

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

Name of Employer Occupation  
Sherburne Tile Systems President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 15 / 2014

**Transaction ID : A7B550686E9854FF3AB5**

Amount of Each Receipt this Period  
1000.00

**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 32 OF 121
	<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)  
**Emmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Douglas P Seaton**

Mailing Address 4306 Sunnyside Rd

City	State	Zip Code
Minneapolis	MN	55424-1101

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

Name of Employer	Occupation
Seaton Beck & Peters	Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 08 / 2014

**Transaction ID : A6FEE00FDF69C4156832**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**Ms Cheli Myers**

Mailing Address 3530 Pinehurst Cir

City	State	Zip Code
Dallas	TX	75234-3834

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

Name of Employer	Occupation
Information Requested	Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
299.00

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

**Transaction ID : A4122B5E613584877B5B**

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr Donald G Thomas**

Mailing Address 6250 N Park Ave Apt 201

City	State	Zip Code
Tacoma	WA	98407-2228

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

Name of Employer	Occupation
None	Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
245.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 11 / 2014

**Transaction ID : A49C44F6BE82F45B98B3**

Amount of Each Receipt this Period  
30.00

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

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

2080.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 121
	<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)  
**Emmer for Congress**

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

Mailing Address 737 Jansen Ave. SE

City Hanover State MN Zip Code 55341-4096

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

Name of Employer Super Swivels Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 08 / 2014

**Transaction ID : A444BA1FDE8CF40EDBA6**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr Wesley Anderson**

Mailing Address 459 Passaic Ave Apt 299

City West Caldwell State NJ Zip Code 07006-7464

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 06 / 2014

**Transaction ID : A3020A67E394243DE9F2**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Eric Nussbaum**

Mailing Address 3901 W 25th St

City Minneapolis State MN Zip Code 55416-3803

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
285.00

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

**Transaction ID : A2E0E7A3B93DF4943859**

Amount of Each Receipt this Period  
10.00

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

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

1110.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 121
	<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)  
**Emmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs Eva Maria Duppel**

Mailing Address 701 Hill St Apt 3

City Santa Monica State CA Zip Code 90405-4477

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **700.00**

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

**Transaction ID : A7A3364CE4E9641D3B28**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Elam Baer**

Mailing Address 60 S. 6th St. Ste. 2535

City Minneapolis State MN Zip Code 55402-4406

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

Name of Employer Information Requested Occupation Information Requested

North Central Equity LLC President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 08 / 2014

**Transaction ID : A2CC0FF30CD9F40CCAFB**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address 1616 Blackberry Cir

City Sartell State MN Zip Code 56377-4523

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

Name of Employer Information Requested Occupation Information Requested

Granite Logistics Services, LLC President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3600.00**

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

**Transaction ID : A9DE2A30294324797B33**

Amount of Each Receipt this Period  
**1000.00**

**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: PAGE 35 OF 121  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Emmer for Congress**

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

Mailing Address 24632 165th St NW

City State Zip Code  
Big Lake MN 55309-9664

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

Name of Employer Occupation  
None Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

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

**Transaction ID : AD725E224CEED422E8F8**

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Phyllis Pohl**

Mailing Address 10510 Laurel Estates Ln

City State Zip Code  
Lake Worth FL 33449-8639

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
683.00

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

**Transaction ID : A5A6ED083A2634468837**

Amount of Each Receipt this Period  
75.00

**C.** Full Name (Last, First, Middle Initial)  
**Philip E Ritch**

Mailing Address 146 Kaluamoo St

City State Zip Code  
Kailua HI 96734-2144

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
280.00

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

**Transaction ID : A28117AB51C164218AEC**

Amount of Each Receipt this Period  
25.00

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

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

300.00

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

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

FOR LINE NUMBER: PAGE 36 OF 121  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Emmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Marilyn M Woodhouse**

Mailing Address 650 Ramblewood Rd

City Houston State TX Zip Code 77079-6905

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 14 / 2014

**Transaction ID : A6D4B5CE2535143C78D6**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Earl F Ziemann**

Mailing Address 732 Prigge Rd

City Saint Louis State MO Zip Code 63138-3545

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **240.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 06 / 2014

**Transaction ID : A81C5ECE112254BDE91B**

Amount of Each Receipt this Period  
**60.00**

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

Mailing Address PO Box 630

City Brenham State TX Zip Code 77834-0630

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

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

**Transaction ID : ABD0C0676FA5D4C0CAB9**

Amount of Each Receipt this Period  
**400.00**

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

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

**560.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 121
	<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)  
**Emmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr Donald O Laitinen**

Mailing Address 1470 Bent Hill Rd

City Randolph State VT Zip Code 05060-8829

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
310.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 14 / 2014

**Transaction ID : AFD82A8B595941C2AC6**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Ms Jeannette L Therriault**

Mailing Address 2473 Old Richardson Hwy

City North Pole State AK Zip Code 99705-6094

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

Name of Employer Information Requested Occupation Information Requested  
Self Employed Administrator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
208.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 14 / 2014

**Transaction ID : A93A633263C21405B8C6**

Amount of Each Receipt this Period  
53.00

**C.** Full Name (Last, First, Middle Initial)  
**Liz Young Krause**

Mailing Address 630 Sherman St

City Allegan State MI Zip Code 49010-1451

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

Name of Employer Information Requested Occupation Information Requested  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
215.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 11 / 2014

**Transaction ID : AADCA50A90B4A4E1CB5B**

Amount of Each Receipt this Period  
50.00

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

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

203.00

**SCHEDULE A (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 121
	<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)  
**Emmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Rev Joseph Mendes**

Mailing Address 113 Gloster Rd NW

City State Zip Code  
Lawrenceville GA 30044-4470

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

Name of Employer Occupation  
Self-Employed Clergy

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**210.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 06 / 2014

**Transaction ID : A03E8F3C1A29F4EDC95A**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 1707 Summit Ave

City State Zip Code  
Minneapolis MN 55403-2849

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

Name of Employer Occupation  
Self Employed Investor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 11 / 2014

**Transaction ID : A8C4167C0D0424E2C8BB**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address PO Box 215

City State Zip Code  
East Schodack NY 12063-0215

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**203.00**

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

**Transaction ID : A6B5C825A1AF7491482A**

Amount of Each Receipt this Period  
**25.00**

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

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

**575.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 121
	<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)  
**Emmer for Congress**

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

Mailing Address 921 Lakeview Blvd

City State Zip Code  
Albert Lea MN 56007-1531

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

Name of Employer Occupation Information Requested  
Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 15 / 2014

**Transaction ID : A2D41B38E2AEB4DF9B40**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 332 11th St S

City State Zip Code  
Virginia MN 55792-2914

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

Name of Employer Occupation Information Requested  
Starkovich Distributing, INC. Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 15 / 2014

**Transaction ID : AD45FC1E65DEC4673B83**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Harry J Kirschner**

Mailing Address 2395 Sunset Dr

City State Zip Code  
Ventura CA 93001-2450

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

Name of Employer Occupation Information Requested  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
380.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 06 / 2014

**Transaction ID : AE1B5D9FC7786461EACB**

Amount of Each Receipt this Period  
45.00

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

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

545.00

**SCHEDULE A (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 121
	<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)  
**Emmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ms Jeannette L Therriault**

Mailing Address 2473 Old Richardson Hwy

City North Pole State AK Zip Code 99705-6094

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

Name of Employer Self Employed Occupation Administrator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
208.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 14 / 2014

**Transaction ID : A7299565BF8EC4F4B97E**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 4808 S Arden Ave

City Sioux Falls State SD Zip Code 57103-5246

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
225.00

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

**Transaction ID : A086263AC26B6414EA3A**

Amount of Each Receipt this Period  
35.00

**C.** Full Name (Last, First, Middle Initial)  
**Terrence J Kedrowski**

Mailing Address 2574 Haller Ln E

City Saint Paul State MN Zip Code 55119-6106

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

Name of Employer Xerox Corp Occupation Service Technician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : ACA942D05D5714F92910**

Amount of Each Receipt this Period  
50.00

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

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

135.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 121
	<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)  
**Emmer for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ronald Crislip</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 14 / 2014	
Mailing Address 2319 Tyler St		<b>Transaction ID : ADA9106F91D324ABEA84</b>	
City Jenison	State MI	Zip Code 49428-8744	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer None	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 205.00		

Full Name (Last, First, Middle Initial) <b>B. Carroll A Smith</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 14 / 2014	
Mailing Address 2114 Bradley Pond Rd		<b>Transaction ID : A35CEBA1696E04AF1B95</b>	
City Ellenburg Center	State NY	Zip Code 12934-2112	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 670.00	
Name of Employer Information Requested	Occupation Information Requested		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 970.00		

Full Name (Last, First, Middle Initial) <b>C. Robert Lundquist</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 15 / 2014	
Mailing Address 5445 42nd Avenue South		<b>Transaction ID : A1DB55F31D9A64B4497E</b>	
City Minneapolis	State MN	Zip Code 55417-2231	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00	
Name of Employer Boston Scientific	Occupation Lab Technician		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 375.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	760.00
<b>TOTAL</b> This Period (last page this line number only).....	760.00

**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 121  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Emmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ms Wauldine Borden**

Mailing Address 514 Lexington Rd

City Sapulpa State OK Zip Code 74066-9368

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 06 / 2014

**Transaction ID : A4777AA0D539E45A489E**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Eldon Latham**

Mailing Address 1212 Sunnyside Dr

City Eugene State OR Zip Code 97404-3048

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **280.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 06 / 2014

**Transaction ID : A44A9CA203EA0436B96E**

Amount of Each Receipt this Period  
**60.00**

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

Mailing Address 8184 172nd Ave. SE

City Becker State MN Zip Code 55308-8573

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

Name of Employer IRT Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : A7B8A69B1E6BA4FE688B**

Amount of Each Receipt this Period  
**250.00**

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

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

**560.00**

**SCHEDULE A (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 121
	<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)  
**Emmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Richard H Comer**

Mailing Address 3800 Cedar Point Rd.

