

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
FINSTAD FOR CONGRESS

ADDRESS (number and street) PO BOX 923
Check if different than previously reported. (ACC) NEW ULM MN 56073-0923
CITY STATE ZIP CODE

2. FEC IDENTIFICATION NUMBER C C00807743
3. IS THIS REPORT NEW (N) OR AMENDED (A) STATE DISTRICT MN 01

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 08 / 09 / 2022 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 07 / 01 / 2022 through 07 / 20 / 2022

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

Signature of Treasurer DATWYLER, THOMAS, , , [Electronically Filed] Date 07 / 28 / 2022

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 3 (Revised 05/2016)

Write or Type Committee Name  
**FINSTAD 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))....	54990.45	664899.30
(b) Total Contribution Refunds (from Line 20(d)) .....	19.81	2369.81
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	54970.64	662529.49
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	160611.10	504739.69
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	4000.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	160611.10	500739.69
8. Cash on Hand at Close of Reporting Period (from Line 27).....	161789.80	
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).....	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

**FINSTAD 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).....	19350.00	384227.85
(ii) Unitemized.....	8040.45	31871.45
(iii) TOTAL of contributions from individuals ▶	27390.45	416099.30
(b) Political Party Committees.....	0.00	5000.00
(c) Other Political Committees (such as PACs).....	27600.00	238000.00
(d) The Candidate.....	0.00	5800.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	54990.45	664899.30
<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	4000.00
<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>	54990.45	668899.30

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	160611.10	504739.69
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 .....	19.81	2369.81
(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)).....	19.81	2369.81
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	160630.91	507109.50

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	267430.26
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	54990.45
25. SUBTOTAL (add Line 23 and Line 24).....	322420.71
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	160630.91
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	161789.80

# 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 29	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**FINSTAD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**BUSCHE, JAMES, P, ,**

Mailing Address 2 W WILMERT LAKE DR

City FAIRMONT	State MN	Zip Code 56031-5056
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FEC ID number of contributing federal political committee. **C**

Name of Employer ASSOCIATE OPTOMETRY, P.A.	Occupation OPTOMETRIST
---	---------------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 19 / 2022

**Transaction ID : A1D6F0A1726CC401790C**

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address PO BOX 558

City SAINT PETER	State MN	Zip Code 56082-0558
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FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
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Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5800.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 14 / 2022

**Transaction ID : AC5224D1D6A4847C3975**

Amount of Each Receipt this Period  
5800.00

Memo Item

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

Mailing Address PO BOX 558

City SAINT PETER	State MN	Zip Code 56082-0558
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FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5800.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 14 / 2022

**Transaction ID : A881AC6B298E6460F97C**

Amount of Each Receipt this Period  
- 2900.00

Memo Item  
REDESIGNATION FROM

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6050.00
<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 6 OF 29	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**FINSTAD FOR CONGRESS**

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

Mailing Address PO BOX 558

City SAINT PETER	State MN	Zip Code 56082-0558
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FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2022  
 Primary  General  
 Other (specify) **SPECIAL GENERAL**

Election Cycle-to-Date **5800.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 14 / 2022

**Transaction ID : AAC0753F155F4472EB4F**

Amount of Each Receipt this Period  
 2900.00

Memo Item  
**REDESIGNATION TO**

**B.** Full Name (Last, First, Middle Initial)  
**FERRARA, TODD, , ,**

Mailing Address 5275 GRANDVIEW SQ  
APT 3402

City EDINA	State MN	Zip Code 55436-1743
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FEC ID number of contributing federal political committee. **C**

Name of Employer STANDARD HEATING & AIR CONDITIONING	Occupation VICE PRESIDENT
---	------------------------------

Receipt For: 2022  
 Primary  General  
 Other (specify) **▼**

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 19 / 2022

**Transaction ID : A28A789B3407E4BF79F2**

Amount of Each Receipt this Period  
 250.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**FITZSIMMONS, DAVID, , ,**

Mailing Address 11032 GUILDNER AVE NW

City MAPLE LAKE	State MN	Zip Code 55358-2322
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FEC ID number of contributing federal political committee. **C**

Name of Employer US CONGRESS	Occupation CHIEF OF STAFF
---------------------------------	------------------------------

Receipt For: 2022  
 Primary  General  
 Other (specify) **▼**

Election Cycle-to-Date **4752.25**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 01 / 2022

