

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

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) 1142 David Dr.
Check if different than previously reported. (ACC) Marshall MN 56258

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00380873 3. IS THIS REPORT NEW (N) OR AMENDED (A) 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) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on 11 / 03 / 2020 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 10 / 01 / 2020 through 10 / 14 / 2020

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Sturrock, David, E., ,
Type or Print Name of Treasurer

Signature of Treasurer Sturrock, David, E., , [Electronically Filed] Date 01 / 07 / 2021

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

7th Congressional District Republican Party of Minnesota

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>		<input type="text" value="1494.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="6596.49"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="0.00"/>	<input type="text" value="29445.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="6596.49"/>	<input type="text" value="30939.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="4366.64"/>	<input type="text" value="28709.15"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="2229.85"/>	<input type="text" value="2229.85"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

7th Congressional District Republican Party of Minnesota

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

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).....	0.00	12576.00
(ii) Unitemized	0.00	12977.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	25553.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	3892.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	0.00	29445.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	0.00	29445.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	0.00	29445.00

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	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	169.73
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	169.73
22. Transfers to Affiliated/Other Party Committees.....	0.00	338.39
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	1000.00
24. Independent Expenditures (use Schedule E)	4366.64	12783.38
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	4252.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	4252.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	10165.65
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	10165.65
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	4366.64	28709.15
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4366.64	28709.15

DETAILED SUMMARY PAGE
of Disbursements

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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)	0.00	29445.00
34. Total Contribution Refunds (from Line 28(d))	0.00	4252.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	25193.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	169.73
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	169.73

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) 7th Congressional District Republican Party of Minnesota	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00380873 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Ballalatak, Annie, , ,	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y						
Mailing Address 20788 451st Ave.	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 600.00 </div>						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-bottom: 1px solid black;">City</td> <td style="width:33%; border-bottom: 1px solid black;">State</td> <td style="width:33%; border-bottom: 1px solid black;">Zip Code</td> </tr> <tr> <td>Arlington</td> <td>MN</td> <td>55307</td> </tr> </table>		City	State	Zip Code	Arlington	MN	55307
City		State	Zip Code				
Arlington	MN	55307					
Purpose of Expenditure Reimbursement for advertising	Category/Type 004						
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Fischbach, Michelle, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: <u>07</u> State: <u>MN</u>						
Calendar Year-To-Date Per Election for Office Sought 944.42	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶						

Full Name of Payee <input type="checkbox"/> Memo Item Beltrami County Republican Party	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y						
Mailing Address 1629 Birch Lane	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 600.00 </div>						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-bottom: 1px solid black;">City</td> <td style="width:33%; border-bottom: 1px solid black;">State</td> <td style="width:33%; border-bottom: 1px solid black;">Zip Code</td> </tr> <tr> <td>Bemidji</td> <td>MN</td> <td>56601</td> </tr> </table>		City	State	Zip Code	Bemidji	MN	56601
City		State	Zip Code				
Bemidji	MN	56601					
Purpose of Expenditure Independent expenditure - share of newspaper advertising	Category/Type 004						
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Fischbach, Michelle, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: <u>07</u> State: <u>MN</u>						
Calendar Year-To-Date Per Election for Office Sought 600.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶						

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 1200.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 0.00 </div>
(c) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 1200.00 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Sturrock, David, E., ,

[Electronically Filed]

Date M M / D D / Y Y Y Y Y Y
01 / 07 / 2021

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
7th Congressional District Republican Party of Minnesota
FEC IDENTIFICATION NUMBER
C C00380873

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: KBRF Radio
Mailing Address: 728 Western Ave.
City: Fergus Falls, State: MN, Zip Code: 56537
Purpose of Expenditure: Independent expenditure - advertising
Category/Type: 004
Date of Public Distribution/Dissemination: 10/14/2020
Amount: 510.00
Transaction ID: SE.4289
Name of Federal Candidate: Fischbach, Michelle, , Support
Office Sought: House, District: 07, State: MN
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought: 1910.00

Full Name of Payee: KKBj Radio
Mailing Address: 2115 Washington Ave. S.
City: Bemidji, State: MN, Zip Code: 56601
Purpose of Expenditure: Independent expenditure - advertising
Category/Type: 004
Date of Public Distribution/Dissemination: 10/14/2020
Amount: 597.84
Transaction ID: SE.4292
Name of Federal Candidate: Fischbach, Michelle, , Support
Office Sought: House, District: 07, State: MN
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought: 3766.64

(a) SUBTOTAL of Itemized Independent Expenditures: 1107.84
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature: Sturrock, David, E., [Electronically Filed] Date: 01/07/2021

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
7th Congressional District Republican Party of Minnesota
FEC IDENTIFICATION NUMBER
C C00380873

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee KWLM Radio
Mailing Address 1340 7th St. NW
City Willmar State MN Zip Code 56201
Purpose of Expenditure Independent expenditure - advertising
Category/Type 004
Date of Public Distribution/Dissemination
Amount 718.80
Transaction ID : SE.4290
Date of Disbursement or Obligation 10/14/2020
Name of Federal Candidate: Fischbach, Michelle, ,
Support Oppose
Office Sought: House Senate State: MN
Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee Leighton Broadcasting
Mailing Address 1312 Broadway
City Alexandria State MN Zip Code 56308
Purpose of Expenditure Independent expenditure - advertising
Category/Type 004
Date of Public Distribution/Dissemination
Amount 540.00
Transaction ID : SE.4291
Date of Disbursement or Obligation 10/14/2020
Name of Federal Candidate: Fischbach, Michelle, ,
Support Oppose
Office Sought: House Senate State: MN
Disbursement For: Primary General 2020 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 1258.80
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Sturrock, David, E., [Electronically Filed] Date 01/07/2021
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) 7th Congressional District Republican Party of Minnesota	FEC IDENTIFICATION NUMBER ▼ C C00380873
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee Marshall Radio <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1414 E. College Dr.	Amount <input type="text"/> 800.00 Transaction ID : SE.4288 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City Marshall State MN Zip Code 56258	
Purpose of Expenditure Independent expenditure - advertising Category/Type <input type="text"/> 004	
Name of Federal Candidate: Fischbach, Michelle, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 07 State: MN
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 1400.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address	Amount <input type="text"/>
City State Zip Code	
Purpose of Expenditure Category/Type <input type="text"/>	
Name of Federal Candidate: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 800.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/> 4366.64

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Sturrock, David, E., **[Electronically Filed]** Date / /
 Signature **01** / **07** / **2021**