City Excelsior	State MN	Zip Code 55331
-------------------	-------------	-------------------

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

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
358.00

Date of Receipt  

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

**Transaction ID : A6EB0462720144BC4817**

Amount of Each Receipt this Period  
46.00

**B.** Full Name (Last, First, Middle Initial)  
**Joe Yee**

Mailing Address 5960 Lake Crest Way

City Sacramento	State CA	Zip Code 95822-3306
--------------------	-------------	------------------------

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

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		06		2014

**Transaction ID : AD6E1FFA404E042B9936**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 3003 Hazelwood St Apt 330

City Saint Paul	State MN	Zip Code 55109-1187
--------------------	-------------	------------------------

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

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
264.00

Date of Receipt  

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

**Transaction ID : AD712E2F07F1D45E9B1C**

Amount of Each Receipt this Period  
35.00

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

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

381.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 121
	<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)  
**Emmer for Congress**

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

Mailing Address 6425 Beach Rd

City Eden Prairie State MN Zip Code 55344-5233

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

Name of Employer Starkey Labs Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : A47222F1E77E04A4BB10**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Philip J. Lindau**

Mailing Address 2825 Medicine Ridge Rd

City Minneapolis State MN Zip Code 55441-3259

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

Name of Employer Pillsbury Occupation Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : A1094F3199F184041ACE**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Ann V Howard**

Mailing Address 50 Jefferson Oval

City Yorktown Heights State NY Zip Code 10598-1310

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
215.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 08 / 2014

**Transaction ID : A5D31CDB2DA394A74916**

Amount of Each Receipt this Period  
35.00

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

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

3535.00

**SCHEDULE A (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 121
	<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)  
**Emmer for Congress**

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

Mailing Address 1210 Amundson Ct

City State Zip Code  
Stillwater MN 55082-4133

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

Name of Employer Occupation  
Hohenstein's Inc. Beverage Distributer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 15 / 2014

**Transaction ID : A1B83CCF508784CBC811**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. J D. Walker**

Mailing Address 6917 Bal Lake Dr

City State Zip Code  
Fort Worth TX 76116-8017

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

Name of Employer Occupation  
None Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

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

**Transaction ID : AE59D4BDD35DD449192F**

Amount of Each Receipt this Period  
30.00

**C.** Full Name (Last, First, Middle Initial)  
**Norman E Rees**

Mailing Address 2406 High Pointe Ct

City State Zip Code  
Fairfield CA 94534-7548

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
220.00

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

**Transaction ID : A986ED331B2C64156A88**

Amount of Each Receipt this Period  
50.00

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

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

330.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 121
	<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)  
**Emmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr Raymond Z Martin**

Mailing Address 428 Spring Grove Rd

City East Earl State PA Zip Code 17519-9420

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

Name of Employer Self-Employed Occupation Truck Driver

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 06 / 2014

**Transaction ID : AD37A6F1A30AD4EC786D**

Amount of Each Receipt this Period  
**150.00**

**B.** Full Name (Last, First, Middle Initial)  
**Barbara Peacock**

Mailing Address 7286 Snowberry Ln

City Canal Winchester State OH Zip Code 43110-9110

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

Name of Employer Nj Realty Inc Occupation Realtor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **475.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 01 / 2014

**Transaction ID : ADF90E0564FD24FCDB55**

Amount of Each Receipt this Period  
**50.00**

**C.** Full Name (Last, First, Middle Initial)  
**Louise L Fines**

Mailing Address 4110 Avondale St

City Minnetonka State MN Zip Code 55345-1805

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

Name of Employer None Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : A5055880FFDDC4F00B35**

Amount of Each Receipt this Period  
**50.00**

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

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

**250.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 121
	<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)  
**Emmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Ilona Kerin**

Mailing Address 6620 Gleason Ter

City State Zip Code  
Minneapolis MN 55439-1131

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**275.00**

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

**Transaction ID : ADE963FB3C79948CF920**

Amount of Each Receipt this Period  
**50.00**

**B.** Full Name (Last, First, Middle Initial)  
**Mr Earl Holt**

Mailing Address 1703 Clarendon St

City State Zip Code  
Longview TX 75601-3529

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 06 / 2014

**Transaction ID : ACC437EB3821D41EBB90**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address 3100 Edward St NE

City State Zip Code  
Minneapolis MN 55418-2355

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

Name of Employer Occupation  
GTN Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**450.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 11 / 2014

**Transaction ID : A371EEFA2AFB14CA49B6**

Amount of Each Receipt this Period  
**250.00**

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

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

**800.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 121
	<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)  
**Emmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Harry J Kirschner**

Mailing Address 2395 Sunset Dr

City State Zip Code  
Ventura CA 93001-2450

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**460.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 14 / 2014

**Transaction ID : A296F612070774913BFC**

Amount of Each Receipt this Period  
**35.00**

**B.** Full Name (Last, First, Middle Initial)  
**Mr Herbert Levin**

Mailing Address 724 E Grinnell Dr

City State Zip Code  
Burbank CA 91501-1720

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

Name of Employer Occupation  
Self-Employed Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**872.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 07 / 2014

**Transaction ID : AF9EE1D4B570C49C6A76**

Amount of Each Receipt this Period  
**75.00**

**C.** Full Name (Last, First, Middle Initial)  
**Mr Dana Hellyer**

Mailing Address PO Box 1043

City State Zip Code  
Baker MT 59313-1043

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

Name of Employer Occupation  
Self-Employed Rancher

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**355.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 14 / 2014

**Transaction ID : A086AA57B963145BCB95**

Amount of Each Receipt this Period  
**77.00**

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

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

**187.00**

**SCHEDULE A (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 121
	<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)  
**Emmer for Congress**

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

Mailing Address 330 Silk Mill Pl

City San Marcos State CA Zip Code 92069-6600

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 07 / 2014

**Transaction ID : A6BCC6E0C4F8E4F80B4A**

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
**Steven J Fraasch**

Mailing Address 19263 81st Pl N

City Maple Grove State MN Zip Code 55311-1624

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

Name of Employer Medtronic Occupation Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 02 / 2014

**Transaction ID : ABA7F605B7675430D88B**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 21626 King Rd

City Little Falls State MN Zip Code 56345-5728

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
235.00

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

**Transaction ID : AA5379BB756B44786B82**

Amount of Each Receipt this Period  
35.00

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

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

535.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 121
	<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)  
**Emmer for Congress**

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

Mailing Address 16181 Andrie St. NW

City Anoka State MN Zip Code 55303-3195

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

Name of Employer Dorsey and Whitney, LLP Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 05 / 2014

**Transaction ID : AA6CBB87E96574CFE827**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Edmund D O'Leary**

Mailing Address 39 Eastwood Circuit

City West Roxbury State MA Zip Code 02132-5537

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

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

**Transaction ID : A2F0F53E1BC3645A4A7C**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 332 White Oak Tree Ln

City Sevierville State TN Zip Code 37876-2374

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
225.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 02 / 2014

**Transaction ID : A4838DB7E4AD2492BB16**

Amount of Each Receipt this Period  
200.00

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 121
	<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)  
**Emmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr Richard S Griffith**

Mailing Address P.O. Box 91610

City State Zip Code  
Lafayette LA 70509-1610

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Self-Employed Investor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : ADB3B368B58DA44BD983**

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**Todd Hill**

Mailing Address 8924 Willowby Xing

City State Zip Code  
Osseo MN 55311-1130

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Cook Hill Girard Associates Managing Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : AD12A059FFDF14189B6E**

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**Miss Barbara Rose Grimaldi**

Mailing Address PO Box 6040

City State Zip Code  
Miramar Beach FL 32550-1001

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : A52D60493C7494F6AAAC**

Amount of Each Receipt this Period

**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 53 OF 121
	<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)  
**Emmer for Congress**

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

Mailing Address 20035 Auburn St NW

City Elk River State MN Zip Code 55330-2239

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

Name of Employer Sherburne County Sheriff's Department Occupation Officer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **395.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : AA7CBFDD2FD574D85A09**

Amount of Each Receipt this Period  
**125.00**

**B.** Full Name (Last, First, Middle Initial)  
**Carroll A Smith**

Mailing Address 2114 Bradley Pond Rd

City Ellenburg Center State NY Zip Code 12934-2112

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 06 / 2014

**Transaction ID : A8A06A5E24CE8481B9DD**

Amount of Each Receipt this Period  
**300.00**

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

Mailing Address 4609 Cedar Island Dr

City Eveleth State MN Zip Code 55734-4036

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

Name of Employer CIK Management Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

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

**Transaction ID : A870DBB7F5F0C43918B8**

Amount of Each Receipt this Period  
**100.00**

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

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

**525.00**

**SCHEDULE A (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 121
	<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)  
**Emmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Audrey M Brinkman**

Mailing Address 219 Snetting Dr.

City State Zip Code  
Thief River Falls MN 56701-4609

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
290.00

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

**Transaction ID : A33E6195A36B04932AC6**

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
**Dicey S Childers**

Mailing Address 8517 Joy Rd

City State Zip Code  
Blountsville AL 35031-4489

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
305.00

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

**Transaction ID : A5AB1776D8E00494FBC5**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Miss Hazel Terry**

Mailing Address 306 57th Ave

City State Zip Code  
Meridian MS 39307-6613

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
215.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 03 / 2014

**Transaction ID : AB94CB2BC8BE84350987**

Amount of Each Receipt this Period  
40.00

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

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

190.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 121
	<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)  
**Emmer for Congress**

Full Name (Last, First, Middle Initial) <b>Dr. Walter Lung</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 09 / 2014
Mailing Address 4244 Huanui St		<b>Transaction ID : A92D980D4D8C34AAB83F</b>
City Honolulu	State HI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 136.00
Name of Employer None	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 256.00	

Full Name (Last, First, Middle Initial) <b>Wayne Hogleund</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 14 / 2014
Mailing Address 11646 Laketown View		<b>Transaction ID : A44F1F7CF3F5C4B2DAAA</b>
City Albertville	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>George C Avent</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 06 / 2014
Mailing Address PO Box 210		<b>Transaction ID : A0AB893FE6A5E41238F0</b>
City Kingstree	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer None	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	786.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 121
	<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)  
**Emmer for Congress**

Full Name (Last, First, Middle Initial) <b>A. Bradner Smith</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address 1819 Hunter Ln		<b>Transaction ID : A5874AB91530F413DA4D</b>
City Mendota Hts	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Gopher Sign Company	Occupation President	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00	

Full Name (Last, First, Middle Initial) <b>B. Joyce M Gale</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 11 / 2014
Mailing Address 7928 E Pueblo Ave. Unit 55		<b>Transaction ID : AAF8CA1F00AF9436D9E8</b>
City Mesa	State AZ	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer None	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 360.00	

Full Name (Last, First, Middle Initial) <b>C. Madeleine Soudee</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 2325 20th St NW		<b>Transaction ID : AE11F5C29213A4E2CA6A</b>
City Washington	State DC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
Name of Employer None	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 435.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	185.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 121
	<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)  
**Emmer for Congress**

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

Mailing Address 1101 Humphries Rd NW

City Conyers State GA Zip Code 30012-2015

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **435.00**

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

**Transaction ID : AC0284E32E0FA46768EE**

Amount of Each Receipt this Period  
**200.00**

**B.** Full Name (Last, First, Middle Initial)  
**Joseph T O'Neill**

Mailing Address 525 Lexington Pkwy S Apt 505

City Saint Paul State MN Zip Code 55116-1749

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

Name of Employer Information Requested Occupation Information Requested  
 Self Employed Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : A844CF7F178CA4288985**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 10288 Iron Ore Rd

City Conroe State TX Zip Code 77303-2410

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

Name of Employer Information Requested Occupation Information Requested  
 None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **230.00**

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

**Transaction ID : AD9CA87E5C5084D02B11**

Amount of Each Receipt this Period  
**30.00**

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

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

**330.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 121
	<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)  
**Emmer for Congress**

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

Mailing Address 2330 Winfield Ave.

