

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.   
Minnesota Democratic-Farmer-Labor Party

ADDRESS (number and street)   
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

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

Type or Print Name of Treasurer Thomas Hamilton

Signature of Treasurer Thomas Hamilton [Electronically Filed] Date  /  /

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Minnesota Democratic-Farmer-Labor Party

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		188910.33
(b) Cash on Hand at Beginning of Reporting Period.....	316067.89	
(c) Total Receipts (from Line 19) .....	271116.91	592764.63
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	587184.80	781674.96
7. Total Disbursements (from Line 31).....	301659.91	496150.07
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	285524.89	285524.89
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	5000.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	21040.50	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**Minnesota Democratic-Farmer-Labor Party**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	69070.00	190005.00
(ii) Unitemized .....	48511.50	155913.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	117581.50	345918.00
(b) Political Party Committees .....	3220.00	6440.00
(c) Other Political Committees (such as PACs).....	12500.00	40649.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	133301.50	393007.00
12. Transfers From Affiliated/Other Party Committees.....	13000.00	38840.47
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	50.06	243.18
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	124765.35	160673.98
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	124765.35	160673.98
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	271116.91	592764.63
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	146351.56	432090.65

# DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	80347.99	97745.78
(ii) Non-Federal Share.....	122685.72	175791.73
(b) Other Federal Operating Expenditures .....	87185.89	192043.57
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	290219.60	465581.08
22. Transfers to Affiliated/Other Party Committees.....	3000.00	3000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	100.00	5225.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	100.00	5225.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	8340.31	22343.99
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	8340.31	22343.99
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	301659.91	496150.07
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	178974.19	320358.34

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	133301.50	393007.00
34. Total Contribution Refunds (from Line 28(d)) .....	100.00	5225.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	133201.50	387782.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	167533.88	289789.35
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	167533.88	289789.35

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XN  
Transaction ID :

The party paid for all volunteer materials with its own funds. No funds from National Party Transfers were used in association with these activities. Disbursements itemized on Schedule B, line 21b relate to individuals that are paid 100% federal but not currently involved in federal election activity. Disbursements itemized on Schedule H4, Line 21a relate to individuals who spend more than 0% but less than 25% in a given month on any federal activity. Disbursements itemized on Schedule B, line 30 relate to individuals who spend more than 25% on federal election activity. All related expenses are apportioned accordingly.

Form/Schedule:  
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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)  
**Minnesota Democratic-Farmer-Labor Party**

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

Mailing Address 15041 Fillmore St NE

City Ham Lake State MN Zip Code 55304-6107

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
02 / 06 / 2014  
Transaction ID : **C9565213**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 3529 W 54th St

City Edina State MN Zip Code 55410-2301

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

Name of Employer Federal Reserve Bank Occupation Bank Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt  
02 / 05 / 2014  
Transaction ID : **C9565252**

Amount of Each Receipt this Period  
375.00

**C. Abou Amara II**  
Full Name (Last, First, Middle Initial)

Mailing Address 2703 E 28th St

City Minneapolis State MN Zip Code 55406-1509

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

Name of Employer State of Minnesota Occupation Administrator

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
02 / 01 / 2014  
Transaction ID : **C9557637**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 875.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

**A. Linda Anderson**  
Full Name (Last, First, Middle Initial)  
Mailing Address 37676 Sunset Dr  
City Ponsford State MN Zip Code 56575-9103  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 06 / 2014  
**Transaction ID : C9565271**  
Amount of Each Receipt this Period  
250.00

**B. Catherine Avery**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4510 Vallacher Ave  
City St Louis Park State MN Zip Code 55416-4932  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Psychologist  
Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 07 / 2014  
**Transaction ID : C9565906**  
Amount of Each Receipt this Period  
250.00

**C. Carol Ball**  
Full Name (Last, First, Middle Initial)  
Mailing Address 9809 85th St S  
City Cottage Grove State MN Zip Code 55016-3717  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Planned Parenthood Occupation Physician  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 24 / 2014  
**Transaction ID : C9590262**  
Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 750.00  
**TOTAL** This Period (last page this line number only)..... ▶



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

**A. Ramona Beard**  
Full Name (Last, First, Middle Initial)  
Mailing Address 7716 W 84th Street Cir  
City Bloomington State MN Zip Code 55438-1067  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Homemaker Occupation Homemaker  
Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
02 / 27 / 2014  
**Transaction ID : C9594499**  
Amount of Each Receipt this Period  
250.00

**B. Ramona Beard**  
Full Name (Last, First, Middle Initial)  
Mailing Address 7716 W 84th Street Cir  
City Bloomington State MN Zip Code 55438-1067  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Homemaker Occupation Homemaker  
Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
02 / 27 / 2014  
**Transaction ID : C9594500**  
Amount of Each Receipt this Period  
250.00

**C. Brett Benson**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1807 Sargent Ave  
City Saint Paul State MN Zip Code 55105-1920  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Saint Jude Medical Occupation Director of Customer Service  
Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
02 / 02 / 2014  
**Transaction ID : C9557687**  
Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial) <b>A. Brett Benson</b>		Date of Receipt MM / DD / YYYY 02 / 12 / 2014 <b>Transaction ID : C9571350</b>
Mailing Address 1807 Sargent Ave		Amount of Each Receipt this Period 50.00
City Saint Paul	State MN	Zip Code 55105-1920
FEC ID number of contributing federal political committee. C	Name of Employer Saint Jude Medical	Occupation Director of Customer Service
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. David Berrien</b>		Date of Receipt MM / DD / YYYY 02 / 24 / 2014 <b>Transaction ID : C9590260</b>
Mailing Address 8848 Aldrich Ave S		Amount of Each Receipt this Period 375.00
City Bloomington	State MN	Zip Code 55420-2722
FEC ID number of contributing federal political committee. C	Name of Employer Seagate Technology	Occupation Electrical Engineer
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

Full Name (Last, First, Middle Initial) <b>C. Connie Black</b>		Date of Receipt MM / DD / YYYY 02 / 05 / 2014 <b>Transaction ID : C9564938</b>
Mailing Address 44 E Kent Rd		Amount of Each Receipt this Period 250.00
City Duluth	State MN	Zip Code 55812-1420
FEC ID number of contributing federal political committee. C	Name of Employer Montessori Center of Minnesota	Occupation Educator
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	675.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 11 OF 137  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

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

Mailing Address 3007 Knoll Ln NW

City State Zip Code  
 Rochester MN 55901-1492

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

Name of Employer Occupation  
 Self Attorney

Receipt For: 2014  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 01 / 2014

**Transaction ID : C9557606**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 5218 Grandview Ln

City State Zip Code  
 Edina MN 55436-2114

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

Name of Employer Occupation  
 Law Enforcement Labor Services Inc Business Agent

Receipt For: 2014  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 03 / 2014

**Transaction ID : C9560810**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 1201 Yale Pl Apt 2004

City State Zip Code  
 Minneapolis MN 55403-1961

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

Name of Employer Occupation  
 Retired Retired

Receipt For: 2014  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 07 / 2014

**Transaction ID : C9565889**

Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

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

Mailing Address 1211 Upton Ave N

City State Zip Code  
Minneapolis MN 55411-3539

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

Name of Employer Occupation  
State of Minnesota Legislator

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2014

**Transaction ID : C9595333**

Amount of Each Receipt this Period  
750.00

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

Mailing Address 3026 Salem Ave

City State Zip Code  
Saint Louis Park MN 55416-2111

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

Name of Employer Occupation  
Linder Dittberner Bryant and Winter Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2014

**Transaction ID : C9566096**

Amount of Each Receipt this Period  
750.00

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

Mailing Address 9402 Indian Boulevard Ct S

City State Zip Code  
Cottage Grove MN 55016-2277

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

Name of Employer Occupation  
Rock-Tenn Supervisor Shipping Department

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2014

**Transaction ID : C9557642**

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 137
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

**A. Carol Duff**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 728 W 4th St  
 City Red Wing State MN Zip Code 55066-2414  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 06 / 2014  
**Transaction ID : C9565414**  
 Amount of Each Receipt this Period  
 250.00

**B. William Eggers**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13829 170th St N  
 City Marine On Saint Croix State MN Zip Code 55047-9756  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 10 / 2014  
**Transaction ID : C9568368**  
 Amount of Each Receipt this Period  
 250.00

**C. Tommy Elton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 222 Hennepin Ave S Apt 331  
 City Minneapolis State MN Zip Code 55401-2479  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation Optometrist  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 18 / 2014  
**Transaction ID : C9575604**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

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

Mailing Address PO Box 204

City State Zip Code  
Marine On Saint Croix MN 55047-0204

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2014  
**Transaction ID : C9564774**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 80 Western Ave N Apt 402

City State Zip Code  
Saint Paul MN 55102-2968

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

Name of Employer Occupation  
Flaherty and Hood PA Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2014  
**Transaction ID : C9576033**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 1201 Yale Pl Apt 2102

City State Zip Code  
Minneapolis MN 55403-1961

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

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2014  
**Transaction ID : C9568335**

Amount of Each Receipt this Period  
2000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

**A. Arvonne Fraser**  
Full Name (Last, First, Middle Initial)  
Mailing Address 110 Bank St SE Apt 503

City Minneapolis	State MN	Zip Code 55414-3902
---------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
02	/	05	/	2014

**Transaction ID : C9565250**

Amount of Each Receipt this Period  
400.00

**B. Jane Freeman**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3701 Bryant Ave S Apt 802

City Minneapolis	State MN	Zip Code 55409-1091
---------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
02	/	07	/	2014

