

# 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

HUGHES FOR CONGRESS

ADDRESS (number and street)

PO BOX 248

Check if different than previously reported. (ACC)

KARLSTAD

MN

56732

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER** ▼

C C00610071

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

MN

07

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

M M /

D D /

Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y 2019

through

M M /

D D /

Y Y Y Y 2019

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

M M /

D D /

Y Y Y Y 2019

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

Office Use Only

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**HUGHES FOR CONGRESS**

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

|   | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|---|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans)   |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e))....   | 14064.00                | 15476.00                           |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....   | 0.00                    | 0.00                               |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)).....                            | 14064.00                | 15476.00                           |
| 7. Net Operating Expenditures   |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....  | 9540.67                 | 11936.46                           |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14).....  | 62.54                   | 94.77                              |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)).....                                      | 9478.13                 | 11841.69                           |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27).....   | 8163.45                 |                                    |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D).....  | 0.00                    |                                    |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D)..... | 13470.44                |                                    |

**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

**HUGHES FOR CONGRESS**

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

| <b>I. RECEIPTS</b>   | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>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).....   | 10750.00                              | 11250.00                                   |
| (ii) Unitemized.....   | 1314.00                               | 2226.00                                    |
| (iii) TOTAL of contributions from individuals ▶  | 12064.00                              | 13476.00                                   |
| (b) Political Party Committees.....  | 0.00                                  | 0.00                                       |
| (c) Other Political Committees (such as PACs).....   | 2000.00                               | 2000.00                                    |
| (d) The Candidate.....   | 0.00                                  | 0.00                                       |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..                     | 14064.00                              | 15476.00                                   |
| <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>                                | 62.54                                 | 94.77                                      |
| <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> | 14126.54                              | 15570.77                                   |

**DETAILED SUMMARY PAGE**  
of Disbursements

| II. DISBURSEMENTS  | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES.....  | 9540.67                       | 11936.46                           |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES .....                        | 0.00                          | 0.00                               |
| 19. LOAN REPAYMENTS:   |                               |                                    |
| (a) Of Loans Made or Guaranteed<br>by the Candidate.....                     | 0.00                          | 6000.00                            |
| (b) Of All Other Loans .....   | 0.00                          | 0.00                               |
| (c) TOTAL LOAN REPAYMENTS<br>(add Lines 19(a) and (b)).....                  | 0.00                          | 6000.00                            |
| 20. REFUNDS OF CONTRIBUTIONS TO:   |                               |                                    |
| (a) Individuals/Persons Other<br>Than Political Committees .....             | 0.00                          | 0.00                               |
| (b) Political Party Committees.....  | 0.00                          | 0.00                               |
| (c) Other Political Committees<br>(such as PACs).....                        | 0.00                          | 0.00                               |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c)).....       | 0.00                          | 0.00                               |
| 21. OTHER DISBURSEMENTS .....  | 0.00                          | 0.00                               |
| 22. <b>TOTAL DISBURSEMENTS</b><br>(add Lines 17, 18, 19(c), 20(d), and 21) ► | 9540.67                       | 17936.46                           |

**III. CASH SUMMARY**

|   |          |
|---|----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                                | 3577.58  |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....                            | 14126.54 |
| 25. SUBTOTAL (add Line 23 and Line 24).....   | 17704.12 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                               | 9540.67  |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25)..... | 8163.45  |

**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 19                        |                                    |
|   | <input checked="" type="checkbox"/> 11a<br>12 | <input type="checkbox"/> 11b<br>13a | <input type="checkbox"/> 11c<br>13b | <input type="checkbox"/> 11d<br>14 |

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

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

Mailing Address 122 Main Ave E

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Rothsay | State<br>MN | Zip Code<br>56579 |
|-----------------|-------------|-------------------|

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

|                                   |                      |
|-----------------------------------|----------------------|
| Name of Employer<br>SELF-EMPLOYED | Occupation<br>FARMER |
|-----------------------------------|----------------------|

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2019

**Transaction ID : SA11AI.7959**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Memo Item Contribution

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

Mailing Address 3152-300th Street

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Marshall | State<br>MN | Zip Code<br>55256 |
|------------------|-------------|-------------------|

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

|                             |                       |
|-----------------------------|-----------------------|
| Name of Employer<br>Retired | Occupation<br>Retired |
|-----------------------------|-----------------------|