City State Zip Code  
Minneapolis MN 55422-3440

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 11 / 2014

**Transaction ID : A74155B30CF97450EAC4**

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
**Carolyn A Vay**

Mailing Address 14120 Franklin St

City State Zip Code  
Woodbridge VA 22191-2523

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
223.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 14 / 2014

**Transaction ID : A5327086BCD65435194F**

Amount of Each Receipt this Period  
40.00

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

Mailing Address 4744 N Bay Rd

City State Zip Code  
Miami Beach FL 33140-2814

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 06 / 2014

**Transaction ID : A974E042A36F4469894A**

Amount of Each Receipt this Period  
1000.00

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

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

1090.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 121
	<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)  
**Emmer for Congress**

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

Mailing Address 2790 Lindgren Ln

City State Zip Code  
Maple Plain MN 55359-9770

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 08 / 2014

**Transaction ID : A9541BE7893864224B12**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Bonnie J Young**

Mailing Address 2631 W Casas Cir

City State Zip Code  
Tucson AZ 85742-9772

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

Name of Employer Information Requested Occupation Information Requested  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 07 / 2014

**Transaction ID : A509C882BA1864530BA4**

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr Melbourne K McCrea**

Mailing Address 47148 145th St

City State Zip Code  
Twin Brooks SD 57269-5325

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 06 / 2014

**Transaction ID : A3F9459B70DC24CE49F1**

Amount of Each Receipt this Period  
50.00

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

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

350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 121
	<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)  
**Emmer for Congress**

Full Name (Last, First, Middle Initial) <b>Mr John E Pokriots</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 14 / 2014
Mailing Address 1210 Steinway Ave		<b>Transaction ID : AD34EC1BA24194984B40</b>
City Campbell	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Information Requested	Occupation Information Requested	Election Cycle-to-Date 235.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Claire L Rains</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address 420 41st Ave		<b>Transaction ID : A02C2091C27534BBFA25</b>
City San Francisco	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Information Requested None	Occupation Information Requested Retired	Election Cycle-to-Date 675.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Dr Walter T Bew Jr</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address 2009 Shore Road		<b>Transaction ID : A2FC7D8C43529463B906</b>
City Linwood	State NJ	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 53.00
Name of Employer Information Requested	Occupation Information Requested	Election Cycle-to-Date 233.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	178.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 121
	<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)  
**Emmer for Congress**

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

Mailing Address 14921 Roma Dr

City La Mirada State CA Zip Code 90638-3819

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **348.00**

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

**Transaction ID : AC11AEFAC76C04FE19A3**

Amount of Each Receipt this Period  
**58.00**

**B.** Full Name (Last, First, Middle Initial)  
**Mrs Joyce E Jones**

Mailing Address 1302 NE Trilein Dr

City Ankeny State IA Zip Code 50021-4510

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **345.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 14 / 2014

**Transaction ID : AF3D32B73D23F4302AD7**

Amount of Each Receipt this Period  
**90.00**

**C.** Full Name (Last, First, Middle Initial)  
**Dicey S Childers**

Mailing Address 8517 Joy Rd

City Blountsville State AL Zip Code 35031-4489

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **358.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : A1E43610B1238475E8E6**

Amount of Each Receipt this Period  
**53.00**

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

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

**201.00**

**SCHEDULE A (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 121
	<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)  
**Emmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Matthew D Stevens**

Mailing Address 10588 172nd Ln NW

City State Zip Code  
MN 13549

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

Name of Employer Occupation  
CAT Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 15 / 2014

**Transaction ID : A68CB739265714E4FA6D**

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr James F Carlson**

Mailing Address 10334 151st Ave SE

City State Zip Code  
Renton WA 98059-5720

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 03 / 2014

**Transaction ID : AC3147AE91AF34EA9A43**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Peter J Hafiz**

Mailing Address 7080 Steepleview Rd

City State Zip Code  
Saint Paul MN 55125-1573

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

Name of Employer Occupation  
Dejavu of MN President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 15 / 2014

**Transaction ID : A77767CEE7E6D442E9EB**

Amount of Each Receipt this Period  
1000.00

**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 63 OF 121
	<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)  
**Emmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Phyllis Pohl**

Mailing Address 10510 Laurel Estates Ln

City Lake Worth State FL Zip Code 33449-8639

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
533.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 06 / 2014

**Transaction ID : A0A220841A2934DA88FD**

Amount of Each Receipt this Period  
113.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr Phillip Wilk**

Mailing Address 7625 Oneal Ln

City North Little Rock State AR Zip Code 72113-9734

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 06 / 2014

**Transaction ID : ACFF29DCF0E4945039F2**

Amount of Each Receipt this Period  
400.00

**C.** Full Name (Last, First, Middle Initial)  
**Mrs E Mardell Endresen**

Mailing Address 57 Tennis Club Dr

City Rancho Mirage State CA Zip Code 92270-2572

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

Name of Employer None Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

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

**Transaction ID : A822D599AF7B04A28B66**

Amount of Each Receipt this Period  
50.00

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

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

563.00

**SCHEDULE A (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 121
	<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)  
**Emmer for Congress**

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

Mailing Address 47003 333rd Ave.

City Kasota State MN Zip Code 56050-4271

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

Name of Employer AmeriCare Mobility Van Inc. Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 08 / 2014

**Transaction ID : ABC3286512491457799C**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Travis Dahlheimer**

Mailing Address 7771 Odean Ave NE

City Elk River State MN Zip Code 55330-6871

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

Name of Employer Dahlheimer Beverages Occupation Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : A5CD8615B8C83492A830**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Mr Lawrence Framburg**

Mailing Address 1555 N Astor St Apt 33E

City Chicago State IL Zip Code 60610-5775

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **388.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 02 / 2014

**Transaction ID : A01B3033B93EE4E25B82**

Amount of Each Receipt this Period  
**188.00**

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

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

**938.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 121
	<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)  
**Emmer for Congress**

Full Name (Last, First, Middle Initial) <b>A. Loren Corle</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 14 / 2014
Mailing Address 12595 199th Ave NE		<b>Transaction ID : A00421505C0344EFABB2</b>
City State Zip Code New London MN 56273-9732	Amount of Each Receipt this Period 2600.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5200.00
Name of Employer Occupation Unisystems Corp. President	Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Election Cycle-to-Date 5200.00		

Full Name (Last, First, Middle Initial) <b>B. Ms Esther F Constance</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address 141 Meadowlark Dr		<b>Transaction ID : A075DFD71C62C4AE3B96</b>
City State Zip Code Trenton NJ 08690-3547	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 375.00
Name of Employer Occupation Information Requested Information Requested	Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Election Cycle-to-Date 375.00		

Full Name (Last, First, Middle Initial) <b>C. Nathan Dahlheimer</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address 313 E Broadway St		<b>Transaction ID : ABCC1EDFC34174A2B91A</b>
City State Zip Code Monticello MN 55362-9302	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Occupation Information Requested Information Requested	Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Election Cycle-to-Date 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3200.00
<b>TOTAL</b> 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: (check only one)	PAGE 66 OF 121
	<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)  
**Emmer for Congress**

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

Mailing Address 211 4th St. W

City State Zip Code  
Maple Lake MN 55358-2524

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 15 / 2014

**Transaction ID : A65304572120F47DF91E**

Amount of Each Receipt this Period  
4000.00

Reattribution Requested

**B.** Full Name (Last, First, Middle Initial)  
**Mrs Phyllis Pohl**

Mailing Address 720 Milton Rd Apt Northf

City State Zip Code  
Rye NY 10580-3258

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

Name of Employer Information Requested Occupation Information Requested  
None retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
340.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 15 / 2014

**Transaction ID : A7CB171D730564E7EB3E**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Kenneth L Rolfe**

Mailing Address 301 SE Foundation Dr

City State Zip Code  
Dallas OR 97338-9755

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

Name of Employer Information Requested Occupation Information Requested  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 02 / 2014

**Transaction ID : A77C4A1B35C3B456BA02**

Amount of Each Receipt this Period  
150.00

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

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

4250.00

**SCHEDULE A (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 121
	<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)  
**Emmer for Congress**

Full Name (Last, First, Middle Initial) <b>A. Helen R Decker</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 06 / 2014	
Mailing Address PO Box 170009		<b>Transaction ID : A5BA12D4ECFA94DB5838</b>	
City Arlington	State TX	Zip Code 76003-0009	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer None	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) <b>B. Nichalous Dahlheimer</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 15 / 2014	
Mailing Address 16878 170th St SE		<b>Transaction ID : A1A462F32121D411D916</b>	
City Big Lake	State MN	Zip Code 55309-4606	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Dahlheimer Beverages	Occupation Sales		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) <b>C. Mr Ray R Barrett Jr</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 01 / 2014	
Mailing Address HC 34 Box 3		<b>Transaction ID : A2057AEBAE5BC43039CB</b>	
City Midkiff	State TX	Zip Code 79755	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00	
Name of Employer Self-Employed	Occupation Rancher		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1100.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	850.00
<b>TOTAL</b> This Period (last page this line number only).....	[ ]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 121
	<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)  
**Emmer for Congress**

