

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED FED MAIL OPERATIONS CENTER

2006 FEB -8 A 8:24 Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT

Example: If typing, type over the lines.

12FE4M5

7TH CONGRESSIONAL DISTRICT REPUBLICAN PARTY OF MINNESOTA

ADDRESS (number and street)

1412 BANKY DRIVE

P.O. BOX 471

MARSHALL

MN

56258

3406

Check if different than previously reported. (ACC)

(PER Reg 1-1/30/06)

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C 00380873

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

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)
July 31 Mid-Year Report (Non-election Year Only) (MY)
Termination Report (TER)

(b) Monthly Report Due On:

- Feb 20 (M2)
Mar 20 (M3)
Apr 20 (M4)
May 20 (M5)
Jun 20 (M6)
Jul 20 (M7)
Aug 20 (M8)
Sep 20 (M9)
Oct 20 (M10)
Nov 20 (M11) (Non-Election Year Only)
Dec 20 (M12) (Non-Election Year Only)
Jan 31 (YE)

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

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

Election on

in the State of

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

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

Election on

in the State of

5. Covering Period

07 01 2005

through

12 31 2005

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

DAVID E. STURROCK

Signature of Treasurer

[Handwritten Signature]

Date

01 29 2006

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

Office Use Only

FEC FORM 3X Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

7TH CONGRESSIONAL DISTRICT REPUBLICAN PARTY OF MINNESOTA

Report Covering the Period: From: **07 / 01 / 2005** To: **12 / 31 / 2005**

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2005		
(b) Cash on Hand at Beginning of Reporting Period.....	4444.14	
(c) Total Receipts (from Line 19).....	263804	
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	708218	
7. Total Disbursements (from Line 31).....	224117	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	484101	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....		

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

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

20050929

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

7TH C.D. REPUBLICAN PARTY

Report Covering the Period: From: **07 / 01 / 2005** To: **12 / 31 / 2005**

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....		
(ii) Unitemized.....		
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶		
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶		
12. Transfers From Affiliated/Other Party Committees.....	2,631.33	
13. All Loans Received.....		
14. Loan Repayments Received.....		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....		
17. Other Federal Receipts (Dividends, Interest, etc.).....	671	
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....		
(b) Levin Funds (from Schedule H5).....		
(c) Total Transfers (add 18(a) and 18(b))..		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	2,638.04	
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	2,638.04	

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures	224117	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	224117	
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs).....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....		
29. Other Disbursements		
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H8)		
(i) Federal Share		
(ii) "Levin" Share		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b)).....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	224117	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	224117	

2003090984

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)		
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)		
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	224117	
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)	224117	

25038990905

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)

PAGE **6** OF **9**

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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)

7TH C.D. REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial)

A. RED LAKE CO. REPUBLICAN PARTY

Mailing Address

806 HILL RIVER RD.

City **BROOKS**

State **MN**

Zip Code **56715**

FEC ID number of contributing federal political committee.

NOT A FED'L COMM.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) **CONTRIBUTION**

Aggregate Year-to-Date

13,133

Date of Receipt

08 / 25 / 2005

Amount of Each Receipt this Period

13,133

Full Name (Last, First, Middle Initial)

B. REPUBLICAN PARTY OF MINNESOTA

Mailing Address

525 PARK ST., SUITE 250

City **ST. PAUL**

State **MN**

Zip Code **55103**

FEC ID number of contributing federal political committee.

C00001313

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) **CONTRIBUTION**

Aggregate Year-to-Date

25,000

Date of Receipt

08 / 27 / 2005

Amount of Each Receipt this Period

25,000

Full Name (Last, First, Middle Initial)

C.

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)

Aggregate Year-to-Date

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

263,133

TOTAL This Period (last page this line number only)

260338950300

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 9
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
7TH C.D. REPUBLICAN PARTY OF MINNESOTA

A. Full Name (Last, First, Middle Initial)
BROMER BANK

Mailing Address

City **MARSHALL** State **MN** Zip Code **56258**

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) **INTEREST**

Aggregate Year-to-Date **671**

Date of Receipt
12 / 31 / 2005

Amount of Each Receipt this Period
671

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date

Date of Receipt

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) **671**

TOTAL This Period (last page this line number only) **263804**

2605890007

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

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

FOR LINE NUMBER:
(check only one)

PAGE **8** OF **9**

21b 22 23 24 25 26
 27 28a 28b 28c 29 30b

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NAME OF COMMITTEE (In Full)

7TH C.D. REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial)

A. CYGNUS EXPOSITIONS

Mailing Address

830 POST RD. E.

City

WESTPORT

State

CT

Zip Code

06880

Purpose of Disbursement

FARM FEET BOOTH

Candidate Name

001

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

12 / 20 / 2005

Amount of Each Disbursement this Period

275.00

Full Name (Last, First, Middle Initial)

B. JUDIE ROSENDAHL

Mailing Address

205 WILDWOOD AVE.

City

MADISON

State

MN

Zip Code

56256

Purpose of Disbursement

TELEPHONE EXP.

Candidate Name

001

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

07 / 19 / 2005

Amount of Each Disbursement this Period

5596

Full Name (Last, First, Middle Initial)

C. ROSENDAHL, JUDIE

Mailing Address

205 WILDWOOD AVE.

City

MADISON

State

MN

Zip Code

56256

Purpose of Disbursement

TELEPHONE EXP.

Candidate Name

001

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

09 / 19 / 2005

Amount of Each Disbursement this Period

281

SUBTOTAL of Disbursements This Page (optional).....▶

33377

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

2603695089

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

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

FOR LINE NUMBER:
(check only one)

PAGE **9** OF **9**

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 28	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

7TH C.D. REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial)

Date of Disbursement

12 / 12 / 2005

A.

SCHOMACKER, JOSEPH

Mailing Address

602 N.E. PARK ST.

City

LIVERNE

State

MN

Zip Code

56156

Purpose of Disbursement

DATA MANAGEMENT SERVICES

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

25000

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

11 / 15 / 2005

B.

SYCKS, ELAINE

Mailing Address

1514 WILLARD AVE.

City

DETROIT LAKES

State

MN

Zip Code

56501

Purpose of Disbursement

MAILINGS

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

6620

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

12 / 31 / 2005

C.

SYCKS, ELAINE

Mailing Address

1514 WILLARD AVE.

City

DETROIT LAKES

State

MN

Zip Code

56501

Purpose of Disbursement

FUNDRAISING EXPENSES

003

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

149300

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

180920

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

214297

20050928

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
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<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

Lu
 PREPARER

2/8/06
 DATE PREPARED

2005030909