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2019

**Transaction ID : SA11AI.7951**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

Memo Item Contribution

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

Mailing Address 12595 199th Ave NE

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>New London | State<br>MN | Zip Code<br>56273 |
|--------------------|-------------|-------------------|

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

|                                 |                     |
|---------------------------------|---------------------|
| Name of Employer<br>Relco, Inc. | Occupation<br>Owner |
|---------------------------------|---------------------|

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 18 / 2019

**Transaction ID : SA11AI.7929**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2700.00

Memo Item Contribution

|   |               |
|---|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶           | _____ 3450.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶ | _____         |

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

|   |   |                                     |                                     |                                    |                             |
|---|---|-------------------------------------|-------------------------------------|------------------------------------|-----------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                     |                                     |                                    | PAGE 6 OF 19                |
|   | <input checked="" type="checkbox"/> 11a<br>12 | <input type="checkbox"/> 11b<br>13a | <input type="checkbox"/> 11c<br>13b | <input type="checkbox"/> 11d<br>14 | <input type="checkbox"/> 15 |

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

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

Mailing Address 604 N County Road 57

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Winthrop | State<br>MN | Zip Code<br>55396 |
|------------------|-------------|-------------------|

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

|  |                                   |
|--|-----------------------------------|
| Name of Employer<br>US Dept of Veteran Affairs | Occupation<br>Benefits Specialist |
|--|-----------------------------------|

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 11 / 2019

**Transaction ID : SA11AI.7926**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

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

Mailing Address 604 N County Road 57

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Winthrop | State<br>MN | Zip Code<br>55396 |
|------------------|-------------|-------------------|

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

|  |                                   |
|--|-----------------------------------|
| Name of Employer<br>US Dept of Veteran Affairs | Occupation<br>Benefits Specialist |
|--|-----------------------------------|

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
750.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 12 / 2019

**Transaction ID : SA11AI.7949**

Amount of Each Receipt this Period  
250.00

Memo Item  
Contribution

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

Mailing Address 19600 FOXFIELD DR

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>PRIOR LAKE | State<br>MN | Zip Code<br>55372 |
|--------------------|-------------|-------------------|

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

|                                   |                           |
|-----------------------------------|---------------------------|
| Name of Employer<br>SELF EMPLOYED | Occupation<br>ESTHETICIAN |
|-----------------------------------|---------------------------|

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 18 / 2019

**Transaction ID : SA11AI.7958**

Amount of Each Receipt this Period  
300.00

Memo Item  
Contribution

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 800.00 |
| <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 19                        |                                    |
|   | <input checked="" type="checkbox"/> 11a<br>12 | <input type="checkbox"/> 11b<br>13a | <input type="checkbox"/> 11c<br>13b | <input type="checkbox"/> 11d<br>14 |

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

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

Mailing Address 29522 400TH AVENUE

|                |             |                   |
|----------------|-------------|-------------------|
| City<br>ROSEAU | State<br>MN | Zip Code<br>56751 |
|----------------|-------------|-------------------|

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

|                             |                       |
|-----------------------------|-----------------------|
| Name of Employer<br>RETIRED | Occupation<br>RETIRED |
|-----------------------------|-----------------------|

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 25 / 2019

**Transaction ID : SA11AI.7935**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 300.00

Memo Item  
CONTRIBUTION

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

Mailing Address P O BOX 781

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>WILLMAR | State<br>MN | Zip Code<br>56201 |
|-----------------|-------------|-------------------|

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

|   |                                     |
|---|-------------------------------------|
| Name of Employer<br>Information Requested | Occupation<br>Information Requested |
|---|-------------------------------------|

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2019

**Transaction ID : SA11AI.7968**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

Memo Item  
Contribution

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

Mailing Address 1315 RED FOX ROAD SUITE 200

|                     |             |                   |
|---------------------|-------------|-------------------|
| City<br>ARDEN HILLS | State<br>MN | Zip Code<br>55112 |
|---------------------|-------------|-------------------|

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

|                             |                       |
|-----------------------------|-----------------------|
| Name of Employer<br>Retired | Occupation<br>Retired |
|-----------------------------|-----------------------|

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 24 / 2019

**Transaction ID : SA11AI.7912**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2700.00

Memo Item  
CONTRIBUTION

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | _____ 3500.00 |
| <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 8 OF 19                        |                                    |
|   | <input checked="" type="checkbox"/> 11a<br>12 | <input type="checkbox"/> 11b<br>13a | <input type="checkbox"/> 11c<br>13b | <input type="checkbox"/> 11d<br>14 |