**Transaction ID : A2ECA331F47C84D64B32**

Amount of Each Receipt this Period  
 1000.00

Memo Item  
**EARMARKED (NON-DIRECTED) THROUGH WINRED**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1250.00
<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 7 OF 29	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**FINSTAD FOR CONGRESS**

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219-1891
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FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
174734.69

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 01 / 2022

**Transaction ID : AE8CD7944B98740289FF**

Amount of Each Receipt this Period  
1000.00

Memo Item  
INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

**B.** Full Name (Last, First, Middle Initial)  
**GRIFFIN, DONALD, , ,**

Mailing Address 4626 DREXEL AVE

City EDINA	State MN	Zip Code 55424-1132
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FEC ID number of contributing federal political committee. **C**

Name of Employer UAC	Occupation MANAGER
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Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 15 / 2022

**Transaction ID : A21F9A85B66C74FB29C5**

Amount of Each Receipt this Period  
1000.00

Memo Item  
EARMARKED (NON-DIRECTED) THROUGH WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219-1891
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FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
174734.69

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 15 / 2022

**Transaction ID : AB7DB9814646149FDA42**

Amount of Each Receipt this Period  
1000.00

Memo Item  
INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

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

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

1000.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 8 OF 29
	<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)  
**FINSTAD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**GUNTHER, ROBERT, C, ,**

Mailing Address 530 KINGS RD

City FAIRMONT	State MN	Zip Code 56031-2130
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FEC ID number of contributing federal political committee.

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 19 / 2022

**Transaction ID : A4B6066AD63C240D0852**

Amount of Each Receipt this Period

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**HELGET, KATHLEEN, , ,**

Mailing Address 26857 120TH ST

City COMFREY	State MN	Zip Code 56019-4140
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FEC ID number of contributing federal political committee.

Name of Employer RETIRED	Occupation RETIRED
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Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 14 / 2022

**Transaction ID : A2EDC965B433B42218E6**

Amount of Each Receipt this Period

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**HINZ, FREDRIC, , ,**

Mailing Address 100 LINCOLN AVE

City GAYLORD	State MN	Zip Code 55334-2273
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FEC ID number of contributing federal political committee.

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 11 / 2022

**Transaction ID : A468AAB134D044F3CAB5**

Amount of Each Receipt this Period

Memo Item  
**EARMARKED (NON-DIRECTED) THROUGH WINRED**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="350.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>



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

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

FOR LINE NUMBER: PAGE 9 OF 29  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**FINSTAD FOR CONGRESS**

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

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

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
174734.69

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 11 / 2022

**Transaction ID : A1664D87EC6B04EB385B**

Amount of Each Receipt this Period  
50.00

Memo Item  
INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

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

Mailing Address 245 MAPLE HILL RD

City HOPKINS State MN Zip Code 55343-8537

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

Name of Employer Occupation  
TURFCO MARKETING

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 01 / 2022

**Transaction ID : A5F74D272511A449895C**

Amount of Each Receipt this Period  
1000.00

Memo Item  
EARMARKED (NON-DIRECTED) THROUGH WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

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

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
174734.69

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 01 / 2022

**Transaction ID : AE10A13FA3C41431A898**

Amount of Each Receipt this Period  
1000.00

Memo Item  
INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

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

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

1000.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 10 OF 29	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**FINSTAD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**KNOWLES, TERENCE, , ,**

Mailing Address 508 S GERMAN ST

City NEW ULM	State MN	Zip Code 56073-2114
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FEC ID number of contributing federal political committee. **C**

Name of Employer PGNU	Occupation PHYSICIAN
--------------------------	-------------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2022

**Transaction ID : AE56439E5740B4266A41**

Amount of Each Receipt this Period  
5000.00

Memo Item

SEE REATTRIBUTION BELOW

**B.** Full Name (Last, First, Middle Initial)  
**KNOWLES, TERENCE, , ,**

Mailing Address 508 S GERMAN ST

City NEW ULM	State MN	Zip Code 56073-2114
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FEC ID number of contributing federal political committee. **C**

Name of Employer PGNU	Occupation PHYSICIAN
--------------------------	-------------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 05 / 2022