**Transaction ID : C9568337**

Amount of Each Receipt this Period  
2500.00

**C. Jacob Frey**  
Full Name (Last, First, Middle Initial)  
Mailing Address 316 E Hennepin Ave Ste 300

City Minneapolis	State MN	Zip Code 55414-1072
---------------------	-------------	------------------------

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

Name of Employer City of Minneapolis	Occupation City Council
---	----------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
02	/	10	/	2014

**Transaction ID : C9568901**

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3150.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 16 OF 137  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

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

Mailing Address 105 W Minnehaha Pkwy

City State Zip Code  
 Minneapolis MN 55419-1361

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

Name of Employer Occupation  
 Jungle Theater Executive Director

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 02 / 19 / 2014  
**Transaction ID : C9575965**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 5823 Vernon Ln

City State Zip Code  
 Edina MN 55436-2239

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

Name of Employer Occupation  
 Retired Retired

Receipt For: 2014  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 02 / 06 / 2014  
**Transaction ID : C9565273**

Amount of Each Receipt this Period  
 250.00

Full Name (Last, First, Middle Initial)  
**c. Madeline Gragg**

Mailing Address 383 Pelham Blvd

City State Zip Code  
 Saint Paul MN 55104-4937

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

Name of Employer Occupation  
 3M Company Marketing

Receipt For: 2014  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 02 / 28 / 2014  
**Transaction ID : C9595267**

Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 750.00

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 17 OF 137
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

**A. Justine Haselow**  
Full Name (Last, First, Middle Initial)  
Mailing Address 6408 Interlachen Blvd  
City Edina State MN Zip Code 55436-1002  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **10000.00**

Date of Receipt **02 / 11 / 2014**  
**Transaction ID : C9571427**  
Amount of Each Receipt this Period **10000.00**

**B. Robert Haselow**  
Full Name (Last, First, Middle Initial)  
Mailing Address 6408 Interlachen Blvd  
City Edina State MN Zip Code 55436-1002  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Minneapolis Radiation Oncology Occupation Physician  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **13000.00**

Date of Receipt **02 / 11 / 2014**  
**Transaction ID : C9571429**  
Amount of Each Receipt this Period **13000.00**  
See Line 22, Schedule B for resolution.

**C. Richard Hendrickson**  
Full Name (Last, First, Middle Initial)  
Mailing Address 50 Melbourne Ave SE  
City Minneapolis State MN Zip Code 55414-3514  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For: 2014  Primary  General  Other (specify)  Aggregate Year-to-Date **1300.00**

Date of Receipt **02 / 15 / 2014**  
**Transaction ID : C9573961**  
Amount of Each Receipt this Period **100.00**

**SUBTOTAL** of Receipts This Page (optional)..... **23100.00**  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

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

Mailing Address 516 4th Ave SE

City State Zip Code  
Minneapolis MN 55414-1612

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
330.00

Date of Receipt  
MM / DD / YYYY  
02 / 14 / 2014

**Transaction ID : C9571838**

Amount of Each Receipt this Period  
20.00

**B. J Michael Hirsch**  
Full Name (Last, First, Middle Initial)

Mailing Address 516 4th Ave SE

City State Zip Code  
Minneapolis MN 55414-1612

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
330.00

Date of Receipt  
MM / DD / YYYY  
02 / 28 / 2014

**Transaction ID : C9595160**

Amount of Each Receipt this Period  
20.00

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

Mailing Address 860 County Road I W

City State Zip Code  
Shoreview MN 55126-1317

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
02 / 03 / 2014

**Transaction ID : C9560778**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 290.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 137
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

**A. John Hoffman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8224 109th PI N  
 City Champlin State MN Zip Code 55316-3717  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Midway Training Occupation Marketing and Sales  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 18 / 2014  
**Transaction ID : C9575606**  
 Amount of Each Receipt this Period  
 250.00

**B. Diane Ista**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4345 47th Ave S  
 City Fargo State ND Zip Code 58104-4248  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation Farm Management  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 21 / 2014  
**Transaction ID : C9577205**  
 Amount of Each Receipt this Period  
 250.00

**C. Mary Jones**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1946 Old Valley Rd SW  
 City Rochester State MN Zip Code 55902-8815  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Mayo Clinic Occupation Physician  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 04 / 2014  
**Transaction ID : C9562060**  
 Amount of Each Receipt this Period  
 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 20 OF 137
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

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

Mailing Address 1730 Graham Ave Apt 245

City Saint Paul	State MN	Zip Code 55116-3268
--------------------	-------------	------------------------

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

Name of Employer Department of Human Services	Occupation Task Force Liaison
--	----------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	05	/	2014

**Transaction ID : C9564857**

Amount of Each Receipt this Period  

250.00
--------

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

Mailing Address 4223 Lyndale Ave S

City Minneapolis	State MN	Zip Code 55409-1813
---------------------	-------------	------------------------

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

Name of Employer Richards Layton and Finger	Occupation Attorney
--	------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	24	/	2014

**Transaction ID : C9590263**

Amount of Each Receipt this Period  

250.00
--------

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

Mailing Address 14605 34th Ave N

City Plymouth	State MN	Zip Code 55447-5229
------------------	-------------	------------------------

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

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

Receipt For: 2014  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	11	/	2014

**Transaction ID : C9569199**

Amount of Each Receipt this Period  

250.00
--------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>750.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

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

Mailing Address 16354 69th PI N

City State Zip Code  
Maple Grove MN 55311-2962

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

Name of Employer Occupation  
Gage Account Supervisor

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2014

**Transaction ID : C9565794**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 21950 Csah 4

City State Zip Code  
Dassel MN 55325-3641

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

Name of Employer Occupation  
Self Lobbyist

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

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

**Transaction ID : C9568406**

Amount of Each Receipt this Period  
375.00

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

Mailing Address 21950 Csah 4

City State Zip Code  
Dassel MN 55325-3641

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

Name of Employer Occupation  
Self Lobbyist

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2014

**Transaction ID : C9571500**

Amount of Each Receipt this Period  
125.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

**A. Ron Latz**  
Full Name (Last, First, Middle Initial)  
Mailing Address 8333 W Franklin Ave  
City Saint Louis Park State MN Zip Code 55426-1914  
FEC ID number of contributing federal political committee. **C**  
Name of Employer State of Minnesota Occupation State Senator  
Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2014  
**Transaction ID : C9565281**  
Amount of Each Receipt this Period  
250.00

**B. Timothy Laurie**  
Full Name (Last, First, Middle Initial)  
Mailing Address 8935 Pine Bluff Ct  
City Eden Prairie State MN Zip Code 55347-1726  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Starkey Occupation Web Developer  
Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2014  
**Transaction ID : C9565005**  
Amount of Each Receipt this Period  
250.00

**C. Jerome Lee**  
Full Name (Last, First, Middle Initial)  
Mailing Address 9080 1st St W  
City Watson State MN Zip Code 56295-1129  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Farmer  
Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2014  
**Transaction ID : C9564801**  
Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

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

Mailing Address 200 Peninsula Rd

City State Zip Code  
Medicine Lake MN 55441-4114

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

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

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

**Transaction ID : C9568391**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 527 Marquette Ave Ste 2100

City State Zip Code  
Minneapolis MN 55402-1308

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

Name of Employer Occupation  
Leventhal PLLC Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

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

**Transaction ID : C9568173**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 292 Ryan Ave

City State Zip Code  
Saint Paul MN 55102-2551

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

Name of Employer Occupation  
Planned Parenthood of MN VP of External Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2014

**Transaction ID : C9590261**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 137
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial) <b>A. John Lieske</b>		Date of Receipt MM / DD / YYYY 02 / 06 / 2014 <b>Transaction ID : C9565283</b>
Mailing Address 1910 S Payne St		Amount of Each Receipt this Period 200.00
City New Ulm	State MN	Zip Code 56073-3821
FEC ID number of contributing federal political committee. C	Name of Employer Mayo Clinic	Occupation MD
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. Ken Martin</b>		Date of Receipt MM / DD / YYYY 02 / 12 / 2014 <b>Transaction ID : C9570663</b>
Mailing Address 4104 Oakbrooke Curv		Amount of Each Receipt this Period 100.00
City Eagan	State MN	Zip Code 55122-4217
FEC ID number of contributing federal political committee. C	Name of Employer Minnesota DFL Party	Occupation Chair
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>C. Jeanne Massey</b>		Date of Receipt MM / DD / YYYY 02 / 04 / 2014 <b>Transaction ID : C9561786</b>
Mailing Address 3606 Harriet Ave		Amount of Each Receipt this Period 1250.00
City Minneapolis	State MN	Zip Code 55409-1121
FEC ID number of contributing federal political committee. C	Name of Employer FairVote MN	Occupation Consultant
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1550.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

**A. Martin McGraw**  
Full Name (Last, First, Middle Initial)  
Mailing Address 24114 726th Ave  
City Dassel State MN Zip Code 55325-3497  
FEC ID number of contributing federal political committee. **C**  
Name of Employer AME Community Services Inc Occupation CEO  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2014  
**Transaction ID : C9568390**  
Amount of Each Receipt this Period  
250.00

**B. Mary Ann McGuire**  
Full Name (Last, First, Middle Initial)  
Mailing Address 5017 Sheridan Ave S  
City Minneapolis State MN Zip Code 55410-2212  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For: 2014  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2014  
**Transaction ID : C9565740**  
Amount of Each Receipt this Period  
375.00

**C. Mary Ann McGuire**  
Full Name (Last, First, Middle Initial)  
Mailing Address 5017 Sheridan Ave S  
City Minneapolis State MN Zip Code 55410-2212  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For: 2014  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2014  
**Transaction ID : C9575817**  
Amount of Each Receipt this Period  
125.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 750.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 26 OF 137
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