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

|   |             |  |  |  |
|---|-------------|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Knochenmus, Jon, , ,</b>   |             |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>02 / 25 / 2019 |  |
| Mailing Address 1600 Hahn Road  |             |  | <b>Transaction ID : SA11AI.7934</b>                          |  |
| City<br>Marshall  | State<br>MN | Zip Code<br>56258                        | Amount of Each Receipt this Period<br>_____ 500.00           |  |
| FEC ID number of contributing federal political committee.<br>C   |             |  | <input type="checkbox"/> Memo Item<br>CONTRIBUTION           |  |
| Name of Employer<br>Ralco   |             | Occupation<br>President Emeritus         |  |  |
| Receipt For: 2020<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>_____ 500.00 |  |  |

|   |             |   |  |  |
|---|-------------|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Schiefelbein, Fred, , ,</b>  |             |   | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>03 / 29 / 2019 |  |
| Mailing Address 74208 360th St  |             |   | <b>Transaction ID : SA11AI.7969</b>                          |  |
| City<br>Kimball   | State<br>MN | Zip Code<br>55353                         | Amount of Each Receipt this Period<br>_____ 1000.00          |  |
| FEC ID number of contributing federal political committee.<br>C   |             |   | <input type="checkbox"/> Memo Item<br>Contribution           |  |
| Name of Employer<br>Retired   |             | Occupation<br>Retired                     |  |  |
| Receipt For: 2020<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>_____ 1000.00 |  |  |

|   |             |  |  |  |
|---|-------------|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. SMEDSMO, DARRIN, , ,</b>   |             |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>03 / 18 / 2019 |  |
| Mailing Address 29587 380TH AVE   |             |  | <b>Transaction ID : SA11AI.7960</b>                          |  |
| City<br>ROSEAU  | State<br>MN | Zip Code<br>56751                        | Amount of Each Receipt this Period<br>_____ 500.00           |  |
| FEC ID number of contributing federal political committee.<br>C   |             |  | <input type="checkbox"/> Memo Item<br>Contribution           |  |
| Name of Employer<br>AmericInn   |             | Occupation<br>Owner                      |  |  |
| Receipt For: 2020<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>_____ 500.00 |  |  |

|   |               |
|---|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶           | _____ 2000.00 |
| <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 9 OF 19  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

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

Mailing Address 1920 OAKCREST AVE STE 1

City ROSEVILLE    State MN    Zip Code 55113

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

Name of Employer BUILDING RESTORATION    Occupation PRESIDENT

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2019

Transaction ID : SA11AI.7971

Amount of Each Receipt this Period  
 1000.00

Memo Item  
 CONTRIBUTION

**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) ▼

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

**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).....▶           | 1000.00  |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 10750.00 |

**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 19                                  |                                    |
|   | <input type="checkbox"/> 11a<br>12 | <input type="checkbox"/> 11b<br>13a | <input checked="" type="checkbox"/> 11c<br>13b | <input type="checkbox"/> 11d<br>14 |

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

**A.** Full Name (Last, First, Middle Initial)  
**EMMER FOR CONGRESS**

Mailing Address PO BOX 998

|               |             |                   |
|---------------|-------------|-------------------|
| City<br>ANOKA | State<br>MN | Zip Code<br>55303 |
|---------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00545749

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_,\_\_\_\_\_,\_\_\_\_\_ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2019

**Transaction ID : SA11C.7908**

Amount of Each Receipt this Period  
 \_\_\_\_\_,\_\_\_\_\_,\_\_\_\_\_ 2000.00

Memo Item  
 IN-KIND - TELEMARKETING

**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) ▼

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

**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).....▶           | _____ 2000.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | _____ 2000.00 |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 11 OF 19                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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

|  |  |                                    |  |  |
|--|--|------------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Brick Inc</b>   |  |                                    | Date of Disbursement<br>MM / DD / YYYY<br>02 / 20 / 2019 |  |
| Mailing Address 10 South Fifth St Suite 200  |  |                                    | FEC Identification Number<br>C 00610071                  |  |
| City<br>Minneapolis  | State<br>MN  | Zip Code<br>55402                  | Amount of Each Disbursement this Period<br>2500.00       |  |
| Purpose of Disbursement<br>Digital Consulting  |  | Category/<br>Type<br>001           | Transaction ID : SB17.7930                               |  |
| Candidate Name<br><b>HUGHES FOR CONGRESS</b>   |  | Memo Item <input type="checkbox"/> |  |  |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2020<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                                    |  |  |
| State: MN  | District: 07   |                                    |  |  |