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

Mailing Address 4820 Rolling Green Pkwy

City State Zip Code  
Minneapolis MN 55436-1348

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

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

**Transaction ID : A3360FEBD813E482B949**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 3401 207th PI SE

City State Zip Code  
Bothell WA 98012-1415

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
225.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 14 / 2014

**Transaction ID : ABF3093FC543A44D1A2E**

Amount of Each Receipt this Period  
40.00

**C.** Full Name (Last, First, Middle Initial)  
**Thomas L Ryan**

Mailing Address 6 Forest Gate Cir

City State Zip Code  
Oak Brook IL 60523-2129

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

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

**Transaction ID : A911334588E0D4329961**

Amount of Each Receipt this Period  
200.00

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

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

340.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 121
	<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)  
**Emmer for Congress**

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

Mailing Address 7623 Hayfield Rd

City State Zip Code  
Alexandria VA 22315-4034

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**350.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 07 / 2014

**Transaction ID : AF4DFECD8B8B3410BBF3**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address S5240 Damar Private Dr

City State Zip Code  
Eau Claire WI 54701-9974

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**646.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 14 / 2014

**Transaction ID : A2344459AA07C4A85B98**

Amount of Each Receipt this Period  
**90.00**

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

Mailing Address 420 S Banana River Blvd

City State Zip Code  
Cocoa Beach FL 32931-3321

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**550.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 11 / 2014

**Transaction ID : A079CE10B095C4211B5A**

Amount of Each Receipt this Period  
**25.00**

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

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

**165.00**

**SCHEDULE A (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 121
	<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)  
**Emmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs Rosalie J Williamson**

Mailing Address PO Box 1857

City State Zip Code  
Vero Beach FL 32961-1857

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300.00**

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

**Transaction ID : A3C3019115E7A4549BA5**

Amount of Each Receipt this Period  
**200.00**

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

Mailing Address PO Box 1147

City State Zip Code  
Tallahassee FL 32302-1147

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

Name of Employer Information Requested Occupation Information Requested  
Self-Employed Mechanical Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**625.00**

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

**Transaction ID : AAEE3416CEFCA481BA98**

Amount of Each Receipt this Period  
**375.00**

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

Mailing Address 334 W Cedar St

City State Zip Code  
New Holland PA 17557-1202

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

Name of Employer Information Requested Occupation Information Requested  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**280.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 08 / 2014

**Transaction ID : AB7C5BA50D924491F804**

Amount of Each Receipt this Period  
**50.00**

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

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

**625.00**

**SCHEDULE A (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 121
	<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)  
**Emmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Gene Fiscarelli (RET)**

Mailing Address 5020 W Mockingbird Ln

City Mc Neal	State AZ	Zip Code 85617-9677
-----------------	-------------	------------------------

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

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1775.00

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

**Transaction ID : AD9510FD5BB3748F1949**

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
**Miss Barbara Rose Grimaldi**

Mailing Address PO Box 6040

City Miramar Beach	State FL	Zip Code 32550-1001
-----------------------	-------------	------------------------

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

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 14 / 2014

**Transaction ID : A4C40EA7C209040F2A38**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Gerald R Zachman**

Mailing Address 5249 Ogren Ave NE

City Saint Michael	State MN	Zip Code 55376-3064
-----------------------	-------------	------------------------

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

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : AE1874D0B38DB4811B0E**

Amount of Each Receipt this Period  
500.00

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

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

900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 121
	<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)  
**Emmer for Congress**

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

Mailing Address 12989 Otchipwe Ave N

City State Zip Code  
Stillwater MN 55082-8564

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
275.00

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

**Transaction ID : AB8A62329A19E44CD886**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Truxton Morrison**

Mailing Address 1525 Hunter Dr

City State Zip Code  
Wayzata MN 55391-9661

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

Name of Employer Information Requested Occupation Information Requested  
retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

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

**Transaction ID : A25A6E1728451432AA6E**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr John E Pokriots**

Mailing Address 1210 Steinway Ave

City State Zip Code  
Campbell CA 95008-6329

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
210.00

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

**Transaction ID : A22C1E3EFCC5F4E779B7**

Amount of Each Receipt this Period  
25.00

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

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

1125.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 121
	<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)  
**Emmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Gretchen M Hoffman**

Mailing Address 2528 25th Ave S Unit iB

City State Zip Code  
Fargo ND 58103-5019

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

Name of Employer Occupation  
Self-Employed Registered Nurse

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 14 / 2014

**Transaction ID : AE859E9958ABB4C1C907**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 23077 223rd Ave

City State Zip Code  
Sleepy Eye MN 56085-4133

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 15 / 2014

**Transaction ID : AA64BF0710AE34A6B9A3**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 2960 Gale Rd

City State Zip Code  
Wayzata MN 55391-2626

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

Name of Employer Occupation  
None Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4600.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 11 / 2014

**Transaction ID : AB0472EF5835841258D6**

Amount of Each Receipt this Period  
2000.00

**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 74 OF 121
	<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)  
**Emmer for Congress**

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

Mailing Address 123 Erin Dr

City State Zip Code  
Kerrville TX 78028-4826

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**320.00**

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

**Transaction ID : AB0B6D813D34B41E1BB4**

Amount of Each Receipt this Period  
**50.00**

**B.** Full Name (Last, First, Middle Initial)  
**Tim Peterson**

Mailing Address 12295 162nd St. W

City State Zip Code  
Lakeville MN 55044-9395

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

Name of Employer Occupation  
Sterling Drug Sales

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : ACF972A8F2FCC44E3AD0**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 4721 Annaway Dr

City State Zip Code  
Minneapolis MN 55436-1303

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

Name of Employer Occupation  
Twin Cities Spine Clinic Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 14 / 2014

**Transaction ID : A3BF1E6954545404BA97**

Amount of Each Receipt this Period  
**1000.00**

**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 75 OF 121
	<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)  
**Emmer for Congress**

Full Name (Last, First, Middle Initial) <b>Bill Holden</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 14 / 2014
Mailing Address 4467 Plantation Dr		<b>Transaction ID : AD9CF5C8D0C184BF99AB</b>
City Fair Oaks	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer None	Occupation Retired	Election Cycle-to-Date 300.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Judith Somerset Clark</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 19781 Grand View Dr		<b>Transaction ID : A94351FC5921F491F856</b>
City Topanga	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Information Requested	Occupation Information Requested	Election Cycle-to-Date 500.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Mrs Jean Hyde</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 03 / 2014
Mailing Address 4428 136th PI SE		<b>Transaction ID : AA104351F354C44D29EA</b>
City Bellevue	State WA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 375.00
Name of Employer None	Occupation retired	Election Cycle-to-Date 375.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	775.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 121
	<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)  
**Emmer for Congress**

Full Name (Last, First, Middle Initial) <b>A. Bobby F Harris</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 14 / 2014	
Mailing Address 135 Windsor Dr		<b>Transaction ID : A9272A02D1CD14A77869</b>	
City Calhoun	State GA	Zip Code 30701-2055	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 150.00	
Name of Employer None	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 450.00		

Full Name (Last, First, Middle Initial) <b>B. Thomas E Clair</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 03 / 2014	
Mailing Address 302 Cross Creek Ct		<b>Transaction ID : AA49EC191BADF438080A</b>	
City Pittsburgh	State PA	Zip Code 15237-1700	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 200.00	
Name of Employer None	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 425.00		

Full Name (Last, First, Middle Initial) <b>C. Miss Hazel Terry</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 14 / 2014	
Mailing Address 306 57th Ave		<b>Transaction ID : AEE4CABC8013148A4A9F</b>	
City Meridian	State MS	Zip Code 39307-6613	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 35.00	
Name of Employer None	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	385.00
<b>TOTAL</b> 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 77 OF 121
	<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)  
**Emmer for Congress**

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

Mailing Address **PO Box 477**

City **Hugo** State **MN** Zip Code **55038-0477**

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

Name of Employer **Lametti and Sons Inc** Occupation **Executive**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**10 / 15 / 2014**

**Transaction ID : A1CA2AE5BCEDD418DBFE**

Amount of Each Receipt this Period  
**750.00**

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

Mailing Address **502 N Latham St**

City **Alexandria** State **VA** Zip Code **22304-2208**

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

Name of Employer **None** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

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

**Transaction ID : A6BBBE50B76A44B4B89D**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address **1785 Concordia St**

City **Wayzata** State **MN** Zip Code **55391-9318**

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**10 / 15 / 2014**

**Transaction ID : A3AF4149D0A00467EBC0**

Amount of Each Receipt this Period  
**250.00**

**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 78 OF 121
	<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)  
**Emmer for Congress**

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

Mailing Address 14921 Roma Dr

City La Mirada State CA Zip Code 90638-3819

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
348.00

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

**Transaction ID : AC04045D9487845C7929**

Amount of Each Receipt this Period  
30.00

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

Mailing Address 37045 US Highway 169

City Saint Peter State MN Zip Code 56082-4384

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

Name of Employer None Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

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

**Transaction ID : A30F828A7B3AF4447ABB**

Amount of Each Receipt this Period  
2600.00

**C.** Full Name (Last, First, Middle Initial)  
**Mrs Virginia E Ryerson**

Mailing Address 202 S Santa Rosa Ave

City El Centro State CA Zip Code 92243-5559

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 02 / 2014

**Transaction ID : AA47F494289964AE69FF**

Amount of Each Receipt this Period  
1000.00

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

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

3630.00

**SCHEDULE A (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 121
	<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)  
**Emmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Philip E Ritch**

Mailing Address 146 Kaluamoo St

City State Zip Code  
Kailua HI 96734-2144

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
280.00

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

**Transaction ID : A9042B89A19594576A06**

Amount of Each Receipt this Period  
35.00

**B.** Full Name (Last, First, Middle Initial)  
**Charles Lynch**

Mailing Address 175 Sherman St., Ste. 202

City State Zip Code  
Saint Paul MN 55102-4495

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
375.00

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

**Transaction ID : A863DA1CB4D2F47DC8B9**

Amount of Each Receipt this Period  
75.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Mark Emery Dolski**

Mailing Address 2303 Pleasant Ave

City State Zip Code  
Minneapolis MN 55404-3244

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
225.00

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

**Transaction ID : AD8CE6EEFB05F449B91B**

Amount of Each Receipt this Period  
25.00

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

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

135.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 121
	<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)  
**Emmer for Congress**

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

Mailing Address 4646 Shamrock Ln

City Brainerd State MN Zip Code 56401-6929

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : AD296B7814D1547B295C**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 14921 Roma Dr