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

Mailing Address 2824 38th Ave S

City Minneapolis	State MN	Zip Code 55406-1722
---------------------	-------------	------------------------

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

Name of Employer Great Plains Institute	Occupation Program Director
--	--------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
02	/	08	/	2014

**Transaction ID : C9565941**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 5117 Ridge Rd

City Minneapolis	State MN	Zip Code 55436-1015
---------------------	-------------	------------------------

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

Name of Employer Fredrikson and Byron	Occupation Attorney
--	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
02	/	11	/	2014

**Transaction ID : C9571425**

Amount of Each Receipt this Period  
3500.00

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

Mailing Address 5117 Ridge Rd

City Minneapolis	State MN	Zip Code 55436-1015
---------------------	-------------	------------------------

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

Name of Employer Self	Occupation Realtor
--------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
02	/	11	/	2014

**Transaction ID : C9571424**

Amount of Each Receipt this Period  
3500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

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

Mailing Address 1890 Furness St

City State Zip Code  
Maplewood MN 55109-4831

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

Name of Employer Occupation  
3M IT Manager

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
02 / 02 / 2014

**Transaction ID : C9557690**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 1320 Riverside Ln Apt 303

City State Zip Code  
Mendota Heights MN 55118-1755

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
425.00

Date of Receipt  
MM / DD / YYYY  
02 / 05 / 2014

**Transaction ID : C9564876**

Amount of Each Receipt this Period  
375.00

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

Mailing Address 1090 Saint Clair Ave

City State Zip Code  
Saint Paul MN 55105-3266

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

Name of Employer Occupation  
MN Coalition Against Sexual Assault Communications Specialist

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
02 / 07 / 2014

**Transaction ID : C9565446**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1125.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 28 OF 137
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

**A. Darby Nelson**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1013 Vera St N  
City Champlin State MN Zip Code 55316-1527  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
02 / 25 / 2014  
**Transaction ID : C9591959**  
Amount of Each Receipt this Period  
250.00

**B. Dick Nelson**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 94  
18280 Robinson St.  
City Dayton State MN Zip Code 55327-0094  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Elavon, Inc. Occupation Computer Programmer  
Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
02 / 01 / 2014  
**Transaction ID : C9557614**  
Amount of Each Receipt this Period  
250.00

**C. Richard Newmark**  
Full Name (Last, First, Middle Initial)  
Mailing Address 810 Woodduck Dr  
City Woodbury State MN Zip Code 55125-5101  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
02 / 10 / 2014  
**Transaction ID : C9568407**  
Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 29 OF 137  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)  
**A. Lowell Noteboom**  
 Mailing Address 11704 Live Oak Dr  
 City State Zip Code  
 Minnetonka MN 55305-2592  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Stinson Leonard Street Attorney  
 Receipt For: 2014  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 16 / 2014  
**Transaction ID : C9574036**  
 Amount of Each Receipt this Period  
 500.00

Full Name (Last, First, Middle Initial)  
**B. Mary O'Day**  
 Mailing Address 3930 Glenwood St  
 City State Zip Code  
 Duluth MN 55804-1403  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Essentia Health Physician  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 12 / 2014  
**Transaction ID : C9571370**  
 Amount of Each Receipt this Period  
 500.00

Full Name (Last, First, Middle Initial)  
**C. Mark Parrott**  
 Mailing Address 25477 Debs Rd NW  
 City State Zip Code  
 Shevlin MN 56676-4558  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Retired Retired  
 Receipt For: 2014  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 24 / 2014  
**Transaction ID : C9589374**  
 Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1500.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 30 OF 137  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

**A. Doris Paulson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4112 Garfield Ave  
 City State Zip Code  
 Minneapolis MN 55409-1437  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Manpower Temporary Temp Worker  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 03 / 2014  
**Transaction ID : C9560898**  
 Amount of Each Receipt this Period  
 250.00

**B. Alan Perish**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 26092 County 14  
 City State Zip Code  
 Browerville MN 56438-4981  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Self Farmer  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 27 / 2014  
**Transaction ID : C9594415**  
 Amount of Each Receipt this Period  
 1250.00

**C. Rolf Peters**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18216 Jamaica Path  
 City State Zip Code  
 Lakeville MN 55044-9616  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 AgMotion Inc Manager  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2014  
**Transaction ID : C9595043**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1750.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

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

Mailing Address 5034 34th Ave S

City Minneapolis State MN Zip Code 55417-1559

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

Name of Employer Department of Homeland Security Occupation Admin

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt 02 / 27 / 2014  
**Transaction ID : C9594783**

Amount of Each Receipt this Period 375.00

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

Mailing Address 505 Broadway N Ste 204

City Fargo State ND Zip Code 58102-4416

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

Name of Employer Home Instead Senior Care Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 04 / 2014  
**Transaction ID : C9562845**

Amount of Each Receipt this Period 250.00

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

Mailing Address 14180 Stonegate Ln

City Minnetonka State MN Zip Code 55345-3839

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

Name of Employer Self Occupation Day Care

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 09 / 2014  
**Transaction ID : C9566093**

Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 875.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

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

Mailing Address 1792 Hillcrest Ave

City Saint Paul State MN Zip Code 55116-2151

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

Name of Employer Health Partners Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
02 / 09 / 2014  
**Transaction ID : C9566103**

Amount of Each Receipt this Period  
125.00

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

Mailing Address 4817 Glenwood Ave

City Golden Valley State MN Zip Code 55422-5114

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

Name of Employer The Reardon Group Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
02 / 19 / 2014  
**Transaction ID : C9576101**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 2020 Essex Rd

City Minnetonka State MN Zip Code 55305-2247

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
02 / 19 / 2014  
**Transaction ID : C9575998**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 625.00

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

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

Mailing Address 16527 Locust Hills Ter

City Wayzata State MN Zip Code 55391-1936

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

Name of Employer AM 950 Occupation Founder

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt  
02 / 11 / 2014  
**Transaction ID : C9569278**

Amount of Each Receipt this Period  
1250.00

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

Mailing Address 249 6th St NE

City Minneapolis State MN Zip Code 55413-4202

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
02 / 04 / 2014  
**Transaction ID : C9562074**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 100 2nd St SE

City Minneapolis State MN Zip Code 55414-2131

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

Name of Employer Faegre Baker Daniels LLP Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
02 / 07 / 2014  
**Transaction ID : C9565691**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 137
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

**A. Drew Rosielle**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5059 Washburn Ave S  
 City Minneapolis State MN Zip Code 55410-2225  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Fairview Health Services Occupation Physician  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 26 / 2014  
**Transaction ID : C9594083**  
 Amount of Each Receipt this Period  
 1000.00

**B. Lawrence Sandoval**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9234 Hillsboro Way  
 City Savage State MN Zip Code 55378-2109  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CWA Occupation Staff Representative  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 01 / 2014  
**Transaction ID : C9557630**  
 Amount of Each Receipt this Period  
 250.00

**C. Lawrence Sandoval**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9234 Hillsboro Way  
 City Savage State MN Zip Code 55378-2109  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CWA Occupation Staff Representative  
 Receipt For: 2012  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 28 / 2014  
**Transaction ID : C9595158**  
 Amount of Each Receipt this Period  
 5.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1255.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 35 OF 137
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

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

Mailing Address 14518 Rocksborough Rd

City State Zip Code  
Minnetonka MN 55345-3714

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

Name of Employer Occupation  
Schechter Dokken Kanter Andrews and Se CPA

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
02 / 07 / 2014

**Transaction ID : C9568332**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 657 Heinel Dr

City State Zip Code  
Roseville MN 55113-2101

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

Name of Employer Occupation  
U of M Psychologist

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
02 / 05 / 2014

**Transaction ID : C9564849**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 312 E Lake Geneva Rd NE

City State Zip Code  
Alexandria MN 56308-8906

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

Name of Employer Occupation  
Alexandria Technical and Community Col Instructor

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
02 / 05 / 2014

**Transaction ID : C9564980**

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial) <b>A. Karl Sonneman</b>		Date of Receipt MM / DD / YYYY 02 / 14 / 2014 <b>Transaction ID : C9571867</b>
Mailing Address 54 Lois Ln		Amount of Each Receipt this Period 375.00
City Winona	State MN	Zip Code 55987-4147
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

Full Name (Last, First, Middle Initial) <b>B. Sarah Stoesz</b>		Date of Receipt MM / DD / YYYY 02 / 19 / 2014 <b>Transaction ID : C9576094</b>
Mailing Address 1901 E River Pkwy		Amount of Each Receipt this Period 500.00
City Minneapolis	State MN	Zip Code 55414-3675
FEC ID number of contributing federal political committee. C		
Name of Employer Planned Parenthood MN, ND, SD	Occupation President	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>c. Marty Strub</b>		Date of Receipt MM / DD / YYYY 02 / 03 / 2014 <b>Transaction ID : C9561234</b>
Mailing Address 2243 Cardinal Pl		Amount of Each Receipt this Period 500.00
City Saint Paul	State MN	Zip Code 55119-5009
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1375.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

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

Mailing Address 549 Otis Ave

City Saint Paul State MN Zip Code 55104-4931

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 17 / 2014

**Transaction ID : C9574149**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 14400 10th Ave N

City Plymouth State MN Zip Code 55447-4473

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

Name of Employer Self Occupation Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 11 / 2014

**Transaction ID : C9571423**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 2522 Thomas Ave S

City Minneapolis State MN Zip Code 55405-2344

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

Name of Employer Tennesen Law PLC Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 06 / 2014