|  |  |                                    |  |  |
|--|--|------------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Constant Contact</b>  |  |                                    | Date of Disbursement<br>MM / DD / YYYY<br>03 / 06 / 2019 |  |
| Mailing Address 1601 Trapelo Road  |  |                                    | FEC Identification Number<br>C 00610071                  |  |
| City<br>Waltham  | State<br>MA  | Zip Code<br>02451                  | Amount of Each Disbursement this Period<br>675.00        |  |
| Purpose of Disbursement<br>EMAILS  |  | Category/<br>Type<br>001           | Transaction ID : SB17.7944                               |  |
| Candidate Name<br><b>HUGHES FOR CONGRESS</b>   |  | Memo Item <input type="checkbox"/> |  |  |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2020<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                                    |  |  |
| State: MN  | District: 07   |                                    |  |  |

|  |  |                                    |  |  |
|--|--|------------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. EMMER FOR CONGRESS</b>  |  |                                    | Date of Disbursement<br>MM / DD / YYYY<br>01 / 21 / 2019 |  |
| Mailing Address PO BOX 998   |  |                                    | FEC Identification Number<br>C 00545749                  |  |
| City<br>ANOKA  | State<br>MN  | Zip Code<br>55303                  | Amount of Each Disbursement this Period<br>2000.00       |  |
| Purpose of Disbursement<br>IN-KIND - TELEMARKETING   |  | Category/<br>Type<br>001           | Transaction ID : SB17.7911                               |  |
| Candidate Name<br><b>EMMER, THOMAS EARL JR., , ,</b>   |  | Memo Item <input type="checkbox"/> |  |  |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                                    |  |  |
| State: MN  | District: 06   |                                    |  |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 5175.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |         |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 12 OF 19                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. K.I.P. Consulting</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>01 / 10 / 2019 |
| Mailing Address PO Box 326  |  | FEC Identification Number<br>C C00610071                      |
| City<br>Monticello  | State<br>MN  | Zip Code<br>55362   |
| Purpose of Disbursement<br>Campaign Consulting  | Category/<br>Type<br>001   | Amount of Each Disbursement this Period<br>2759.06            |
| Candidate Name<br><b>HUGHES FOR CONGRESS</b>  | Disbursement For: 2018<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID : SB17.7899                                    |
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: MN District: 07   | <input type="checkbox"/> Memo Item                            |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. K.I.P. Consulting</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>02 / 05 / 2019 |
| Mailing Address PO Box 326  |  | FEC Identification Number<br>C C00610071                      |
| City<br>Monticello  | State<br>MN  | Zip Code<br>55362   |
| Purpose of Disbursement<br>Campaign Consulting  | Category/<br>Type<br>001   | Amount of Each Disbursement this Period<br>279.00             |
| Candidate Name<br><b>HUGHES FOR CONGRESS</b>  | Disbursement For: 2020<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID : SB17.7918                                    |
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: MN District: 07   | <input type="checkbox"/> Memo Item                            |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Same Day Processing</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>02 / 19 / 2019 |
| Mailing Address PO Box 25132  |  | FEC Identification Number<br>C C00610071                      |
| City<br>St Paul   | State<br>MN  | Zip Code<br>55125   |
| Purpose of Disbursement<br>COMPLIANCE CONSULTING  | Category/<br>Type<br>001   | Amount of Each Disbursement this Period<br>810.30             |
| Candidate Name<br><b>HUGHES FOR CONGRESS</b>  | Disbursement For: 2018<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID : SB17.7927                                    |
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: MN District: 07   | <input type="checkbox"/> Memo Item                            |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 3848.36 |
| <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 13 OF 19                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. STRIPE</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>01 / 08 / 2019  |
| Mailing Address 185 BERRY ST STE 550                        |   | FEC Identification Number<br>C C00610071   |
| City<br>SAN FRANCISCO                                       | State<br>CA   | Zip Code<br>94107  |
| Purpose of Disbursement<br>CREDIT CARD FEES                 | Category/<br>Type<br>001  | Amount of Each Disbursement this Period<br>0.79  |
| Candidate Name<br><b>HUGHES FOR CONGRESS</b>                | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2020<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| State: MN District: 07                                      | Transaction ID : SB17.7895<br><input type="checkbox"/> Memo Item  |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. STRIPE</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>01 / 29 / 2019  |
| Mailing Address 185 BERRY ST STE 550                        |   | FEC Identification Number<br>C C00610071   |
| City<br>SAN FRANCISCO                                       | State<br>CA   | Zip Code<br>94107  |
| Purpose of Disbursement<br>CREDIT CARD FEES                 | Category/<br>Type<br>001  | Amount of Each Disbursement this Period<br>1.28  |
| Candidate Name<br><b>HUGHES FOR CONGRESS</b>                | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2020<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| State: MN District: 07                                      | Transaction ID : SB17.7916<br><input type="checkbox"/> Memo Item  |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. STRIPE</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>01 / 31 / 2019  |
| Mailing Address 185 BERRY ST STE 550                        |   | FEC Identification Number<br>C C00610071   |
| City<br>SAN FRANCISCO                                       | State<br>CA   | Zip Code<br>94107  |
| Purpose of Disbursement<br>CREDIT CARD FEES                 | Category/<br>Type<br>001  | Amount of Each Disbursement this Period<br>0.55  |
| Candidate Name<br><b>HUGHES FOR CONGRESS</b>                | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2020<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| State: MN District: 07                                      | Transaction ID : SB17.7913<br><input type="checkbox"/> Memo Item  |  |