City La Mirada State CA Zip Code 90638-3819

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

Name of Employer Information Requested Occupation Information Requested  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
378.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 14 / 2014

**Transaction ID : AFE0B6BDB95F14DA6983**

Amount of Each Receipt this Period  
30.00

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

Mailing Address 6316 26th Ave NW

City Seattle State WA Zip Code 98107-2427

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
225.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 14 / 2014

**Transaction ID : A47D7FF10F20248B7BD4**

Amount of Each Receipt this Period  
50.00

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

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

330.00



**SCHEDULE A (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 121
	<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)  
**Emmer for Congress**

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

Mailing Address 184 NW 10th St

City	State	Zip Code
Meridian	ID	83642-2455

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

Name of Employer	Occupation
Morse Starret	President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 06 / 2014

**Transaction ID : A76A0B6789A7544A89EA**

Amount of Each Receipt this Period

300.00

**B.** Full Name (Last, First, Middle Initial)  
**Evelyn Munson**

Mailing Address 1824 Pleasant Plains Rd

City	State	Zip Code
Annapolis	MD	21409-6054

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

Name of Employer	Occupation
None	Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : A0C4F044FCA154E38951**

Amount of Each Receipt this Period

100.00

**C.** Full Name (Last, First, Middle Initial)  
**Robert J Roberts**

Mailing Address 4804 NW Bethany Blvd #12

City	State	Zip Code
Portland	OR	97229-9195

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

Name of Employer	Occupation
Sun County Training Stables	Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 06 / 2014

**Transaction ID : AAB5CA0F75D114019BA9**

Amount of Each Receipt this Period

75.00

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

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

475.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 121
	<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)  
**Emmer for Congress**

**A. Betty Ice**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1311 S Murray Ave  
 City Monahans State TX Zip Code 79756-6305  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Information Requested Occupation Information Requested  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 02 / 2014  
**Transaction ID : AA5C7B27E199E43C4BC7**  
 Amount of Each Receipt this Period  
 250.00

**B. Peter Heule**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12984 Chisholm St. NE  
 City Minneapolis State MN Zip Code 55449-4874  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Information Requested Occupation Information Requested  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 225.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 07 / 2014  
**Transaction ID : A48E4FC3EE9F84ED2A9D**  
 Amount of Each Receipt this Period  
 150.00

**C. Mr. Donald Kluk**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11509 Palisade Ct NE  
 City Minneapolis State MN Zip Code 55449-3913  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Information Requested Occupation Information Requested  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 310.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : A965FC5D74FD843EF945**  
 Amount of Each Receipt this Period  
 40.00

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

440.00

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

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

FOR LINE NUMBER: PAGE 83 OF 121  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     11e 15

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NAME OF COMMITTEE (In Full)  
**Emmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Virginia L Gaylord**

Mailing Address 430 N Vinedo Ave

City Pasadena State CA Zip Code 91107-2615

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

Name of Employer None Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 14 / 2014

**Transaction ID : A3727E0D61F5E4FDAB3A**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**George Oliver**

Mailing Address PO Box 373

City Center Point State TX Zip Code 78010-0373

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
235.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 06 / 2014

**Transaction ID : AE1794DCE495C473687F**

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr Harold G Brown**

Mailing Address 1336 Walnut St

City Kingman State KS Zip Code 67068-1061

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
975.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 06 / 2014

**Transaction ID : A270F858F426D465A9F6**

Amount of Each Receipt this Period  
125.00

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

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

425.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 121
	<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)  
**Emmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ms Mary G Koehl**

Mailing Address 1307 Manor Lake Ct

City	State	Zip Code
Richmond	TX	77406-7999

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

Name of Employer	Occupation
None	Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**693.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**10 / 15 / 2014**

**Transaction ID : A122A86CCC82C46BF9AD**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Andrea King**

Mailing Address 3 Red Forest Heights

City	State	Zip Code
Saint Paul	MN	55127-6353

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

Name of Employer	Occupation
Information Requested	Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**10 / 15 / 2014**

**Transaction ID : A9204BBC42346448D8DA**

Amount of Each Receipt this Period  
**2600.00**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Roger C Conger**

Mailing Address 2764 Jackson St

City	State	Zip Code
Saint Paul	MN	55117-1301

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

Name of Employer	Occupation
None	Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**10 / 15 / 2014**

**Transaction ID : A7E6D9A9808904A42955**

Amount of Each Receipt this Period  
**100.00**

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

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

**2800.00**

**SCHEDULE A (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 121
	<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)  
**Emmer for Congress**

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

Mailing Address 13973 Franks Creek Rd

City Medora	State ND	Zip Code 58645-9700
----------------	-------------	------------------------

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

Name of Employer Self-Employed	Occupation Rancher
-----------------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 390.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 14 / 2014

**Transaction ID : A1F8FD37CC3D744A780C**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 100.00

**B.** Full Name (Last, First, Middle Initial)  
**Shirley Brod**

Mailing Address 25 Barcelona Dr

City Boulder	State CO	Zip Code 80303-4901
-----------------	-------------	------------------------

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

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 225.00

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

**Transaction ID : AB81CB7DF769644CAA85**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 75.00

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

Mailing Address 16825 40th PI N

City Plymouth	State MN	Zip Code 55446-3348
------------------	-------------	------------------------

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

Name of Employer Thorpe Distributing	Occupation Owner
---	---------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : A4422112C9FEF466F94F**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

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

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

\_\_\_\_\_ 425.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 121
	<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)  
**Emmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Jean O Granger**

Mailing Address 6 Oak Ridge Trail

City State Zip Code  
Circle Pines MN 55014-1757

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

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

**Transaction ID : A8B9370D0EC71438D96B**

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
**Howard O'Connell**

Mailing Address 1649 Questwood Dr

City State Zip Code  
Saint Paul MN 55113-5600

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

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

**Transaction ID : AA01AC2449991441EAAA**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 2623 Pebble Dawn

City State Zip Code  
San Antonio TX 78232-4133

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

Name of Employer Occupation  
Self-Employed Pharmacist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
625.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 14 / 2014

**Transaction ID : A20438BD223264AC899C**

Amount of Each Receipt this Period  
150.00

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

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

700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 121
	<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)  
**Emmer for Congress**

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

Mailing Address 21270 Excelsior Blvd

City Greenwood State MN Zip Code 55331-8741

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 15 / 2014

**Transaction ID : AF1A49BB57775440D9E9**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Luke G Dahlheimer**

Mailing Address 17381 173rd St SE

City Big Lake State MN Zip Code 78388-4610

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 15 / 2014

**Transaction ID : A10FC2FDE48A845E19D2**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Neel C 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: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 03 / 2014

**Transaction ID : A8DECB6F0FD6A4F47BA7**

Amount of Each Receipt this Period  
500.00

**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 88 OF 121
	<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)  
**Emmer for Congress**

Full Name (Last, First, Middle Initial) <b>A. Angelo J Tiezzi</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 06 / 2014	
Mailing Address 25 Steeplechase Dr		<b>Transaction ID : A12A6D1AB0BC744FA8D7</b>	
City Newington	State CT	Zip Code 06111-5701	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00	
Name of Employer None	Occupation Information Requested		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 632.00		

Full Name (Last, First, Middle Initial) <b>B. Betty R Crawford</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 14 / 2014	
Mailing Address 601 Aspen Trl		<b>Transaction ID : A8BD1DDC55C9B41C1A32</b>	
City Muscatine	State IA	Zip Code 52761-2873	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer None	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) <b>C. Bonnie J Young</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 11 / 2014	
Mailing Address 2631 W Casas Cir		<b>Transaction ID : A5B24931BAB934B4FA93</b>	
City Tucson	State AZ	Zip Code 85742-9772	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer None	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	175.00
<b>TOTAL</b> This Period (last page this line number only).....	175.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 121
	<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)  
**Emmer for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mary K Colwell</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 03 / 2014
Mailing Address 140 Maricopa Cir		<b>Transaction ID : A2E0FEB5CC5A54CEBB4F</b>
City Enon	State OH	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 270.00
Name of Employer None	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1275.00	

Full Name (Last, First, Middle Initial) <b>B. Warren Puelston</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address 5537 Chantrey Rd		<b>Transaction ID : A27F681370E2B4329844</b>
City Minneapolis	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer None	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>C. John F Ross</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 02 / 2014
Mailing Address 4365 Running Brook Rd		<b>Transaction ID : A59B7AF72100746A5A45</b>
City Darlington	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	620.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 121
	<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)  
**Emmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Joan K Chitrea**

Mailing Address 1980 Silverleaf Cir Unit M207

City Carlsbad State CA Zip Code 92009-8444

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 07 / 2014

**Transaction ID : AFCE7C2DBE5B94FC18FE**

Amount of Each Receipt this Period  
**150.00**

**B.** Full Name (Last, First, Middle Initial)  
**Timothy Hukriede**

Mailing Address 1618 Sandbar Cir

City Waconia State MN Zip Code 55387-1052

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

Name of Employer Locher Bros. Occupation General Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : AA5F6A89A730C4C27ACA**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Mr Herbert Levin**

Mailing Address 724 E Grinnell Dr

City Burbank State CA Zip Code 91501-1720

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

Name of Employer Self-Employed Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1012.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : A14B8EFA213EC4BC08F1**

Amount of Each Receipt this Period  
**90.00**

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

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

**490.00**

**SCHEDULE A (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 121
	<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)  
**Emmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr Leonard M Kirk**

Mailing Address 6 Hunter Dr

City State Zip Code  
Bel Air MD 21014-3934

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

Name of Employer Occupation  
None retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1390.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 06 / 2014

**Transaction ID : AC1F45D3EB63E4F99B5E**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Gerry Knight**

Mailing Address 3401 W. Lake St. #201

City State Zip Code  
Minneapolis MN 55416

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 15 / 2014

**Transaction ID : A90333D25DB49465E8FD**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 2756 Indian Springs Rd

City State Zip Code  
Marianna FL 32446-6889

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

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

**Transaction ID : A31AB0D02E2E44DB19FC**

Amount of Each Receipt this Period  
50.00

**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 92 OF 121
	<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)  
**Emmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**David Eugene Cory**

Mailing Address 3718 N Williams St

City Oklahoma City State OK Zip Code 73112-2939

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 03 / 2014

**Transaction ID : A688A93FF06D1428E8C1**

Amount of Each Receipt this Period  
75.00

**B.** Full Name (Last, First, Middle Initial)  
**Faye I Westall**

Mailing Address 145 Smithfield Way

City Fredericksburg State VA Zip Code 22406-8435

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
255.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 03 / 2014