**Transaction ID : A2F01AE588F2A4CF8885**

Amount of Each Receipt this Period  
- 2900.00

Memo Item

REATTRIBUTION FROM

**C.** Full Name (Last, First, Middle Initial)  
**KNOWLES, FRANCILLE, A, ,**

Mailing Address 508 S GERMAN ST

City NEW ULM	State MN	Zip Code 56073-2114
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FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation PHYSICIAN
--------------------------	-------------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2900.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 05 / 2022

**Transaction ID : A6F7F3BE0D43A4C82BC9**

Amount of Each Receipt this Period  
2900.00

Memo Item

REATTRIBUTION TO

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<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: PAGE 11 OF 29  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**FINSTAD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**KOHNER, STEVEN, G, ,**  
 Mailing Address 4980 W 6TH ST  
 City WINONA State MN Zip Code 55987-1208  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer KOHNER MATERIALS Occupation CEO  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 14 / 2022  
**Transaction ID : A98BA95D4B7E045BFAF8**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**MCGREGOR, BYRON, C, ,**  
 Mailing Address 521 CRYSTAL CIR  
 City MANKATO State MN Zip Code 56001-7625  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF Occupation ATTORNEY  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 14 / 2022  
**Transaction ID : AB56A60EDDCC4409A8A9**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MCNEILUS, LELAND, , ,**  
 Mailing Address 668 KINZIE ISLAND CT  
 City SANIBEL State FL Zip Code 33957-5021  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MCNEILUS STEEL Occupation OWNER  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 14 / 2022  
**Transaction ID : A3F5DE51D5F2C4184974**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**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 12 OF 29	
<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**FINSTAD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MILLER, HUGH, L, ,**

Mailing Address PO BOX 30099

City WINONA	State MN	Zip Code 55987-1099
----------------	-------------	------------------------

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

Name of Employer RTP COMPANY	Occupation PRESIDENT
---------------------------------	-------------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
6000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 14 / 2022

**Transaction ID : A17726FFF16D1430E85F**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**MILLER, HUGH, L, ,**

Mailing Address PO BOX 30099

City WINONA	State MN	Zip Code 55987-1099
----------------	-------------	------------------------

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

Name of Employer RTP COMPANY	Occupation PRESIDENT
---------------------------------	-------------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
6000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 14 / 2022

**Transaction ID : A090A3E4984C44900AD2**

Amount of Each Receipt this Period  
- 2100.00

Memo Item  
REDESIGNATION FROM

**C.** Full Name (Last, First, Middle Initial)  
**MILLER, HUGH, L, ,**

Mailing Address PO BOX 30099

City WINONA	State MN	Zip Code 55987-1099
----------------	-------------	------------------------

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

Name of Employer RTP COMPANY	Occupation PRESIDENT
---------------------------------	-------------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼  
SPECIAL GENERAL

Election Cycle-to-Date ▼  
6000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 14 / 2022

**Transaction ID : A6445ED39F56B4A12BFE**

Amount of Each Receipt this Period  
2100.00

Memo Item  
REDESIGNATION TO

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5000.00
<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: PAGE 13 OF 29  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**FINSTAD FOR CONGRESS**

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

Mailing Address 465 KIM LN

City: OWATONNA State: MN Zip Code: 55060-2741

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

Name of Employer: T-MOBILE Occupation: TECHNICIAN

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
350.00

Date of Receipt: 07 / 19 / 2022

Transaction ID : **AF8EC527559B24493A9B**

Amount of Each Receipt this Period: 100.00

Memo Item  
EARMARKED (NON-DIRECTED) THROUGH WINRED

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

Mailing Address PO BOX 9891

City: ARLINGTON State: VA Zip Code: 22219-1891

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

Name of Employer: Occupation:

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
174734.69

Date of Receipt: 07 / 19 / 2022

Transaction ID : **AAF6DC33132C04207B11**

Amount of Each Receipt this Period: 100.00

Memo Item  
INTERMEDIARY  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

**C.** Full Name (Last, First, Middle Initial)  
**PERKINS, STEVEN, , ,**

Mailing Address 5600 S JAREN LEE PL

City: SIOUX FALLS State: SD Zip Code: 57108-5231

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

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt: 07 / 09 / 2022

Transaction ID : **A625E225AA6214978A5B**

Amount of Each Receipt this Period: 500.00

Memo Item  
EARMARKED (NON-DIRECTED) THROUGH WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 600.00