**Transaction ID : C9565344**

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 38 OF 137
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial) <b>A. Brian Tibaldo</b>		Date of Receipt MM / DD / YYYY 02 / 08 / 2014 <b>Transaction ID : C9565952</b>
Mailing Address 6316 Barrie Rd Apt 2B		Amount of Each Receipt this Period 250.00
City Edina	State MN	Zip Code 55435-2243
FEC ID number of contributing federal political committee.	C	
Name of Employer Coldwell Banker Burnet	Occupation Director HRC	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. Darren Tobolt</b>		Date of Receipt MM / DD / YYYY 02 / 05 / 2014 <b>Transaction ID : C9564907</b>
Mailing Address 212 Colborne St		Amount of Each Receipt this Period 250.00
City Saint Paul	State MN	Zip Code 55102-3139
FEC ID number of contributing federal political committee.	C	
Name of Employer Ramsey County	Occupation Administration	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. Rosa Tock</b>		Date of Receipt MM / DD / YYYY 02 / 15 / 2014 <b>Transaction ID : C9573967</b>
Mailing Address 568 State St Apt B		Amount of Each Receipt this Period 250.00
City Saint Paul	State MN	Zip Code 55107-3094
FEC ID number of contributing federal political committee.	C	
Name of Employer University of Minnesota	Occupation Program Coordinator	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 137
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

**A. Traci Toomey**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2630 Stinson Blvd  
 City Minneapolis State MN Zip Code 55418-3158  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer University of Minnesota Occupation Professor  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 06 / 2014  
**Transaction ID : C9565332**  
 Amount of Each Receipt this Period  
 250.00

**B. George Vogel**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1012 Kingman Ave  
 City Red Wing State MN Zip Code 55066-3177  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation Attorney  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 10 / 2014  
**Transaction ID : C9568167**  
 Amount of Each Receipt this Period  
 500.00

**C. JoAnn Ward**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7817 Somerset Cir  
 City Woodbury State MN Zip Code 55125-2334  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State of MN Occupation Representative  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 05 / 2014  
**Transaction ID : C9564904**  
 Amount of Each Receipt this Period  
 125.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	875.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

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

Mailing Address 7817 Somerset Cir

City Woodbury State MN Zip Code 55125-2334

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

Name of Employer Occupation  
State of MN Representative

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
02 / 13 / 2014  
**Transaction ID : C9571588**

Amount of Each Receipt this Period  
125.00

**B. Jo Ellen Waterman**  
Full Name (Last, First, Middle Initial)

Mailing Address 16364 84th Ave N

City Maple Grove State MN Zip Code 55311-1822

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
02 / 06 / 2014  
**Transaction ID : C9565279**

Amount of Each Receipt this Period  
250.00

**C. Jo Ellen Waterman**  
Full Name (Last, First, Middle Initial)

Mailing Address 16364 84th Ave N

City Maple Grove State MN Zip Code 55311-1822

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
02 / 06 / 2014  
**Transaction ID : C9565280**

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	425.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 41 OF 137
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

**A. John Wells**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3680 Knoll Ridge Dr  
City Eagan State MN Zip Code 55122-1130  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Consultant  
Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 4375.00

Date of Receipt  
MM / DD / YYYY  
02 / 04 / 2014  
**Transaction ID : C9561905**  
Amount of Each Receipt this Period  
1000.00

**B. John Wells**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3680 Knoll Ridge Dr  
City Eagan State MN Zip Code 55122-1130  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Consultant  
Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 4375.00

Date of Receipt  
MM / DD / YYYY  
02 / 10 / 2014  
**Transaction ID : C9568943**  
Amount of Each Receipt this Period  
250.00

**C. Larry Wicks**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1756 Interlachen Bay  
City Woodbury State MN Zip Code 55125-8695  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
02 / 14 / 2014  
**Transaction ID : C9574522**  
Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

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

Mailing Address 4104 Oakbrooke Curv

City Eagan State MN Zip Code 55122-4217

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

Name of Employer Minnesota DFL Party Occupation Chair

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 04 / 2014

**Transaction ID : C9629861A**

Amount of Each Receipt this Period  
 125.00

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 492.50

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 14 / 2014

**Transaction ID : C9629861AB**

Amount of Each Receipt this Period  
 125.00

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.00
<b>TOTAL</b> This Period (last page this line number only).....▶	69070.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 43 OF 137	
(check only one)			
<input type="checkbox"/> 11a	<input checked="" type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

**A. Democratic National Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 430 S Capitol St SE

City Washington State DC Zip Code 20003-4024

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
16440.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 18 / 2014

**Transaction ID : C9629846**

Amount of Each Receipt this Period  
 3220.00

\* In-Kind: Voter File Access

**B.**

Full Name (Last, First, Middle Initial)  
Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**C.**

Full Name (Last, First, Middle Initial)  
Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3220.00
<b>TOTAL</b> This Period (last page this line number only).....▶	3220.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 44 OF 137
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)  
**A. Committee on Letter Carriers Political Education**

Mailing Address 100 Indiana Ave NW

City Washington State DC Zip Code 20001-2143

FEC ID number of contributing federal political committee. **C** C00023580

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 02 / 03 / 2014

**Transaction ID : C9560899**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**B. FOLLOW THE NORTH STAR FUND**

Mailing Address 316 E Hennepin Ave Ste 201

City Minneapolis State MN Zip Code 55414-1072

FEC ID number of contributing federal political committee. **C** C00431874

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 02 / 25 / 2014

**Transaction ID : C9592885**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**C. Peterson for US Congress**

Mailing Address 26192 FLOYD LAKE POINT ROAD

City DETROIT LAKES State MN Zip Code 56501

FEC ID number of contributing federal political committee. **C** C00253187

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5737.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 02 / 19 / 2014

**Transaction ID : C9576031**

Amount of Each Receipt this Period  
1250.00

Excess Funds Transfer

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	11250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 45 OF 137  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

**A.** Full Name (Last, First, Middle Initial)  
**Walz (Tim), For Congress**

Mailing Address **PO Box 938**

City **Mankato** State **MN** Zip Code **56002-0938**

FEC ID number of contributing federal political committee. **C C00409409**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1278.62**

Date of Receipt  
**02 / 10 / 2014**

**Transaction ID : C9568392**

Amount of Each Receipt this Period  
**1250.00**

Excess Funds Transfer

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1250.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>12500.00</b>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 46 OF 137
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)  
**A. Democratic Congressional Campaign Committee**

Mailing Address 430 S Capitol St SE Fl 2

City Washington State DC Zip Code 20003-4024

FEC ID number of contributing federal political committee. **C C00000935**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 06 / 2014**

**Transaction ID : C9624810**

Amount of Each Receipt this Period  
**500.00**

Full Name (Last, First, Middle Initial)  
**B. Democratic National Committee**

Mailing Address 430 S Capitol St SE

City Washington State DC Zip Code 20003-4024

FEC ID number of contributing federal political committee. **C C00010603**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **16440.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 21 / 2014**

**Transaction ID : C9589276**

Amount of Each Receipt this Period  
**5000.00**

Full Name (Last, First, Middle Initial)  
**c. Minnesota Senate Victory 2014**

Mailing Address PO Box 583144

City Minneapolis State MN Zip Code 55458

FEC ID number of contributing federal political committee. **C C00519884**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **17000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 21 / 2014**

**Transaction ID : C9589393**

Amount of Each Receipt this Period  
**7500.00**

Minnesota Senate Victory 2014

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>13000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 47 OF 137
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

**A. Nazie Eftekhari**  
Full Name (Last, First, Middle Initial)  
Mailing Address 20 Merilane Ave  
City Minneapolis State MN Zip Code 55436-1336  
FEC ID number of contributing federal political committee. **C**  
Name of Employer HealthEZ Occupation CEO  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 550.00

Date of Receipt 02 / 13 / 2014  
**Transaction ID : C9589412**  
Amount of Each Receipt this Period 550.00  
**[MEMO ITEM]**  
\* Minnesota Senate Victory 2014

**B. Lorne Michaels**  
Full Name (Last, First, Middle Initial)  
Mailing Address 88 Central Park W  
City New York State NY Zip Code 10023  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NBC/Broadway Video Occupation Writer/Producer  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 13 / 2014  
**Transaction ID : C9589397**  
Amount of Each Receipt this Period 5000.00  
**[MEMO ITEM]**  
\* Minnesota Senate Victory 2014

**c. Charles Nauen**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2109 Doswell Ave  
City Saint Paul State MN Zip Code 55108-1731  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Lockridge Grindal Nauen Occupation Attorney  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 01 / 07 / 2014  
**Transaction ID : C9589398**  
Amount of Each Receipt this Period 1250.00  
**[MEMO ITEM]**  
\* Minnesota Senate Victory 2014

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 48 OF 137
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

**A.** Full Name (Last, First, Middle Initial)  
**Pati Jo Pofahl**

Mailing Address 2109 Doswell Ave

City Saint Paul State MN Zip Code 55108-1731

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

Name of Employer Self Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1250.00

Date of Receipt  
 01 / 27 / 2014  
**Transaction ID : C9589399**

Amount of Each Receipt this Period  
1250.00

**[MEMO ITEM]**  
\* Minnesota Senate Victory 2014

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	13000.00



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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. ACTBLUE**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement  
Actblue Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	4		2	0	1	4

**Transaction ID : D521326**

Amount of Each Disbursement this Period

1	8	.	3	4
---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. ACTBLUE**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement  
Actblue Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	4		2	0	1	4