**Transaction ID : A2CD350966CFF4846A17**

Amount of Each Receipt this Period  
30.00

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

Mailing Address 909 Cottonwood St

City Woodland State CA Zip Code 95695-4314

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
425.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 07 / 2014

**Transaction ID : AC39960FB92534A6D823**

Amount of Each Receipt this Period  
45.00

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

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

150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 121
	<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)  
**Emmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Wayne Hasbargen**

Mailing Address 318 Shorewood Dr

City International Fall	State MN	Zip Code 56649-2109
----------------------------	-------------	------------------------

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

Name of Employer Rainy River Vet	Occupation Veterinarian
-------------------------------------	----------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : ACF58594BA4BF4FD08A1**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr Nelson Payne**

Mailing Address 37119 Saber Ct

City Greenbackville	State VA	Zip Code 23356-2617
------------------------	-------------	------------------------

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

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
255.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 08 / 2014

**Transaction ID : A3D06F91BFA4C4DAAAF7**

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
**Robert W Geist M.D.**

Mailing Address 7 Sandpiper Ln

City Saint Paul	State MN	Zip Code 55127-6310
--------------------	-------------	------------------------

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

Name of Employer Self Employed	Occupation Physician
-----------------------------------	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
275.00

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

**Transaction ID : A3D4CE42E0F144479BBE**

Amount of Each Receipt this Period  
100.00

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

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

350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 121
	<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)  
**Emmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Joseph Carson Jr**

Mailing Address 101 Walnut Ave

City State Zip Code  
Saint Clairsville OH 43950-1702

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 08 / 2014

**Transaction ID : ADB59D6BD2EBC469683A**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**McCullough Family Partnership**

Mailing Address PO Box 337

City State Zip Code  
Forest Lake MN 55025-0337

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 14 / 2014

**Transaction ID : A60A38BFA2B5B4F9C919**

Amount of Each Receipt this Period  
2000.00

See Memo Entry

**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).....

2100.00

77899.00

**SCHEDULE A (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 121
	<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)  
**Emmer for Congress**

**A. Full Name (Last, First, Middle Initial)**  
**UNION PACIFIC CORP. FUND FOR EFFECTIVE GOVERNMENT**

Mailing Address 700 13TH STREET NW, SUITE 350

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00010470

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 14 / 2014

**Transaction ID : A68FEEBAE8B56435095F**

Amount of Each Receipt this Period  
 2500.00

**B. Full Name (Last, First, Middle Initial)**  
**AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)**

Mailing Address 1120 CONNECTICUT AVENUE NW  
SUITE 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 08 / 2014

**Transaction ID : A1D056DC3BCD44E13953**

Amount of Each Receipt this Period  
 5000.00

**C. Full Name (Last, First, Middle Initial)**  
**JOBS, ECONOMY AND BUDGET FUND (JEB FUND)**

Mailing Address PO BOX 30844

City BETHESDA State MD Zip Code 20824

FEC ID number of contributing federal political committee. **C** C00420695

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 14 / 2014

**Transaction ID : A5F9970BE93E34E24982**

Amount of Each Receipt this Period  
 2500.00

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

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

10000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 121
	<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)  
**Emmer for Congress**

A. Full Name (Last, First, Middle Initial)  
**NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address **1101 KING STREET  
SUITE 600**  
City **ALEXANDRIA** State **VA** Zip Code **22314**

FEC ID number of contributing federal political committee. **C C00144766**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date **2500.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**10 / 15 / 2014**  
**Transaction ID : A75275AA5F9024B06BD1**

Amount of Each Receipt this Period  
**2500.00**

B. Full Name (Last, First, Middle Initial)  
**ERNST & YOUNG POLITICAL ACTION COMMITTEE**

Mailing Address **1101 NEW YORK AVENUE, NW**  
City **WASHINGTON** State **DC** Zip Code **20005**

FEC ID number of contributing federal political committee. **C C00227744**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date **5000.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**10 / 08 / 2014**  
**Transaction ID : A7511A0AD2B554E9488C**

Amount of Each Receipt this Period  
**5000.00**

C. Full Name (Last, First, Middle Initial)  
**XCEL ENERGY EMPLOYEE POLITICAL ACTION COMMITTEE (XPAC)**

Mailing Address **1800 LARIMER STREET, SUITE 1600**  
City **DENVER** State **CO** Zip Code **80202**

FEC ID number of contributing federal political committee. **C C00107771**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date **2000.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**10 / 14 / 2014**  
**Transaction ID : A6A9814D7559F49BC925**

Amount of Each Receipt this Period  
**1000.00**

**SUBTOTAL** of Receipts This Page (optional)..... **8500.00**  
**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 97 OF 121
	<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)  
**Emmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
TRUCKING POLITICAL ACTION COMMITTEE OF THE AMERICAN TRUCKING ASSOCIATIONS INC.

Mailing Address 430 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00002881

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : AF97242DA37D04485B20**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
CHAMBER OF COMMERCE OF THE UNITED STATES OF AMERICA PAC (US CHAMBER PAC)

Mailing Address 1615 H STREET NORTHWEST

City WASHINGTON State DC Zip Code 20062

FEC ID number of contributing federal political committee. **C** C00082040

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : A6A752F619CF24EA18A5**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
UNITED TECHNOLOGIES CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 1101 PENNSYLVANIA AVE, NW  
10TH FLOOR

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00035683

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 08 / 2014

**Transaction ID : AD2E117EE721747D9968**

Amount of Each Receipt this Period  
 1000.00

**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 98 OF 121
	<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)  
**Emmer for Congress**

**A. FREEDOMS DEFENSE SUPERFUND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2776 ARLINGTON MILL DR #806  
 City ARLINGTON State VA Zip Code 22206  
 FEC ID number of contributing federal political committee. **C** C00533992  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 08 / 2014  
**Transaction ID : A840CF69B673844608BB**  
 Amount of Each Receipt this Period  
 5000.00

**B. CONSERVATIVE OPPORTUNITIES FOR A NEW AMERICA PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 110 W LOUISIANA AVENUE SUITE 312  
 City MIDLAND State TX Zip Code 79701  
 FEC ID number of contributing federal political committee. **C** C00409458  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 08 / 2014  
**Transaction ID : A97C4C60928C4419DA77**  
 Amount of Each Receipt this Period  
 1000.00

**C. CHS INC. POLITICAL ACTION COMMITTEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5500 CENEX DRIVE  
 City INVER GROVE HTS State MN Zip Code 55077  
 FEC ID number of contributing federal political committee. **C** C00149104  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : AF2C94D3766144CA291F**  
 Amount of Each Receipt this Period  
 1000.00

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

7000.00

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

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

FOR LINE NUMBER: PAGE 99 OF 121

(check only one)

<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)  
**Emmer for Congress**

Full Name (Last, First, Middle Initial) <b>VIGOP</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 10 / 2014
Mailing Address PO BOX 295		<b>Transaction ID : A64C325FAE1E34AEEA56</b>
City CHRISTIANSTED	State VI	
FEC ID number of contributing federal political committee. <b>C</b> C00553560		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>GOP GENERATION Y FUND</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 15 / 2014
Mailing Address PO BOX 9055		<b>Transaction ID : A1776400FB59B4E18BFD</b>
City PEORIA	State IL	
FEC ID number of contributing federal political committee. <b>C</b> C00448191		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	

Full Name (Last, First, Middle Initial)		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		
City	State	Zip Code
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6000.00
<b>TOTAL</b> This Period (last page this line number only).....	36000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 100 OF 121	
	<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)  
**Emmer for Congress**

Full Name (Last, First, Middle Initial) <b>A. McClung Communications and Public Relations</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 01 / 2014</b>
Mailing Address <b>401 N Robert St Ste 150</b>		Amount of Each Disbursement this Period <b>15000.00</b> Transaction ID : <b>BC777E92C398D446199C</b>
City <b>Saint Paul</b> State <b>MN</b> Zip Code <b>55101-2001</b>	Purpose of Disbursement <b>Online Advertising</b>	
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>B. Rachel Horn</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 01 / 2014</b>
Mailing Address <b>7700 Sunwood Dr NW #426</b>		Amount of Each Disbursement this Period <b>3500.00</b> Transaction ID : <b>B02F9D11DC64F4A009A6</b>
City <b>Anoka</b> State <b>MN</b> Zip Code <b>55303-5289</b>	Purpose of Disbursement <b>Field Consulting</b>	
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>c. Robert Benson Jr.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 01 / 2014</b>
Mailing Address <b>160 90th Ln NE</b>		Amount of Each Disbursement this Period <b>1500.00</b> Transaction ID : <b>BA803B95CC23249D3883</b>
City <b>Minneapolis</b> State <b>MN</b> Zip Code <b>55434-1126</b>	Purpose of Disbursement <b>Field Consulting</b>	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>20000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 101 OF 121	
	<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)  
**Emmer for Congress**

Full Name (Last, First, Middle Initial) <b>A. Patrick Haley</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 01 / 2014</b>
Mailing Address 10994 178th Ave NW		Amount of Each Disbursement this Period <b>1500.00</b> Transaction ID : <b>B50495617664547AD8E9</b>
City Elk River State MN Zip Code 55330-6552	Purpose of Disbursement Field 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:		

Full Name (Last, First, Middle Initial) <b>B. First Virginia Community Bank</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 01 / 2014</b>
Mailing Address 11325 Random Hills Rd		Amount of Each Disbursement this Period <b>158.72</b> Transaction ID : <b>B07379CE539BA4F9B8DA</b>
City Fairfax State VA Zip Code 22030-6051	Purpose of Disbursement Bank Fees	
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>C. Franklin Outdoor Advertising</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 02 / 2014</b>
Mailing Address 20092 Edison Circle E		Amount of Each Disbursement this Period <b>7145.00</b> Transaction ID : <b>BC909F17089D041B9ABB</b>
City Clearwater State MN Zip Code 55320-1632	Purpose of Disbursement Advertising	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>8803.72</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 121			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Emmer for Congress**