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

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

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

FOR LINE NUMBER: PAGE 14 OF 29  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**FINSTAD FOR CONGRESS**

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

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

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
174734.69

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 09 / 2022

Transaction ID : **AA2E9D2CFF52943AE832**

Amount of Each Receipt this Period  
500.00

Memo Item  
INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

**B.** Full Name (Last, First, Middle Initial)  
**RUEN, CHARLES, , ,**

Mailing Address 24997 GRACEFUL RD

City LANESBORO State MN Zip Code 55949-8292

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

Name of Employer Occupation  
SELF EMPLOYED FARMER

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 14 / 2022

Transaction ID : **AD8FDB3072F36481FB9C**

Amount of Each Receipt this Period  
250.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**SEATON, DOUGLAS, P, ,**

Mailing Address 1241 GULF OF MEXICO DR  
UNIT 503

City LONGBOAT KEY State FL Zip Code 34228-4621

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

Name of Employer Occupation  
SELF ATTORNEY

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4900.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 19 / 2022

Transaction ID : **A0D3F40CED7764FAD89A**

Amount of Each Receipt this Period  
2000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2250.00

**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 15 OF 29	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)  
**FINSTAD FOR CONGRESS**

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

Mailing Address 1 TAYLOR LN

City MANKATO	State MN	Zip Code 56001-2400
-----------------	-------------	------------------------

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

Name of Employer TAYLOR CORP	Occupation MANAGER
---------------------------------	-----------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 14 / 2022

**Transaction ID : AB36F09BC8095490EA1A**

Amount of Each Receipt this Period  
250.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**WIRT, ELIZABETH, , ,**

Mailing Address 25693 COUNTY RD

City LEWISTON	State MN	Zip Code 55952
------------------	-------------	-------------------

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

Name of Employer SELF EMPLOYED	Occupation FARMER
-----------------------------------	----------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 14 / 2022

**Transaction ID : A29A531DB0BE3451D80A**

Amount of Each Receipt this Period  
300.00

Memo Item

**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

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	550.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	19350.00

**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 29	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**FINSTAD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**AUTOMOTIVE FREE INTERNATIONAL TRADE PAC**

Mailing Address 1625 PRINCE ST  
STE 225

City ALEXANDRIA	State VA	Zip Code 22314-2889
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00250399

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 19 / 2022

**Transaction ID : A020A6BAB55084EE7A13**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
CARPENTERS LEGISLATIVE IMPROVEMENT COMMITTEE UNITED BROTHERHOOD OF CARPENTERS AND JOINERS

Mailing Address 101 CONSTITUTION AVE NW  
10TH FLOOR WEST

City WASHINGTON	State DC	Zip Code 20001-2133
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00001016

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 14 / 2022

**Transaction ID : A63FA146E354B415EA1B**

Amount of Each Receipt this Period  
2500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**CD1 REPUBLICAN PARTY OF MINNESOTA**

Mailing Address PO BOX 4272

City MANKATO	State MN	Zip Code 56002-4272
-----------------	-------------	------------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 19 / 2022

**Transaction ID : A87EDA2DD1A4F483B9D3**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8500.00
<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 17 OF 29	
<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)  
**FINSTAD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
CHAMBER OF COMMERCE OF THE UNITED STATES OF AMERICA PAC (US CHAMBER PAC)

Mailing Address 1615 H ST NW

City WASHINGTON	State DC	Zip Code 20062-0001
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00082040

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 19 / 2022

**Transaction ID : A03CF986B7063452A80F**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
CJS PAC

Mailing Address PO BOX 67

City SOUTH SALEM	State NY	Zip Code 10590-0067
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00777391

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 14 / 2022

**Transaction ID : A36DEE95ABD7D4D8CB67**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2600.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
CULAC THE PAC OF CREDIT UNION NATIONAL ASSOCIATION

Mailing Address 99 M ST SE  
STE 300

City WASHINGTON	State DC	Zip Code 20003-3957
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00007880

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 14 / 2022

**Transaction ID : A32EED0E60FCF44BF88B**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 5000.00

Memo Item

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

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

\_\_\_\_\_ 10100.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 18 OF 29	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**FINSTAD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**FREEDOM CLUB FEDERAL PAC**

Mailing Address PO BOX 416

City CHAMPLIN	State MN	Zip Code 55316-0416
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00307777