**Transaction ID : D521327**

Amount of Each Disbursement this Period

1	.	1	.	9
---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. Adam Carr**

Mailing Address 19834 Jaguar Ave

City Lakeville State MN Zip Code 55044

Purpose of Disbursement  
Software Training

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	4		2	0	1	4

**Transaction ID : D520683**

Amount of Each Disbursement this Period

8	3	5	.	0	0
---	---	---	---	---	---

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

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

8	5	4	.	5	3
---	---	---	---	---	---

8	5	4	.	5	3
---	---	---	---	---	---

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21B

Transaction ID : D520683

2/3/2014, Noble Systems, 4151 Ashford Dunwoody, Atlanta, GA 30319, Software Training, \$835.00

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Adam Carr**

Mailing Address 19834 Jaguar Ave

City Lakeville State MN Zip Code 55044

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 07 / 2014

**Transaction ID : D520247**

Amount of Each Disbursement this Period

937.85

Full Name (Last, First, Middle Initial)

**B. Adam Carr**

Mailing Address 19834 Jaguar Ave

City Lakeville State MN Zip Code 55044

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 21 / 2014

**Transaction ID : D520597**

Amount of Each Disbursement this Period

937.86

Full Name (Last, First, Middle Initial)

**C. Georgia Ales Lynch**

Mailing Address 1320 Smith Ave S

City Saint Paul State MN Zip Code 55118

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 21 / 2014

**Transaction ID : D520595**

Amount of Each Disbursement this Period

158.08

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

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

2033.79

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Georgia Ales Lynch**

Mailing Address 1320 Smith Ave S

City State Zip Code  
Saint Paul MN 55118

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 07 / 2014

**Transaction ID : D520244**

Amount of Each Disbursement this Period

23.99

Full Name (Last, First, Middle Initial)

**B. AXA Equitable**

Mailing Address PO Box 13463

City State Zip Code  
Newark NJ 07188

Purpose of Disbursement  
Retirement Funds

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 10 / 2014

**Transaction ID : D520646**

Amount of Each Disbursement this Period

2085.58

Full Name (Last, First, Middle Initial)

**C. Andrew Beck**

Mailing Address 487 Ashland Ave

City State Zip Code  
Saint Paul MN 55104

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 07 / 2014

**Transaction ID : D520269**

Amount of Each Disbursement this Period

589.31

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

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

2698.88

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Andrew Beck**

Mailing Address 487 Ashland Ave

City State Zip Code  
Saint Paul MN 55104

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 21 / 2014

**Transaction ID : D520575**

Amount of Each Disbursement this Period

619.31

Full Name (Last, First, Middle Initial)

**B. Reginald Birts**

Mailing Address 395 Luella St N Apt 314

City State Zip Code  
Saint Paul MN 55119-4324

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 21 / 2014

**Transaction ID : D520596**

Amount of Each Disbursement this Period

403.62

Full Name (Last, First, Middle Initial)

**C. Reginald Birts**

Mailing Address 395 Luella St N Apt 314

City State Zip Code  
Saint Paul MN 55119-4324

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 07 / 2014

**Transaction ID : D520245**

Amount of Each Disbursement this Period

201.17

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

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

1224.10

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Sarah Black**

Mailing Address 9054 Prestwick Cir N

City Plymouth State MN Zip Code 55443-3952

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 07 / 2014

**Transaction ID : D520280**

Amount of Each Disbursement this Period

1699.44

Full Name (Last, First, Middle Initial)

**B. Sarah Black**

Mailing Address 9054 Prestwick Cir N

City Plymouth State MN Zip Code 55443-3952

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 21 / 2014

**Transaction ID : D520580**

Amount of Each Disbursement this Period

1699.44

Full Name (Last, First, Middle Initial)

**C. Elise Convy**

Mailing Address 11319 Ewing Cir S

City Bloomington State MN Zip Code 55431

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 21 / 2014

**Transaction ID : D520576**

Amount of Each Disbursement this Period

1381.01

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

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

4779.89

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Elise Convy**

Mailing Address 11319 Ewing Cir S

City State Zip Code  
Bloomington MN 55431

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 07 / 2014

**Transaction ID : D520270**

Amount of Each Disbursement this Period

1381.03

Full Name (Last, First, Middle Initial)

**B. Curtis Shelmon**

Mailing Address 554 Central Ave W #909

City State Zip Code  
Saint Paul MN 55103

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 07 / 2014

**Transaction ID : D520261**

Amount of Each Disbursement this Period

520.62

Full Name (Last, First, Middle Initial)

**C. Curtis Shelmon**

Mailing Address 554 Central Ave W #909

City State Zip Code  
Saint Paul MN 55103

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 21 / 2014

**Transaction ID : D520614**

Amount of Each Disbursement this Period

707.47

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

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

2609.12

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Corey Day**

Mailing Address 3518 Nicollet Ave #203

City Minneapolis State MN Zip Code 55408-4575

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 21 / 2014

**Transaction ID : D520577**

Amount of Each Disbursement this Period

2276.77

Full Name (Last, First, Middle Initial)

**B. Corey Day**

Mailing Address 3518 Nicollet Ave #203

City Minneapolis State MN Zip Code 55408-4575

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 07 / 2014

**Transaction ID : D520271**

Amount of Each Disbursement this Period

2228.78

Full Name (Last, First, Middle Initial)

**C. Democratic National Committee**

Mailing Address 430 S Capitol St SE

City Washington State DC Zip Code 20003-4024

Purpose of Disbursement  
Voter File Access

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 18 / 2014

**Transaction ID : D521325**

Amount of Each Disbursement this Period

3220.00

\* In-Kind Received

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

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

7725.55



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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. EFTPS Fed Tax Payment**

Mailing Address Federal Withholding Taxes

City Iowa City State IA Zip Code 52244

Purpose of Disbursement  
Federal Withholding Tax

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 28 / 2014

**Transaction ID : D521095**

Amount of Each Disbursement this Period

761.20

Full Name (Last, First, Middle Initial)

**B. EFTPS Fed Tax Payment**

Mailing Address Federal Withholding Taxes

City Iowa City State IA Zip Code 52244

Purpose of Disbursement  
Federal Withholding Tax

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 24 / 2014

**Transaction ID : D520649**

Amount of Each Disbursement this Period

6324.58

Full Name (Last, First, Middle Initial)

**C. EFTPS Fed Tax Payment**

Mailing Address Federal Withholding Taxes

City Iowa City State IA Zip Code 52244

Purpose of Disbursement  
Federal Withholding Tax

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 05 / 2014

**Transaction ID : D520286**

Amount of Each Disbursement this Period

13.14

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

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

7098.92

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. EFTPS Fed Tax Payment**

Mailing Address Federal Withholding Taxes

City Iowa City State IA Zip Code 52244

Purpose of Disbursement  
Federal Withholding Tax

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 07 / 2014

**Transaction ID : D520641**

Amount of Each Disbursement this Period

5771.26

Full Name (Last, First, Middle Initial)

**B. Berrett Gall**

Mailing Address 150 Portland Ave S  
Unit 305

City Minneapolis State MN Zip Code 55401

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 21 / 2014

**Transaction ID : D520578**

Amount of Each Disbursement this Period

1946.01

Full Name (Last, First, Middle Initial)

**C. Berrett Gall**

Mailing Address 150 Portland Ave S  
Unit 305

City Minneapolis State MN Zip Code 55401

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 07 / 2014

**Transaction ID : D520272**

Amount of Each Disbursement this Period

1946.02

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

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

9663.29

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. HealthPartners**

Mailing Address 8170 33rd Ave S

City Bloomington State MN Zip Code 55425-4516

Purpose of Disbursement  
Health Insurance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		25		2014

**Transaction ID : D521090**

Amount of Each Disbursement this Period

2494.70
---------

Full Name (Last, First, Middle Initial)

**B. James Parsons Jr**

Mailing Address 5148 10th Ave S

City Minneapolis State MN Zip Code 55417-1724

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		07		2014

**Transaction ID : D520257**

Amount of Each Disbursement this Period

111.39
--------

Full Name (Last, First, Middle Initial)

**C. James Parsons Jr**

Mailing Address 5148 10th Ave S

City Minneapolis State MN Zip Code 55417-1724

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		21		2014

**Transaction ID : D520610**

Amount of Each Disbursement this Period

333.93
--------

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

2940.02
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**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Estelle Jones**

Mailing Address 1600 Case Ave

City State Zip Code  
Saint Paul MN 55106

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2014

**Transaction ID : D520603**

Amount of Each Disbursement this Period

204.46

Full Name (Last, First, Middle Initial)

**B. Estelle Jones**

Mailing Address 1600 Case Ave

City State Zip Code  
Saint Paul MN 55106

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2014

**Transaction ID : D520253**

Amount of Each Disbursement this Period

167.90

Full Name (Last, First, Middle Initial)

**C. Terry Kelley**

Mailing Address 301 Shelard Pkwy Apt 321

City State Zip Code  
Saint Louis Park MN 55426-1031

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2014

**Transaction ID : D520254**

Amount of Each Disbursement this Period

87.92

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

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

460.28

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Terry Kelley**

Mailing Address 301 Shelard Pkwy Apt 321

City State Zip Code  
Saint Louis Park MN 55426-1031

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	21	/	2014

**Transaction ID : D520604**

Amount of Each Disbursement this Period

373.83
--------

Full Name (Last, First, Middle Initial)

**B. Layton Smith**

Mailing Address 2732 2nd Ave S

City State Zip Code  
Minneapolis MN 55406

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	21	/	2014

**Transaction ID : D520615**

Amount of Each Disbursement this Period

262.95
--------

Full Name (Last, First, Middle Initial)

**C. Layton Smith**

Mailing Address 2732 2nd Ave S

City State Zip Code  
Minneapolis MN 55406

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	07	/	2014

**Transaction ID : D520262**

Amount of Each Disbursement this Period

220.53
--------

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

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

857.31
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Leah Manney**

Mailing Address 11160 County 1 Blvd

City State Zip Code  
Saint Paul MN 55109

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	07	/	2014

**Transaction ID : D520282**

Amount of Each Disbursement this Period

109.16
--------

Full Name (Last, First, Middle Initial)