|  |      |
|--|------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 2.62 |
| <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:<br>(check only one)          |                                    | PAGE 14 OF 19                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. STRIPE</b> |  | Date of Disbursement<br>MM / DD / YYYY<br>02 / 08 / 2019   |
| Mailing Address 185 BERRY ST STE 550                        |  | FEC Identification Number<br>C C00610071   |
| City<br>SAN FRANCISCO                                       | State<br>CA  | Zip Code<br>94107  |
| Purpose of Disbursement<br>CREDIT CARD FEES                 | Category/<br>Type<br>001   | Amount of Each Disbursement this Period<br>5.99  |
| Candidate Name<br><b>HUGHES FOR CONGRESS</b>                | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2020<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| State: MN   | District: 07   | Transaction ID : SB17.7921<br><input type="checkbox"/> Memo Item   |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. STRIPE</b> |  | Date of Disbursement<br>MM / DD / YYYY<br>02 / 11 / 2019   |
| Mailing Address 185 BERRY ST STE 550                        |  | FEC Identification Number<br>C C00610071   |
| City<br>SAN FRANCISCO                                       | State<br>CA  | Zip Code<br>94107  |
| Purpose of Disbursement<br>CREDIT CARD FEES                 | Category/<br>Type<br>001   | Amount of Each Disbursement this Period<br>2.75  |
| Candidate Name<br><b>HUGHES FOR CONGRESS</b>                | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2020<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| State: MN   | District: 07   | Transaction ID : SB17.7919<br><input type="checkbox"/> Memo Item   |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. STRIPE</b> |  | Date of Disbursement<br>MM / DD / YYYY<br>02 / 11 / 2019   |
| Mailing Address 185 BERRY ST STE 550                        |  | FEC Identification Number<br>C C00610071   |
| City<br>SAN FRANCISCO                                       | State<br>CA  | Zip Code<br>94107  |
| Purpose of Disbursement<br>CREDIT CARD FEES                 | Category/<br>Type<br>001   | Amount of Each Disbursement this Period<br>12.55   |
| Candidate Name<br><b>HUGHES FOR CONGRESS</b>                | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2020<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| State: MN   | District: 07   | Transaction ID : SB17.7925<br><input type="checkbox"/> Memo Item   |

|  |       |
|--|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 21.29 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |       |