Full Name (Last, First, Middle Initial) <b>A. Pinnacle Direct</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014
Mailing Address 15260 113th St N		Amount of Each Disbursement this Period 3633.59 <b>Transaction ID : BC51F01DC60E44DA7B34</b>
City Stillwater	State MN	
Zip Code 55082-9575	Purpose of Disbursement Direct Mail	Category/ Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>B. St Cloud Chamber of Commerce</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014
Mailing Address PO Box 487		Amount of Each Disbursement this Period 1200.00 <b>Transaction ID : B9CD7B518646A4843B2C</b>
City Saint Cloud	State MN	
Zip Code 56302-0487	Purpose of Disbursement Advertising	Category/ Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Aristotle International</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014
Mailing Address 205 Pennsylvania Ave SE		Amount of Each Disbursement this Period 119.25 <b>Transaction ID : BD873EF3C08014AA39A8</b>
City Washington	State DC	
Zip Code 20003-1164	Purpose of Disbursement CC Transaction Fees	Category/ Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4952.84
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 121			
	<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)  
**Emmer for Congress**

Full Name (Last, First, Middle Initial) <b>A. Century Data Mailing Service</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014
Mailing Address 1155 15th St NW Ste 410			Amount of Each Disbursement this Period 15691.61 <b>Transaction ID : B7C528425EDBD4BD9A8E</b>
City Washington	State DC	Zip Code 20005-2748	
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:			

Full Name (Last, First, Middle Initial) <b>B. Elk River Municipal Utilities</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014
Mailing Address PO Box 430			Amount of Each Disbursement this Period 316.54 <b>Transaction ID : BBD4BD503232140739E2</b>
City Elk River	State MN	Zip Code 55330-0430	
Purpose of Disbursement Utilities		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>C. First Virginia Community Bank</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address 11325 Random Hills Rd			Amount of Each Disbursement this Period 70.75 <b>Transaction ID : BF4C289E85CFA48C6859</b>
City Fairfax	State VA	Zip Code 22030-6051	
Purpose of Disbursement Bank 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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	16078.90
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 121			
	<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)  
**Emmer for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ostego Mall LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 07 / 2014</b>
Mailing Address <b>2 Enterprise Ave Ste D4</b>		Amount of Each Disbursement this Period <b>2044.33</b> Transaction ID : <b>B938CA62B474E492E964</b>
City <b>Isanti</b>	State <b>MN</b>	
Zip Code <b>55040-6816</b>	Purpose of Disbursement <b>Office Rent</b>	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>B. First Virginia Community Bank</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 07 / 2014</b>
Mailing Address <b>11325 Random Hills Rd</b>		Amount of Each Disbursement this Period <b>280.98</b> Transaction ID : <b>BBB76690F892A4958933</b>
City <b>Fairfax</b>	State <b>VA</b>	
Zip Code <b>22030-6051</b>	Purpose of Disbursement <b>Bank Fees</b>	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>c. Screen Tech</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 08 / 2014</b>
Mailing Address <b>2272 N 3rd St Ste A</b>		Amount of Each Disbursement this Period <b>835.58</b> Transaction ID : <b>B6C1F5DFE84974139B55</b>
City <b>North St Paul</b>	State <b>MN</b>	
Zip Code <b>55109-2941</b>	Purpose of Disbursement <b>Printing</b>	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>3160.89</b>
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 121			
	<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)  
**Emmer for Congress**

Full Name (Last, First, Middle Initial) <b>A. Pinnacle Direct</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 08 / 2014</b>
Mailing Address <b>15260 113th St N</b>		Amount of Each Disbursement this Period <b>6042.87</b> Transaction ID : <b>BEB9BDA92D13D48D7AE2</b>
City <b>Stillwater</b> State <b>MN</b> Zip Code <b>55082-9575</b>	Purpose of Disbursement <b>Direct Mail</b>	
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>B. Strategic Media Services</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 08 / 2014</b>
Mailing Address <b>3299 K St NW Ste 200</b>		Amount of Each Disbursement this Period <b>94310.00</b> Transaction ID : <b>B4B9F5F5670AD4AE9866</b>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20007-4411</b>	Purpose of Disbursement <b>Media Buy</b>	
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>c. Capitol Caging Corporation</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 08 / 2014</b>
Mailing Address <b>504 Shaw Rd Ste 217</b>		Amount of Each Disbursement this Period <b>3500.00</b> Transaction ID : <b>BA37DD5629E0D4CFCB40</b>
City <b>Sterling</b> State <b>VA</b> Zip Code <b>20166-9438</b>	Purpose of Disbursement <b>Caging</b>	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>103852.87</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 106 OF 121	
	<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)  
**Emmer for Congress**

Full Name (Last, First, Middle Initial) <b>A. Shanna Woodbury Consulting LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 08 / 2014</b>
Mailing Address <b>PO Box 120697</b>		Amount of Each Disbursement this Period <b>10254.96</b> Transaction ID : <b>BCCDD2ADF547F43148E7</b>
City <b>Saint Paul</b> State <b>MN</b> Zip Code <b>55112-0022</b>	Purpose of Disbursement <b>Fundraising Consulting</b>	
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>B. Minnesota Custom Consulting</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 08 / 2014</b>
Mailing Address <b>PO Box 71</b>		Amount of Each Disbursement this Period <b>5000.00</b> Transaction ID : <b>B5942D7E0C8E441E0B48</b>
City <b>Albertville</b> State <b>MN</b> Zip Code <b>55301-0071</b>	Purpose of Disbursement <b>Strategy Consulting</b>	
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>C. David Myles Fitzsimmons</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 08 / 2014</b>
Mailing Address <b>10731 CR 37 NE</b>		Amount of Each Disbursement this Period <b>4721.38</b> Transaction ID : <b>B5745147487B645A8BF1</b>
City <b>MN</b> State <b>MN</b> Zip Code <b>11295</b>	Purpose of Disbursement <b>Mileage</b>	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>19976.34</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 121			
	<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)  
**Emmer for Congress**

Full Name (Last, First, Middle Initial) <b>A. Consolidated Mailing Services</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2014
Mailing Address 504 Shaw Rd Suite 206		Amount of Each Disbursement this Period 1995.73 <b>Transaction ID : B56BA32FAF6CB4E19BBC</b>
City Sterling State VA Zip Code 20166-9437	Purpose of Disbursement Direct Mail	
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>B. Simpkins Escrow LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2014
Mailing Address 29243 St Just Dr		Amount of Each Disbursement this Period 311.16 <b>Transaction ID : BA71578596FFD417C803</b>
City Unionville State VA Zip Code 22567-3220	Purpose of Disbursement Caging	
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>c. Century Data Mailing Service</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2014
Mailing Address 1155 15th St NW Ste 410		Amount of Each Disbursement this Period 10195.98 <b>Transaction ID : B5FBB44B6AA62406B803</b>
City Washington State DC Zip Code 20005-2748	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	12502.87
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 121			
	<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)  
**Emmer for Congress**

Full Name (Last, First, Middle Initial) <b>A. Aristotle International</b>			Date of Disbursement M M / D D / Y Y Y Y <b>10 / 09 / 2014</b>
Mailing Address <b>205 Pennsylvania Ave SE</b>			Amount of Each Disbursement this Period <b>1012.25</b> Transaction ID : <b>B34614CF4E2A74A2CAA3</b>
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20003-1164</b>	
Purpose of Disbursement <b>CC Transaction Fees</b>		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>B. Legacy Lists Inc</b>			Date of Disbursement M M / D D / Y Y Y Y <b>10 / 09 / 2014</b>
Mailing Address <b>1155 15th St NW Suite 410</b>			Amount of Each Disbursement this Period <b>1010.11</b> Transaction ID : <b>BDDFCFAACE5AD4979903</b>
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20005-2748</b>	
Purpose of Disbursement <b>Direct Mail</b>		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>c. The Pourhouse</b>			Date of Disbursement M M / D D / Y Y Y Y <b>10 / 09 / 2014</b>
Mailing Address <b>10 S 5th Street</b>			Amount of Each Disbursement this Period <b>584.89</b> Transaction ID : <b>B219C9A7A2814483DAF9</b>
City <b>Minneapolis</b>	State <b>MN</b>	Zip Code <b>55402-1012</b>	
Purpose of Disbursement <b>Event Catering</b>		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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>2607.25</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 121			
	<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)  
**Emmer for Congress**

Full Name (Last, First, Middle Initial) <b>A. US Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2014
Mailing Address 1817 Plymouth Rd		Amount of Each Disbursement this Period 161.20 <b>Transaction ID : B753B2676459D4557992</b>
City Minnetonka	State MN	
Zip Code 55305-1967	Purpose of Disbursement Bank 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>B. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2014
Mailing Address 560 3rd St NW		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : B0AC664396F2E4A3EB2C</b>
City Elk River	State MN	
Zip Code 55330-1409	Purpose of Disbursement Postage	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>c. Colortree Marketing Resources</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2014
Mailing Address PO Box 28960		Amount of Each Disbursement this Period 5095.72 <b>Transaction ID : B595304F6E9354DC9AE7</b>
City Henrico	State VA	
Zip Code 23228-8960	Purpose of Disbursement Debt Repayment: 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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5456.92
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 OF 121			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)  
**Emmer for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. Consolidated Mailing Services</b>		M M / D D / Y Y Y Y 10 / 02 / 2014
Mailing Address 504 Shaw Rd Suite 206		Amount of Each Disbursement this Period
City Sterling	State VA	Zip Code 20166-9437
Purpose of Disbursement Debt Repayment: Direct Mail	Category/Type	
Candidate Name	Transaction ID : <b>BD3124943AF37425186C</b>	
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:		
		6172.55

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. Consolidated Mailing Services</b>		M M / D D / Y Y Y Y 10 / 09 / 2014
Mailing Address 504 Shaw Rd Suite 206		Amount of Each Disbursement this Period
City Sterling	State VA	Zip Code 20166-9437
Purpose of Disbursement Debt Repayment: Direct Mail	Category/Type	
Candidate Name	Transaction ID : <b>B10416C292C1E4CEA9FB</b>	
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:		
		3308.02

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>C.</b>		M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	Zip Code
Purpose of Disbursement	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9480.57
<b>TOTAL</b> This Period (last page this line number only).....	206873.17

**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 111 OF 121			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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

NAME OF COMMITTEE (In Full)  
**Emmer for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kimberly Bellissimo</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 07 / 2014</b>
Mailing Address 1155 15th St.		Amount of Each Disbursement this Period <b>400.00</b>
City Washington	State DC	
Zip Code 20005-2706	Purpose of Disbursement Refund: Refund	<b>Transaction ID : BFDAB18ECE80F4CEAA6E</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>400.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>400.00</b>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 112 OF 121
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Emmer for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Thomas Earl Emmer Jr.</b>	Nature of Debt (Purpose): Travel and Meeting Expenses
Mailing Address PO Box 998	
City State Zip Code Anoka MN 55303-0998	