**B. Leah Manney**

Mailing Address 11160 County 1 Blvd

City State Zip Code  
Saint Paul MN 55109

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	21	/	2014

**Transaction ID : D520609**

Amount of Each Disbursement this Period

147.84
--------

Full Name (Last, First, Middle Initial)

**C. Matthew Leavitt**

Mailing Address 2525 Harriet Ave S #319

City State Zip Code  
Minneapolis MN 55405

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	21	/	2014

**Transaction ID : D520606**

Amount of Each Disbursement this Period

331.72
--------

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

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

588.72
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Matthew Leavitt**

Mailing Address 2525 Harriet Ave S #319

City Minneapolis State MN Zip Code 55405

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 07 / 2014

**Transaction ID : D520255**

Amount of Each Disbursement this Period

209.83

Full Name (Last, First, Middle Initial)

**B. Nathaniel Leonard**

Mailing Address 1112 16th Ave SE

City Minneapolis State MN Zip Code 55414

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 07 / 2014

**Transaction ID : D520256**

Amount of Each Disbursement this Period

258.89

Full Name (Last, First, Middle Initial)

**C. Nathaniel Leonard**

Mailing Address 1112 16th Ave SE

City Minneapolis State MN Zip Code 55414

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 21 / 2014

**Transaction ID : D520607**

Amount of Each Disbursement this Period

498.20

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

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

966.92

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Ken Martin**

Mailing Address 4104 Oakbrooke Curv

City Eagan State MN Zip Code 55122-4217

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	21	/	2014

**Transaction ID : D520579**

Amount of Each Disbursement this Period

2861.47
---------

Full Name (Last, First, Middle Initial)

**B. Ken Martin**

Mailing Address 4104 Oakbrooke Curv

City Eagan State MN Zip Code 55122-4217

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	07	/	2014

**Transaction ID : D520273**

Amount of Each Disbursement this Period

2861.46
---------

Full Name (Last, First, Middle Initial)

**C. Mazyar Hosseini-Dehkordi**

Mailing Address 9525 Virginia Ave S

City Minneapolis State MN Zip Code 55438

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	07	/	2014

**Transaction ID : D520251**

Amount of Each Disbursement this Period

232.16
--------

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

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

5955.09
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Mazyar Hosseini-Dehkordi**

Mailing Address 9525 Virginia Ave S

City Minneapolis State MN Zip Code 55438

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	21	/	2014

**Transaction ID : D520601**

Amount of Each Disbursement this Period

324.89
--------

Full Name (Last, First, Middle Initial)

**B. Minnesota Child Support Payment Center**

Mailing Address PO Box 64306

City Saint Paul State MN Zip Code 55164-0306

Purpose of Disbursement  
Wage Levy

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	24	/	2014

**Transaction ID : D520621**

Amount of Each Disbursement this Period

36.00
-------

Full Name (Last, First, Middle Initial)

**C. Minnesota Child Support Payment Center**

Mailing Address PO Box 64306

City Saint Paul State MN Zip Code 55164-0306

Purpose of Disbursement  
Wage Levy

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	07	/	2014

**Transaction ID : D520285**

Amount of Each Disbursement this Period

36.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

396.89
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**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Minnesota Department of Revenue**

Mailing Address PO Box 821

City Minneapolis State MN Zip Code 55440-0821

Purpose of Disbursement  
State Withholding Tax

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 07 / 2014

**Transaction ID : D520643**

Amount of Each Disbursement this Period

940.00

Full Name (Last, First, Middle Initial)

**B. Minnesota Department of Revenue**

Mailing Address PO Box 821

City Minneapolis State MN Zip Code 55440-0821

Purpose of Disbursement  
State Withholding Tax

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 21 / 2014

**Transaction ID : D520651**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Noble Systems**

Mailing Address 4151 Ashford Dunwoody Rd NE  
Ste 600

City Atlanta State GA Zip Code 30319-1452

Purpose of Disbursement  
Monthly Dialer Lease & VPN

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 14 / 2014

**Transaction ID : D520703**

Amount of Each Disbursement this Period

4243.53

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

6183.53

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Principal Life**

Mailing Address PO Box 14416

City Des Moines State IA Zip Code 50306-3416

Purpose of Disbursement  
Dental & Life Insurance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 25 / 2014

**Transaction ID : D521091**

Amount of Each Disbursement this Period

443.54

**B. Marquitta Ransom**

Full Name (Last, First, Middle Initial)

Mailing Address 524 W Central Ave

City Saint Paul State MN Zip Code 55103

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 21 / 2014

**Transaction ID : D520611**

Amount of Each Disbursement this Period

135.02

**C. Marquitta Ransom**

Full Name (Last, First, Middle Initial)

Mailing Address 524 W Central Ave

City Saint Paul State MN Zip Code 55103

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 07 / 2014

**Transaction ID : D520258**

Amount of Each Disbursement this Period

208.72

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

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

787.28

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Virginia Redgrave**

Mailing Address 3843 10th Ave S

City Minneapolis State MN Zip Code 55407-2623

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 07 / 2014

**Transaction ID : D520259**

Amount of Each Disbursement this Period

215.54

Full Name (Last, First, Middle Initial)

**B. Virginia Redgrave**

Mailing Address 3843 10th Ave S

City Minneapolis State MN Zip Code 55407-2623

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 21 / 2014

**Transaction ID : D520612**

Amount of Each Disbursement this Period

221.83

Full Name (Last, First, Middle Initial)

**C. Sara Rivera**

Mailing Address 806 Earl St #1

City Saint Paul State MN Zip Code 55106

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 21 / 2014

**Transaction ID : D520613**

Amount of Each Disbursement this Period

401.54

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

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

838.91

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Sara Rivera**

Mailing Address 806 Earl St #1

City State Zip Code  
Saint Paul MN 55106

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 07 / 2014

**Transaction ID : D520260**

Amount of Each Disbursement this Period

128.91

Full Name (Last, First, Middle Initial)

**B. Seven Corners Printing**

Mailing Address 1099 Snelling Ave N

City State Zip Code  
Saint Paul MN 55108-2705

Purpose of Disbursement  
Phone Bank Letters & Envelope Printing

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 21 / 2014

**Transaction ID : D520730**

Amount of Each Disbursement this Period

1995.37

Full Name (Last, First, Middle Initial)

**C. Seven Corners Printing**

Mailing Address 1099 Snelling Ave N

City State Zip Code  
Saint Paul MN 55108-2705

Purpose of Disbursement  
Direct Mail- Printing

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 14 / 2014

**Transaction ID : D520712**

Amount of Each Disbursement this Period

19730.89

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

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

21855.17

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Shakarra Edmonds**

Mailing Address 1524 Woodbridge #301

City State Zip Code  
Saint Paul MN 55104

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 07 / 2014

**Transaction ID : D520248**

Amount of Each Disbursement this Period

118.94

Full Name (Last, First, Middle Initial)

**B. Shakarra Edmonds**

Mailing Address 1524 Woodbridge #301

City State Zip Code  
Saint Paul MN 55104

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 21 / 2014

**Transaction ID : D520598**

Amount of Each Disbursement this Period

97.53

Full Name (Last, First, Middle Initial)

**C. Shonda James Ofili**

Mailing Address 489 Geneva Ave N

City State Zip Code  
Saint Paul MN 55128

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 21 / 2014

**Transaction ID : D520602**

Amount of Each Disbursement this Period

205.93

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

422.40

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Shonda James Ofili**

Mailing Address 489 Geneva Ave N

City State Zip Code  
Saint Paul MN 55128

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	07	/	2014

**Transaction ID : D520252**

Amount of Each Disbursement this Period

67.98
-------

Full Name (Last, First, Middle Initial)

**B. JuQuan Spears**

Mailing Address 653 Galtier  
Apt. 105

City State Zip Code  
Saint Paul MN 55103

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	07	/	2014

**Transaction ID : D520263**

Amount of Each Disbursement this Period

54.68
-------

Full Name (Last, First, Middle Initial)

**C. JuQuan Spears**

Mailing Address 653 Galtier  
Apt. 105

City State Zip Code  
Saint Paul MN 55103

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	21	/	2014

**Transaction ID : D520616**

Amount of Each Disbursement this Period

210.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

332.66
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Steven Libor**

Mailing Address 582 Thomas Ave #2

City State Zip Code  
Saint Paul MN 55104

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 21 / 2014

**Transaction ID : D520608**

Amount of Each Disbursement this Period

246.37

Full Name (Last, First, Middle Initial)

**B. Streamworks**

Mailing Address 3770 Dunlap St N

City State Zip Code  
Saint Paul MN 55112

Purpose of Disbursement  
Direct Mail- Mailhouse

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 14 / 2014

**Transaction ID : D520707**

Amount of Each Disbursement this Period

1576.42

Full Name (Last, First, Middle Initial)

**C. Terianna Gay**

Mailing Address 1067 Dayton Ave

City State Zip Code  
Saint Paul MN 55104

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 21 / 2014

**Transaction ID : D520600**

Amount of Each Disbursement this Period

177.12

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

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

1999.91



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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Terianna Gay**

Mailing Address 1067 Dayton Ave

City State Zip Code  
Saint Paul MN 55104

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		07		2014

**Transaction ID : D520250**

Amount of Each Disbursement this Period

178.61
--------

Full Name (Last, First, Middle Initial)