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 19 / 2022

**Transaction ID : A41F82B5E09D846A2826**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL FEDERATION OF INDEPENDENT BUSINESS FEDERAL PAC**

Mailing Address 555 12TH ST NW  
STE 1001

City WASHINGTON	State DC	Zip Code 20004-1267
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00101105

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 14 / 2022

**Transaction ID : A75A6FC15784F46F3AD9**

Amount of Each Receipt this Period  
2500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**TEXAS RED**

Mailing Address PO BOX 52486

City AMARILLO	State TX	Zip Code 79159-2486
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00753384

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 14 / 2022

**Transaction ID : A636E1AC22CC04D4E984**

Amount of Each Receipt this Period  
1500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	9000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	27600.00

**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 19 OF 29			
	<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)  
**FINSTAD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. 9SEVEN CONSULTING</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2022		
Mailing Address PO BOX 183			FEC Identification Number C		
City HUDSON	State WI	Zip Code 54016-0183	Amount of Each Disbursement this Period 1629.90		
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type 001	Transaction ID : B4BA53793C1674742825		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>B. ARISTOTLE INTERNATIONAL</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2022		
Mailing Address P.O. BOX 716045			FEC Identification Number C		
City PHILADELPHIA	State PA	Zip Code 19171-6045	Amount of Each Disbursement this Period 1500.00		
Purpose of Disbursement DATABASE		Category/ Type 001	Transaction ID : B739E5DE1C2E445F7ABC		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>C. CHAIN BRIDGE BANK</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2022		
Mailing Address 1445A LAUGHLIN AVENUE			FEC Identification Number C		
City HUDSON	State WI	Zip Code 54016	Amount of Each Disbursement this Period 25.00		
Purpose of Disbursement BANK FEES		Category/ Type 001	Transaction ID : B770D7D3C5B934259BCD		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: _____	District: _____				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3154.90
<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 20 OF 29			
	<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)  
**FINSTAD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CHAIN BRIDGE BANK</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2022		
Mailing Address 1445A LAUGHLIN AVENUE			FEC Identification Number C		
City HUDSON	State WI	Zip Code 54016	Amount of Each Disbursement this Period 25.00		
Purpose of Disbursement BANK FEES		Category/ Type 001	Transaction ID : BE7E263BB204E4F25818		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>B. CHAIN BRIDGE BANK</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2022		
Mailing Address 1445A LAUGHLIN AVENUE			FEC Identification Number C		
City HUDSON	State WI	Zip Code 54016	Amount of Each Disbursement this Period 25.00		
Purpose of Disbursement BANK FEES		Category/ Type 001	Transaction ID : BA997F106F44E44C6A82		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>C. CHAIN BRIDGE BANK</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2022		
Mailing Address 1445A LAUGHLIN AVENUE			FEC Identification Number C		
City HUDSON	State WI	Zip Code 54016	Amount of Each Disbursement this Period 25.00		
Purpose of Disbursement BANK FEES		Category/ Type 001	Transaction ID : B9BB441E3188440C1B88		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: _____	District: _____				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	75.00
<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 21 OF 29	
	<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)  
**FINSTAD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CHAIN BRIDGE BANK</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2022	
Mailing Address 1445A LAUGHLIN AVENUE			FEC Identification Number C	
City HUDSON	State WI	Zip Code 54016	Amount of Each Disbursement this Period 25.00	
Purpose of Disbursement BANK FEES		Category/ Type 001	Transaction ID : B04B080E34D904A25830	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. CHAIN BRIDGE BANK</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2022	
Mailing Address 1445A LAUGHLIN AVENUE			FEC Identification Number C	
City HUDSON	State WI	Zip Code 54016	Amount of Each Disbursement this Period 25.00	
Purpose of Disbursement BANK FEES		Category/ Type 001	Transaction ID : B40AE5CC61DEF4F83975	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. DMM MEDIA</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2022	
Mailing Address 8588 RICHMOND HIGHWAY STE 90546			FEC Identification Number C	
City ALEXANDRIA	State VA	Zip Code 22309-8034	Amount of Each Disbursement this Period 12171.26	
Purpose of Disbursement RADIO ADS		Category/ Type 001	Transaction ID : BF147D06CBC27439590F	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	12221.26