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 15 OF 19                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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

|   |  |                                    |   |  |
|---|--|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. STRIPE</b>   |  |                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>02 / 18 / 2019 |  |
| Mailing Address 185 BERRY ST STE 550  |  |                                    | FEC Identification Number<br>C C00610071                      |  |
| City<br>SAN FRANCISCO   | State<br>CA  | Zip Code<br>94107                  | Amount of Each Disbursement this Period<br>132.60             |  |
| Purpose of Disbursement<br>CREDIT CARD FEES   |  | Category/<br>Type<br>001           | Transaction ID : SB17.7928                                    |  |
| Candidate Name<br>HUGHES FOR CONGRESS   |  | Memo Item <input type="checkbox"/> |   |  |
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2020<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                                    |   |  |
| State: MN   | District: 07   |                                    |   |  |

|   |  |                                    |   |  |
|---|--|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. STRIPE</b>   |  |                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>02 / 25 / 2019 |  |
| Mailing Address 185 BERRY ST STE 550  |  |                                    | FEC Identification Number<br>C C00610071                      |  |
| City<br>SAN FRANCISCO   | State<br>CA  | Zip Code<br>94107                  | Amount of Each Disbursement this Period<br>24.80              |  |
| Purpose of Disbursement<br>CREDIT CARD FEES   |  | Category/<br>Type<br>001           | Transaction ID : SB17.7933                                    |  |
| Candidate Name<br>HUGHES FOR CONGRESS   |  | Memo Item <input type="checkbox"/> |   |  |
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2020<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                                    |   |  |
| State: MN   | District: 07   |                                    |   |  |

|   |  |                                    |   |  |
|---|--|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. STRIPE</b>   |  |                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>02 / 28 / 2019 |  |
| Mailing Address 185 BERRY ST STE 550  |  |                                    | FEC Identification Number<br>C C00610071                      |  |
| City<br>SAN FRANCISCO   | State<br>CA  | Zip Code<br>94107                  | Amount of Each Disbursement this Period<br>4.15               |  |
| Purpose of Disbursement<br>CREDIT CARD FEES   |  | Category/<br>Type<br>001           | Transaction ID : SB17.7938                                    |  |
| Candidate Name<br>HUGHES FOR CONGRESS   |  | Memo Item <input type="checkbox"/> |   |  |
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2020<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                                    |   |  |
| State: MN   | District: 07   |                                    |   |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 161.55 |
| <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 16 OF 19                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. STRIPE</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>03 / 11 / 2019  |
| Mailing Address 185 BERRY ST STE 550                        |   | FEC Identification Number<br>C C00610071   |
| City<br>SAN FRANCISCO                                       | State<br>CA   | Zip Code<br>94107  |
| Purpose of Disbursement<br>CREDIT CARD FEES                 | Category/<br>Type<br>001  | Amount of Each Disbursement this Period<br>0.79  |
| Candidate Name<br><b>HUGHES FOR CONGRESS</b>                | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2020<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| State: MN District: 07                                      | Transaction ID : SB17.7947<br><input type="checkbox"/> Memo Item  |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. STRIPE</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>03 / 13 / 2019  |
| Mailing Address 185 BERRY ST STE 550                        |   | FEC Identification Number<br>C C00610071   |
| City<br>SAN FRANCISCO                                       | State<br>CA   | Zip Code<br>94107  |
| Purpose of Disbursement<br>CREDIT CARDS FEES                | Category/<br>Type<br>001  | Amount of Each Disbursement this Period<br>12.55   |
| Candidate Name<br><b>HUGHES FOR CONGRESS</b>                | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2020<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| State: MN District: 07                                      | Transaction ID : SB17.7948<br><input type="checkbox"/> Memo Item  |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. STRIPE</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>03 / 15 / 2019  |
| Mailing Address 185 BERRY ST STE 550                        |   | FEC Identification Number<br>C C00610071   |
| City<br>SAN FRANCISCO                                       | State<br>CA   | Zip Code<br>94107  |
| Purpose of Disbursement<br>CREDIT CARD FEES                 | Category/<br>Type<br>001  | Amount of Each Disbursement this Period<br>5.20  |
| Candidate Name<br><b>HUGHES FOR CONGRESS</b>                | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2020<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| State: MN District: 07                                      | Transaction ID : SB17.7956<br><input type="checkbox"/> Memo Item  |  |

|  |       |
|--|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 18.54 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |       |