**B. Timothy J Gaughan**

Mailing Address 2878 Holmes

City State Zip Code  
Minneapolis MN 55408

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		07		2014

**Transaction ID : D520249**

Amount of Each Disbursement this Period

27.88
-------

Full Name (Last, First, Middle Initial)

**C. Timothy J Gaughan**

Mailing Address 2878 Holmes

City State Zip Code  
Minneapolis MN 55408

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		21		2014

**Transaction ID : D520599**

Amount of Each Disbursement this Period

65.94
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

272.43
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. US Postmaster**

Mailing Address Riverview Station

City Saint Paul State MN Zip Code 55107

Purpose of Disbursement  
Business Reply Permit Fee

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		12		2014

**Transaction ID : D520689**

Amount of Each Disbursement this Period

200.00
--------

Full Name (Last, First, Middle Initial)

**B. US Postmaster**

Mailing Address Riverview Station

City Saint Paul State MN Zip Code 55107

Purpose of Disbursement  
Business Reply Permit Fee

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		12		2014

**Transaction ID : D520691**

Amount of Each Disbursement this Period

20.00
-------

Full Name (Last, First, Middle Initial)

**C. US Postmaster**

Mailing Address Riverview Station

City Saint Paul State MN Zip Code 55107

Purpose of Disbursement  
Postage for Mailer of Minnesota State Refund Forms

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		10		2014

**Transaction ID : D520692**

Amount of Each Disbursement this Period

1470.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

1690.00
---------

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. WI SCTF**

Mailing Address Box 74400

City Milwaukee State WI Zip Code 53274

Purpose of Disbursement  
Wage Levy

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		24		2014

**Transaction ID : D520619**

Amount of Each Disbursement this Period

147.83
--------

Full Name (Last, First, Middle Initial)

**B. WI SCTF**

Mailing Address Box 74400

City Milwaukee State WI Zip Code 53274

Purpose of Disbursement  
Wage Levy

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		24		2014

**Transaction ID : D520620**

Amount of Each Disbursement this Period

36.00
-------

Full Name (Last, First, Middle Initial)

**C. WI SCTF**

Mailing Address Box 74400

City Milwaukee State WI Zip Code 53274

Purpose of Disbursement  
Wage Levy

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		07		2014

**Transaction ID : D520283**

Amount of Each Disbursement this Period

36.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

219.83
--------

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. WI SCTF**

Mailing Address Box 74400

City Milwaukee State WI Zip Code 53274

Purpose of Disbursement Wage Levy

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 07 / 2014

**Transaction ID : D520284**

Amount of Each Disbursement this Period

109.15

Full Name (Last, First, Middle Initial)

**B. William Breon**

Mailing Address 3136 10th Ave S

City Minneapolis State MN Zip Code 55407

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 07 / 2014

**Transaction ID : D520246**

Amount of Each Disbursement this Period

98.82

Full Name (Last, First, Middle Initial)

**C. Camille Williams**

Mailing Address 653 Galtier St

City Saint Paul State MN Zip Code 55103

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 07 / 2014

**Transaction ID : D520264**

Amount of Each Disbursement this Period

165.13

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

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

373.10

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Camille Williams**

Mailing Address 653 Galtier St

City State Zip Code  
Saint Paul MN 55103

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 21 / 2014

**Transaction ID : D520617**

Amount of Each Disbursement this Period

178.97

Full Name (Last, First, Middle Initial)

**B. Zamir Zayfert**

Mailing Address 582 Thomas Ave

City State Zip Code  
Saint Paul MN 55009

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 21 / 2014

**Transaction ID : D520618**

Amount of Each Disbursement this Period

365.15

Full Name (Last, First, Middle Initial)

**C. Zamir Zayfert**

Mailing Address 582 Thomas Ave

City State Zip Code  
Saint Paul MN 55009

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 07 / 2014

**Transaction ID : D520265**

Amount of Each Disbursement this Period

185.25

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

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

729.37

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Cardmember Service-Drake Bank**

Mailing Address Po Box 6335

City Fargo State ND Zip Code 58125

Purpose of Disbursement  
Airfare & Twitter Advertising

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 10 / 2014

Transaction ID : D520722

Amount of Each Disbursement this Period

628.00

Full Name (Last, First, Middle Initial)

**B. Delta Airlines**

Mailing Address PO Box 20706

City Atlanta State GA Zip Code 30344

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 10 / 2014

Transaction ID : D520723

Amount of Each Disbursement this Period

618.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Twitter Inc**

Mailing Address 1355 Market St #900

City San Francisco State CA Zip Code 94103

Purpose of Disbursement  
Ad for HHH/Mondale Dinner

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 16 / 2014

Transaction ID : D520724

Amount of Each Disbursement this Period

10.00

[MEMO ITEM]

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

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

628.00

87185.89

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

### A. Minnesota DFL State Account

Mailing Address 255 E Plato Blvd

City Saint Paul State MN Zip Code 55107

Purpose of Disbursement  
Transfer to State amount over limit for Robert Haselow 2-11-14 Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		12		2014

Transaction ID : D520290

Amount of Each Disbursement this Period

3000.00
---------

Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

3000.00
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3000.00
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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

### A. Todd Dalebroux

Mailing Address 5000 Aldrich Ave S

City Minneapolis State MN Zip Code 55419-1208

Purpose of Disbursement  
Refund of Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	14	/	2014

Transaction ID : D520709

Amount of Each Disbursement this Period

100.00
--------

Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Disbursement this Period

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

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

100.00
--------

100.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. EFTPS Fed Tax Payment**

Mailing Address Federal Withholding Taxes

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		24		2014

City State Zip Code  
Iowa City IA 52244

**Transaction ID : D520648**

Purpose of Disbursement  
Federal Withholding Tax

Amount of Each Disbursement this Period

1137.28
---------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. EFTPS Fed Tax Payment**

Mailing Address Federal Withholding Taxes

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		07		2014

City State Zip Code  
Iowa City IA 52244

**Transaction ID : D520642**

Purpose of Disbursement  
Federal Withholding Tax

Amount of Each Disbursement this Period

1137.26
---------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Ryan Furlong**

Mailing Address 430 Oak Grove St #306

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		21		2014

City State Zip Code  
Minneapolis MN 55403-3253

**Transaction ID : D520572**

Purpose of Disbursement  
Payroll

Amount of Each Disbursement this Period

1803.84
---------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

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

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

4078.38
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Ryan Furlong**

Mailing Address 430 Oak Grove St #306

City Minneapolis State MN Zip Code 55403-3253

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 07 / 2014

**Transaction ID : D520266**

Amount of Each Disbursement this Period

1803.83

Full Name (Last, First, Middle Initial)

**B. HealthPartners**

Mailing Address 8170 33rd Ave S

City Bloomington State MN Zip Code 55425-4516

Purpose of Disbursement  
Health Insurance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 25 / 2014

**Transaction ID : D521089**

Amount of Each Disbursement this Period

557.00

Full Name (Last, First, Middle Initial)

**C. Minnesota Department of Revenue**

Mailing Address PO Box 821

City Minneapolis State MN Zip Code 55440-0821

Purpose of Disbursement  
State Withholding Tax

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 21 / 2014

**Transaction ID : D520650**

Amount of Each Disbursement this Period

202.00

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

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

2562.83

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Minnesota Department of Revenue**

Mailing Address PO Box 821

City Minneapolis State MN Zip Code 55440-0821

Purpose of Disbursement  
State Withholding Tax

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2014

**Transaction ID : D520644**

Amount of Each Disbursement this Period

202.00

Full Name (Last, First, Middle Initial)

**B. Principal Life**

Mailing Address PO Box 14416

City Des Moines State IA Zip Code 50306-3416

Purpose of Disbursement  
Dental & Life Insurance

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2014

**Transaction ID : D521092**

Amount of Each Disbursement this Period

82.18

Full Name (Last, First, Middle Initial)

**C. Theodore Tschann**

Mailing Address 427 Woodlawn Ave

City Saint Paul State MN Zip Code 55105

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2014

**Transaction ID : D520267**

Amount of Each Disbursement this Period

707.47

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

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

991.65

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

### A. Theodore Tschann

Mailing Address 427 Woodlawn Ave

City State Zip Code  
Saint Paul MN 55105

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	21	/	2014

Transaction ID : D520573

Amount of Each Disbursement this Period

707.45
--------

Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Disbursement this Period

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

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

707.45
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8340.31
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**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 85 OF 137
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 9 <input type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Jeff Anderson for Minnesota</b>	Nature of Debt (Purpose): Voter File Access
Mailing Address PO Box 323	
City State Zip Code Duluth MN 55801	

Outstanding Balance Beginning This Period 2500.00	Transaction ID : C8637562	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Diana Longrie</b>	Nature of Debt (Purpose): Voter File Access
Mailing Address 1771 Burr St	
City State Zip Code Maplewood MN 55117-2456	

Outstanding Balance Beginning This Period 2500.00	Transaction ID : C8637572	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2500.00

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

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	5000.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	5000.00
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	5000.00

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 86 OF 137
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ArcStone</b>	Nature of Debt (Purpose): Web Page Design
Mailing Address 104 W Franklin Ave	
City State Zip Code Minneapolis MN 55404	

Outstanding Balance Beginning This Period 22551.00	<b>Transaction ID : D506338</b>	
Amount Incurred This Period 0.00	Payment This Period 4510.50	Outstanding Balance at Close of This Period 18040.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>JR Broadcasting, LLC</b>	Nature of Debt (Purpose): Radio Ad- 2014 HHH-Mondale Dinner
Mailing Address 11320 Valley View Rd	
City State Zip Code Eden Prairie MN 55344-3613	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : D521753</b>	
Amount Incurred This Period 3000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Lockridge Grindal Nauen PLLP</b>	Nature of Debt (Purpose): Legal Fees
Mailing Address 100 Washington Ave S #2200	
City State Zip Code Minneapolis MN 55401-2159	