<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 22 OF 29	
	<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)  
**FINSTAD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. EBERHART, AARON, , ,</b>			Date of Disbursement MM / DD / YYYY 07 / 03 / 2022	
Mailing Address 1731 NORTHERN VALLEY DR NE			FEC Identification Number C	
City ROCHESTER	State MN	Zip Code 55906-6904	Amount of Each Disbursement this Period 9432.08	
Purpose of Disbursement CAMPAIGN CONSULTING		Category/ Type 001	Transaction ID : BFC4363B131624EF1B3D	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. FITZSIMMONS, DAVID, , ,</b>			Date of Disbursement MM / DD / YYYY 07 / 18 / 2022	
Mailing Address 11032 GUILDNER AVE NW			FEC Identification Number C	
City MAPLE LAKE	State MN	Zip Code 55358-2322	Amount of Each Disbursement this Period 3724.94	
Purpose of Disbursement EXPENSE REIMBURSEMENT		Category/ Type 001	Transaction ID : B0627DA9CF7E84E71B21	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. MAYO EVENT CENTER</b>			Date of Disbursement MM / DD / YYYY 04 / 18 / 2022	
Mailing Address 1 CIVIC CENTER PLAZA			FEC Identification Number C	
City MANKATO	State MN	Zip Code 56001-8822	Amount of Each Disbursement this Period 300.00	
Purpose of Disbursement EVENT ROOM RENTAL		Category/ Type 001	Transaction ID : B634ACFA43CB84DB5A0E	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	13157.02
<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 23 OF 29	
	<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)  
**FINSTAD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. HILTON GARDEN INN</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2022	
Mailing Address 20 CIVIC CENTER PLZ			FEC Identification Number C	
City MANKATO	State MN	Zip Code 56001-7777	Amount of Each Disbursement this Period 201.79	
Purpose of Disbursement EVENT ROOM RENTAL		Category/ Type 001	Transaction ID : BFFDDEF1135904CFA8C7	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. KEYSTONE CONSULTING</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2022	
Mailing Address PO BOX 153			FEC Identification Number C	
City LITCHFIELD	State MN	Zip Code 55355-0153	Amount of Each Disbursement this Period 3223.15	
Purpose of Disbursement PRINTING AND POSTAGE		Category/ Type 001	Transaction ID : B06FD74EBD50246D1965	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. FITZSIMMONS, DAVID, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2022	
Mailing Address 11032 GUILDNER AVE NW			FEC Identification Number C	
City MAPLE LAKE	State MN	Zip Code 55358-2322	Amount of Each Disbursement this Period 14093.55	
Purpose of Disbursement EXPENSE REIMBURSEMENT		Category/ Type	Transaction ID : BE37778DFAE8453EB87	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ SPECIAL PRIMARY			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	14093.55
<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 24 OF 29	
	<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)  
**FINSTAD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. KEYSTONE CONSULTING</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2022	
Mailing Address PO BOX 153			FEC Identification Number C	
City LITCHFIELD	State MN	Zip Code 55355-0153	Amount of Each Disbursement this Period 10368.61	
Purpose of Disbursement PRINTING AND POSTAGE		Category/ Type 001	Transaction ID : B06C2B8F0BD60436D8F4	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) SPECIAL PRIMARY			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. SHOW OFF SALES</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2022	
Mailing Address 901 N MILLER AVE			FEC Identification Number C	
City LITCHFIELD	State MN	Zip Code 55355-1205	Amount of Each Disbursement this Period 450.00	
Purpose of Disbursement PRINTING		Category/ Type 001	Transaction ID : BEF34275227194463B59	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) SPECIAL PRIMARY			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. SCREEN TECH</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2022	
Mailing Address 2272 3RD ST N STE A			FEC Identification Number C	
City SAINT PAUL	State MN	Zip Code 55109-2941	Amount of Each Disbursement this Period 3274.94	
Purpose of Disbursement YARD SIGNS		Category/ Type 001	Transaction ID : B9750C7C6A64E42CEBA6	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) SPECIAL PRIMARY			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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 25 OF 29	
	<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)  
**FINSTAD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. NAJWA'S CATERING</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2022	
Mailing Address 1 CIVIC CENTER PLAZA			FEC Identification Number C	
City MANKATO	State MN	Zip Code 56001-8822	Amount of Each Disbursement this Period 1313.17	
Purpose of Disbursement FOOD AND BEVERAGE		Category/ Type 001	Transaction ID : B38870BB882964A71832	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. NORTH AMERICAN LABEL</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2022	
Mailing Address PO BOX 1053			FEC Identification Number C	
City ALBERT LEA	State MN	Zip Code 56007-1053	Amount of Each Disbursement this Period 188.60	