Outstanding Balance Beginning This Period 467.37	<b>Transaction ID : D5D1A14FD75BE4A1B9F8</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 467.37

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Thomas Earl Emmer Jr.</b>	Nature of Debt (Purpose): Meeting Expenses and Mileage
Mailing Address PO Box 998	
City State Zip Code Anoka MN 55303-0998	

Outstanding Balance Beginning This Period 208.23	<b>Transaction ID : DFABEF773097741B8967</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 208.23

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Donor Precision LLC</b>	Nature of Debt (Purpose): Direct Mail List Rental
Mailing Address 1900 N Culpepper St	
City State Zip Code Arlington VA 22207-2003	

Outstanding Balance Beginning This Period 1390.86	<b>Transaction ID : D112582E981254EE1904</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1390.86

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	2066.46
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	



**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Emmer for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Base Connect</b>		Nature of Debt (Purpose): Direct Mail
Mailing Address 1155 15th St NW Suite 410		
City State	Zip Code	
Washington	DC 20005-2748	

Outstanding Balance Beginning This Period	Transaction ID : <b>D280B4688D8974A8D949</b>	
<input type="text" value="7038.50"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="7038.50"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Capitol Caging Corporation</b>		Nature of Debt (Purpose): Caging
Mailing Address 504 Shaw Rd Ste 217		
City State	Zip Code	
Sterling	VA 20166-9438	

Outstanding Balance Beginning This Period	Transaction ID : <b>D312864974DBD48AA936</b>	
<input type="text" value="582.91"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="582.91"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Legacy Lists Inc</b>		Nature of Debt (Purpose): Direct Mail
Mailing Address 1155 15th St NW Suite 410		
City State	Zip Code	
Washington	DC 20005-2748	

Outstanding Balance Beginning This Period	Transaction ID : <b>DC6BFF08751424BA4B33</b>	
<input type="text" value="11974.23"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="11974.23"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="19595.64"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Emmer for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Consolidated Mailing Services</b>	Nature of Debt (Purpose): Direct Mail
Mailing Address 504 Shaw Rd Suite 206	
City State Zip Code Sterling VA 20166-9437	

Outstanding Balance Beginning This Period 23244.13	Transaction ID : DD488F4C95AB340C6BCA	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 23244.13

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Base Connect</b>	Nature of Debt (Purpose): Direct Mail
Mailing Address 1155 15th St NW Suite 410	
City State Zip Code Washington DC 20005-2748	

Outstanding Balance Beginning This Period 8471.07	Transaction ID : DF4B78C08BA8B45FA8FF	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 8471.07

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Donor Precision LLC</b>	Nature of Debt (Purpose): Direct Mail List Rental
Mailing Address 1900 N Culpepper St	
City State Zip Code Arlington VA 22207-2003	

Outstanding Balance Beginning This Period 130.47	Transaction ID : DD94396BF58E34B8A940	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 130.47

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	31845.67
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 115 OF 121
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

**Emmer for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Donor Precision LLC</b>	Nature of Debt (Purpose): Direct Mail List Rental
Mailing Address 1900 N Culpepper St	
City State Zip Code Arlington VA 22207-2003	

Outstanding Balance Beginning This Period 964.32	<b>Transaction ID : DA159641653204567899</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 964.32

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Base Connect</b>	Nature of Debt (Purpose): Direct Mail
Mailing Address 1155 15th St NW Suite 410	
City State Zip Code Washington DC 20005-2748	

Outstanding Balance Beginning This Period 13325.21	<b>Transaction ID : D73BEDBEDE7C2450187C</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 13325.21

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Legacy Lists Inc</b>	Nature of Debt (Purpose): Direct Mail
Mailing Address 1155 15th St NW Suite 410	
City State Zip Code Washington DC 20005-2748	

Outstanding Balance Beginning This Period 10144.30	<b>Transaction ID : DB9B4261C1772438B865</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 10144.30

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	24433.83
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 116 OF 121
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Emmer for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Colortree Marketing Resources</b>	Nature of Debt (Purpose): Direct Mail
Mailing Address PO Box 28960	
City State Zip Code Henrico VA 23228-8960	

Outstanding Balance Beginning This Period 9197.89	Transaction ID : DAA4E48D5EB4F4F23838	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 9197.89

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Consolidated Mailing Services</b>	Nature of Debt (Purpose): Direct Mail
Mailing Address 504 Shaw Rd Suite 206	
City State Zip Code Sterling VA 20166-9437	

Outstanding Balance Beginning This Period 4878.99	Transaction ID : DBFB89706D7CB44E085C	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 4878.99

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Century Data Mailing Service</b>	Nature of Debt (Purpose): Direct Mail
Mailing Address 1155 15th St NW Ste 410	
City State Zip Code Washington DC 20005-2748	

Outstanding Balance Beginning This Period 7652.05	Transaction ID : D0EBF4C3545CF4129B8D	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 7652.05

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	21728.93
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Emmer for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Integram</b>		Nature of Debt (Purpose): Printing
Mailing Address 22695 Commerce Center Ct		
City State	Zip Code	
Dulles VA	20166-2037	

Outstanding Balance Beginning This Period	Transaction ID : DE36F85878B334E18BBC	
2176.73		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	2176.73

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Pinnacle Direct</b>		Nature of Debt (Purpose): Direct Mail
Mailing Address 15260 113th St N		
City State	Zip Code	
Stillwater MN	55082-9575	

Outstanding Balance Beginning This Period	Transaction ID : D538FE3CFBFA542E89AE	
4213.88		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	4213.88

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Pinnacle Direct</b>		Nature of Debt (Purpose): Direct Mail
Mailing Address 15260 113th St N		
City State	Zip Code	
Stillwater MN	55082-9575	

Outstanding Balance Beginning This Period	Transaction ID : D2B188E39EF26485F833	
10333.97		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	10333.97

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	16724.58
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Emmer for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>McClung Communications and Public Relations</b>	Nature of Debt (Purpose): Online Advertising
Mailing Address 401 N Robert St Ste 150	
City State Zip Code Saint Paul MN 55101-2001	

Outstanding Balance Beginning This Period 15000.00	Transaction ID : DB6D658BD3EC343C9B27	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 15000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Colortree Marketing Resources</b>	Nature of Debt (Purpose): Direct Mail
Mailing Address PO Box 28960	
City State Zip Code Henrico VA 23228-8960	

Outstanding Balance Beginning This Period 5095.72	Transaction ID : DCFB03CF6A1E640EF81B	
Amount Incurred This Period 0.00	Payment This Period 5095.72	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Base Connect</b>	Nature of Debt (Purpose): Direct Mail
Mailing Address 1155 15th St NW Suite 410	
City State Zip Code Washington DC 20005-2748	

Outstanding Balance Beginning This Period 8471.07	Transaction ID : D62239DB0CB05484A8EB	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 8471.07

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	23471.07
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Emmer for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Shanna Woodbury Consulting LLC</b>		Nature of Debt (Purpose): Fundraising Consulting
Mailing Address PO Box 120697		
City State	Zip Code	
Saint Paul MN	55112-0022	

Outstanding Balance Beginning This Period	Transaction ID : <b>DF28E8E56C95F4CEF8F4</b>	
20000.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	20000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Century Data Mailing Service</b>		Nature of Debt (Purpose): Direct Mail
Mailing Address 1155 15th St NW Ste 410		
City State	Zip Code	
Washington DC	20005-2748	

Outstanding Balance Beginning This Period	Transaction ID : <b>DE0A51B30911445EF911</b>	
1993.44		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	1993.44

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Base Connect</b>		Nature of Debt (Purpose): Direct Mail
Mailing Address 1155 15th St NW Suite 410		
City State	Zip Code	
Washington DC	20005-2748	

Outstanding Balance Beginning This Period	Transaction ID : <b>D277A888E1F7B4A5B86C</b>	
2375.38		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	2375.38

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	24368.82
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Emmer for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Legacy Lists Inc</b>		Nature of Debt (Purpose): Direct Mail
Mailing Address 1155 15th St NW Suite 410		
City State	Zip Code	
Washington DC	20005-2748	

Outstanding Balance Beginning This Period	Transaction ID : DEF0DDA1F644C49DEBC8	
7038.08		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	7038.08

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Consolidated Mailing Services</b>		Nature of Debt (Purpose): Direct Mail
Mailing Address 504 Shaw Rd Suite 206		
City State	Zip Code	
Sterling VA	20166-9437	

Outstanding Balance Beginning This Period	Transaction ID : DBBF762A5EACA4704B2D	
11179.84		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	9480.57	1699.27

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Colortree Marketing Resources</b>		Nature of Debt (Purpose): Direct Mail
Mailing Address PO Box 28960		
City State	Zip Code	
Henrico VA	23228-8960	

Outstanding Balance Beginning This Period	Transaction ID : D2353B9D1C89F42FFB5C	
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
21.93	0.00	21.93

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	8759.28
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	



**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 121 OF 121
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Emmer for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Integram</b>	Nature of Debt (Purpose): Printing
Mailing Address 22695 Commerce Center Ct	
City State Zip Code Dulles VA 20166-2037	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : DAB9CCCB2AC14413899</b>	
Amount Incurred This Period 2045.47	Payment This Period 0.00	Outstanding Balance at Close of This Period 2045.47

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Century Data Mailing Service</b>	Nature of Debt (Purpose): Direct Mail
Mailing Address 1155 15th St NW Ste 410	
City State Zip Code Washington DC 20005-2748	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : DE80D0E1A40AF49568B2</b>	
Amount Incurred This Period 1838.22	Payment This Period 0.00	Outstanding Balance at Close of This Period 1838.22

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Capitol Caging Corporation</b>	Nature of Debt (Purpose): Caging
Mailing Address 504 Shaw Rd Ste 217	
City State Zip Code Sterling VA 20166-9438	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : D87F5622AD06B44CCBD5</b>	
Amount Incurred This Period 1304.03	Payment This Period 0.00	Outstanding Balance at Close of This Period 1304.03

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	5187.72
2) <b>TOTALS</b> This Period (last page this line number only) .....	178182.00
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	178182.00