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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 17 OF 19                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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

|  |  |                                    |   |  |
|--|--|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. STRIPE</b>  |  |                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>03 / 18 / 2019 |  |
| Mailing Address 185 BERRY ST STE 550   |  |                                    | FEC Identification Number<br>C C00610071                      |  |
| City<br>SAN FRANCISCO  | State<br>CA  | Zip Code<br>94107                  | Amount of Each Disbursement this Period<br>35.20              |  |
| Purpose of Disbursement<br>CREDIT CARD FEES  |  | Category/<br>Type<br>001           | Transaction ID : SB17.7957                                    |  |
| Candidate Name<br>HUGHES FOR CONGRESS  |  | Memo Item <input type="checkbox"/> |   |  |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2020<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                                    |   |  |
| State: MN District: 07   |  |                                    |   |  |

|  |  |                                    |   |  |
|--|--|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. STRIPE</b>  |  |                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>03 / 28 / 2019 |  |
| Mailing Address 185 BERRY ST STE 550   |  |                                    | FEC Identification Number<br>C C00610071                      |  |
| City<br>SAN FRANCISCO  | State<br>CA  | Zip Code<br>94107                  | Amount of Each Disbursement this Period<br>7.52               |  |
| Purpose of Disbursement<br>CREDIT CARD FEES  |  | Category/<br>Type<br>001           | Transaction ID : SB17.7974                                    |  |
| Candidate Name<br>HUGHES FOR CONGRESS  |  | Memo Item <input type="checkbox"/> |   |  |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2020<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                                    |   |  |
| State: MN District: 07   |  |                                    |   |  |

|  |  |                                    |   |  |
|--|--|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. STRIPE</b>  |  |                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>03 / 29 / 2019 |  |
| Mailing Address 185 BERRY ST STE 550   |  |                                    | FEC Identification Number<br>C C00610071                      |  |
| City<br>SAN FRANCISCO  | State<br>CA  | Zip Code<br>94107                  | Amount of Each Disbursement this Period<br>0.55               |  |
| Purpose of Disbursement<br>CREDIT CARD FEES  |  | Category/<br>Type<br>001           | Transaction ID : SB17.7980                                    |  |
| Candidate Name<br>HUGHES FOR CONGRESS  |  | Memo Item <input type="checkbox"/> |   |  |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2020<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                                    |   |  |
| State: MN District: 07   |  |                                    |   |  |

|  |       |
|--|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 43.27 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |       |

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 18 OF 19                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. STRIPE</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>03 / 30 / 2019 |
| Mailing Address 185 BERRY ST STE 550  |  | FEC Identification Number<br>C C00610071                      |
| City<br>SAN FRANCISCO   | State<br>CA  | Zip Code<br>94107   |
| Purpose of Disbursement<br>CREDIT CARD FEES   |  | 001   |
| Candidate Name<br><b>HUGHES FOR CONGRESS</b>  |  | Amount of Each Disbursement this Period<br>52.11              |
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2020<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID : SB17.7970                                    |
| State: MN District: 07  |  | <input type="checkbox"/> Memo Item                            |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B.</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y |
| Mailing Address  |  | FEC Identification Number<br>C              |
| City   | State  | Zip Code                                    |
| Purpose of Disbursement  |  | Category/<br>Type                           |
| Candidate Name   |  | Amount of Each Disbursement this Period     |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item          |
| State:   | District:  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C.</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y |
| Mailing Address  |  | FEC Identification Number<br>C              |
| City   | State  | Zip Code                                    |
| Purpose of Disbursement  |  | Category/<br>Type                           |
| Candidate Name   |  | Amount of Each Disbursement this Period     |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item          |
| State:   | District:  |   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 52.11   |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 9322.74 |

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **HUGHES FOR CONGRESS** Transaction ID : **SC/10.4799**

|   |             |   |
|---|-------------|---|
| <b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)<br>Hughes, David, , , <input type="checkbox"/> Memo Item |             | Election: 2018<br><input checked="" type="checkbox"/> Primary<br><input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| Mailing Address<br>PO Box 248   |             | <input type="checkbox"/> Personal Funds of the Candidate  |
| City<br>Karlstad  | State<br>MN |   |

|                         |                            |   |
|-------------------------|----------------------------|---|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| 40000.00                | 26529.56                   | 13470.44                                    |

|              |                      |                     |                                  |   |
|--------------|----------------------|---------------------|----------------------------------|---|
| <b>TERMS</b> | Date Incurred        | Date Due            | Interest Rate (If none, enter 0) | Secured:  |
|              | M 06 / D 22 / Y 2017 | M / D / Y July 2022 | 9.90 % (apr)                     | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                |
|--|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |

|   |          |
|---|----------|
| <b>SUBTOTALS</b> This Period This Page (optional).....▶       | 13470.44 |
| <b>TOTALS</b> This Period (last page in this line only).....▶ | 13470.44 |

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.