Purpose of Disbursement PRINTING		Category/ Type 001	Transaction ID : B4DCD67C5C1B14DFFB60	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. PINNACLE DIRECT</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2022	
Mailing Address 15260 113TH ST N			FEC Identification Number C	
City STILLWATER	State MN	Zip Code 55082-9575	Amount of Each Disbursement this Period 4151.37	
Purpose of Disbursement DIRECT MAIL		Category/ Type 001	Transaction ID : BFE72E86261D140AAB2C	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5653.14
<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 26 OF 29	
	<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)  
**FINSTAD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PINNACLE DIRECT</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2022	
Mailing Address 15260 113TH ST N			FEC Identification Number C	
City STILLWATER	State MN	Zip Code 55082-9575	Amount of Each Disbursement this Period 6249.80	
Purpose of Disbursement DIRECT MAIL		Category/ Type 001	Transaction ID : B8CD7DF9684B547F3BB1	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. SDP CAGING</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2022	
Mailing Address PO BOX 183			FEC Identification Number C	
City HUDSON	State WI	Zip Code 54016-0183	Amount of Each Disbursement this Period 130.50	
Purpose of Disbursement CAGING		Category/ Type 001	Transaction ID : B0AF71AAC451F4C83967	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. SHANNA WOODBURY CONSULTING, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2022	
Mailing Address P. O. BOX 120697			FEC Identification Number C	
City SAINT PAUL	State MN	Zip Code 55112-0022	Amount of Each Disbursement this Period 9574.75	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001	Transaction ID : BFC25773B12234A1EA1A	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	15955.05
<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 27 OF 29	
	<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)  
**FINSTAD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. STRATEGIC MEDIA SERVICES, INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2022	
Mailing Address 1911 NORTH FT. MYER DRIVE			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22209-1607	Amount of Each Disbursement this Period 94769.00	
Purpose of Disbursement MEDIA PLACEMENT		Category/ Type 001	Transaction ID : B49C16A33C4BF4014878	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. TARGETED CREATIVE COMMUNICATIONS, INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2022	
Mailing Address 106 SOUTH COLUMBUS ST			FEC Identification Number C	
City ALEXANDRIA	State VA	Zip Code 22314-3036	Amount of Each Disbursement this Period 1186.00	
Purpose of Disbursement PRINTING AND PRODUCTION		Category/ Type 001	Transaction ID : BD289FA8A8F1A4772B6C	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICALLY SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2022	
Mailing Address 1776 WILSON BLVD			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22209-2515	Amount of Each Disbursement this Period 76.90	
Purpose of Disbursement CREDIT CARD FEES		Category/ Type 001	Transaction ID : BE80851E1C87A450A973	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	96031.90
<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 28 OF 29	
	<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)  
**FINSTAD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICALLY SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2022	
Mailing Address 1776 WILSON BLVD			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22209-2515	Amount of Each Disbursement this Period 133.88	
Purpose of Disbursement CREDIT CARD FEES		Category/ Type 001	Transaction ID : B546E27C394AB46649E8	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICALLY SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2022	
Mailing Address 1776 WILSON BLVD			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22209-2515	Amount of Each Disbursement this Period 135.40	
Purpose of Disbursement CREDIT CARD FEES		Category/ Type 001	Transaction ID : B4A140DEF617A435A92B	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" 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			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>	
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).....▶	269.28
<b>TOTAL</b> This Period (last page this line number only).....▶	160611.10

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**FINSTAD FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor FITZSIMMONS, DAVID, , ,			Nature of Debt (Purpose):
Mailing Address 11032 GUILDNER AVE NW			
City MAPLE LAKE	State MN	Zip Code 55358-2322	

Outstanding Balance Beginning This Period 14093.55	Transaction ID : DF617DDB9739747DDA19	
Amount Incurred This Period 0.00	Payment This Period 14093.55	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period	Outstanding Balance at Close of This Period	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period	Outstanding Balance at Close of This Period	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	0.00
2) <b>TOTALS</b> This Period (last page this line number only) .....	0.00
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) .....	