Outstanding Balance Beginning This Period 1431.10	<b>Transaction ID : D518530</b>	
Amount Incurred This Period 0.00	Payment This Period 1431.10	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	21040.50
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	0.00

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 87 OF 137
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Seven Corners Printing</b>	Nature of Debt (Purpose): Printing
Mailing Address 1099 Snelling Ave N	
City State Zip Code Saint Paul MN 55108-2705	

Outstanding Balance Beginning This Period 21726.26	<b>Transaction ID : D467570</b>	
Amount Incurred This Period 0.00	Payment This Period 21726.26	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		
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		
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)..... ▶	21040.50
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	21040.50

**SCHEDULE H2 (FEC Form 3X)**

**ALLOCATION RATIOS**

NAME OF COMMITTEE (In Full)  
Minnesota Democratic-Farmer-Labor Party

**RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.**

Methods of allocation:

- I. FUNDRAISING activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity. **For PACs Only:** Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

ACTIVITY OR EVENT IDENTIFIER 2014 HHH-Mondale Dinner  ACTIVITY IS: <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input checked="" type="checkbox"/> Same as Previously Reported <b>Transaction ID : R890</b>	FEDERAL %  <input type="text" value="75.00"/> %	NONFEDERAL %  <input type="text" value="25.00"/> %
ACTIVITY OR EVENT IDENTIFIER  ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL %  <input type="text"/> %	NONFEDERAL %  <input type="text"/> %
ACTIVITY OR EVENT IDENTIFIER  ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL %  <input type="text"/> %	NONFEDERAL %  <input type="text"/> %
ACTIVITY OR EVENT IDENTIFIER  ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL %  <input type="text"/> %	NONFEDERAL %  <input type="text"/> %
ACTIVITY OR EVENT IDENTIFIER  ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL %  <input type="text"/> %	NONFEDERAL %  <input type="text"/> %
ACTIVITY OR EVENT IDENTIFIER  ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL %  <input type="text"/> %	NONFEDERAL %  <input type="text"/> %



**SCHEDULE H3 (FEC Form 3X)  
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Minnesota Democratic-Farmer-Labor Party

NAME OF ACCOUNT Non Federal Share of Admin	DATE OF RECEIPT MM / DD / YYYY 02 / 03 / 2014	TOTAL AMOUNT TRANSFERRED 26465.00
---	---	--------------------------------------

**BREAKDOWN OF TRANSFER RECEIVED**

i) <b>Total Administrative</b> .....	26465.00
<b>Transaction ID : T3065</b>	
ii) <b>Generic Voter Drive</b> .....	
iii) <b>Exempt Activities</b> .....	
iv) <b>Direct Fundraising</b> (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
v) <b>Direct Candidate Support</b> (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
vi) <b>Public Communications Referring Only to Party</b> (Made by PAC) .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred).....	

**SCHEDULE H3 (FEC Form 3X)  
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Minnesota Democratic-Farmer-Labor Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Non Federal Share of Admin	MM / DD / YYYY 02 / 06 / 2014	10557.66

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	10557.66
<b>Transaction ID : T3067</b>	
<b>ii) Generic Voter Drive</b> .....	
<b>iii) Exempt Activities</b> .....	
<b>iv) Direct Fundraising (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
<b>v) Direct Candidate Support (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
<b>vi) Public Communications Referring Only to Party (Made by PAC)</b> .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred).....	

**SCHEDULE H3 (FEC Form 3X)  
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Minnesota Democratic-Farmer-Labor Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Non Federal Share of Admin	MM / DD / YYYY 02 / 06 / 2014	8222.62

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	8222.62
<b>Transaction ID : T3068</b>	
<b>ii) Generic Voter Drive</b> .....	
<b>iii) Exempt Activities</b> .....	
<b>iv) Direct Fundraising (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
<b>v) Direct Candidate Support (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
<b>vi) Public Communications Referring Only to Party (Made by PAC)</b> .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred).....	

**SCHEDULE H3 (FEC Form 3X)  
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Minnesota Democratic-Farmer-Labor Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Non Federal Share of Admin	MM / DD / YYYY 02 / 06 / 2014	2185.33

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	2185.33
<b>Transaction ID : T3069</b>	
<b>ii) Generic Voter Drive</b> .....	
<b>iii) Exempt Activities</b> .....	
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
<b>v) Direct Candidate Support</b> (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC) .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred).....	

**SCHEDULE H3 (FEC Form 3X)  
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Minnesota Democratic-Farmer-Labor Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Non Federal Share of Admin	MM / DD / YYYY 02 / 06 / 2014	6329.64

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	5129.64
<b>Transaction ID : T3070</b>	
<b>ii) Generic Voter Drive</b> .....	
<b>iii) Exempt Activities</b> .....	
<b>iv) Direct Fundraising (List Activity or Event Identifier)</b>	
a) 2014 HHH-Mondale Dinner	1200.00
<b>Transaction ID : T3071</b>	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	1200.00
<b>v) Direct Candidate Support (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
<b>vi) Public Communications Referring Only to Party (Made by PAC)</b> .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred).....	

**SCHEDULE H3 (FEC Form 3X)  
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Minnesota Democratic-Farmer-Labor Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Non Federal Share of Admin	MM / DD / YYYY 02 / 14 / 2014	10398.29

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	10398.29
<b>Transaction ID : T3072</b>	
<b>ii) Generic Voter Drive</b> .....	
<b>iii) Exempt Activities</b> .....	
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
<b>v) Direct Candidate Support</b> (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC) .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred).....	

**SCHEDULE H3 (FEC Form 3X)  
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Minnesota Democratic-Farmer-Labor Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Non Federal Share of Admin	MM / DD / YYYY 02 / 20 / 2014	9520.81

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	9520.81
<b>Transaction ID : T3073</b>	
<b>ii) Generic Voter Drive</b> .....	
<b>iii) Exempt Activities</b> .....	
<b>iv) Direct Fundraising (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
<b>v) Direct Candidate Support (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
<b>vi) Public Communications Referring Only to Party (Made by PAC)</b> .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred).....	

**SCHEDULE H3 (FEC Form 3X)  
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Minnesota Democratic-Farmer-Labor Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Non Federal Share of Admin	MM / DD / YYYY 02 / 20 / 2014	3782.00

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	3782.00
<b>Transaction ID : T3074</b>	
<b>ii) Generic Voter Drive</b> .....	
<b>iii) Exempt Activities</b> .....	
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
<b>v) Direct Candidate Support</b> (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC) .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred).....	



**SCHEDULE H3 (FEC Form 3X)  
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Minnesota Democratic-Farmer-Labor Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Non Federal Share of Admin	MM / DD / YYYY 02 / 21 / 2014	31679.00

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	31679.00
<b>Transaction ID : T3075</b>	
<b>ii) Generic Voter Drive</b> .....	
<b>iii) Exempt Activities</b> .....	
<b>iv) Direct Fundraising (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
<b>v) Direct Candidate Support (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
<b>vi) Public Communications Referring Only to Party (Made by PAC)</b> .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred).....	

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
 Minnesota Democratic-Farmer-Labor Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Non Federal Share of Admin	MM / DD / YYYY 02 / 21 / 2014	15625.00

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	15625.00
<b>Transaction ID : T3076</b>	
<b>ii) Generic Voter Drive</b> .....	
<b>iii) Exempt Activities</b> .....	
<b>iv) Direct Fundraising (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
<b>v) Direct Candidate Support (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
<b>vi) Public Communications Referring Only to Party (Made by PAC)</b> .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	123565.35
<b>TOTAL</b> This Period (Generic Voter Drive) .....	0.00
<b>TOTAL</b> This Period (Exempt Activities) .....	0.00
<b>TOTAL</b> This Period (Direct Fundraising) .....	1200.00
<b>TOTAL</b> This Period (Direct Candidate Support) .....	0.00
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	0.00
<b>TOTAL</b> This Period (Total Amount Transferred).....	124765.35

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Disbursement for Alexander Rosselli, Transaction ID D520268. Purpose: Payroll. Date: 02/07/2014. Total Amount: 1079.72.

Form B: Disbursement for Alexander Rosselli, Transaction ID D520684. Purpose: Mileage. Date: 02/14/2014. Total Amount: 40.32.

Form C: Disbursement for Alexander Rosselli, Transaction ID D520574. Purpose: Payroll. Date: 02/21/2014. Total Amount: 1147.74.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE 476.24, NONFEDERAL SHARE 1791.54, TOTAL AMOUNT 2267.78.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Full Name (Last, First, Middle Initial) Transaction ID : D520652 ArcStone
Mailing Address 104 W Franklin Ave
City Minneapolis State MN Zip Code 55404
Purpose of Disbursement: Web Pag Design
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Date 02/21/2014
FEDERAL SHARE 947.20 + NONFEDERAL SHARE 3563.30 = TOTAL AMOUNT 4510.50

Form B: Full Name (Last, First, Middle Initial) Transaction ID : D520685 Aspen Waste Systems
Mailing Address 2951 Weeks Ave SE
City Minneapolis State MN Zip Code 55414-2833
Purpose of Disbursement: Trash & Recycling
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Date 02/14/2014
FEDERAL SHARE 78.02 + NONFEDERAL SHARE 293.48 = TOTAL AMOUNT 371.50

Form C: Full Name (Last, First, Middle Initial) Transaction ID : D520645 AXA Equitable
Mailing Address PO Box 13463
City Newark State NJ Zip Code 07188
Purpose of Disbursement: Retirement Funds
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Date 02/10/2014
FEDERAL SHARE 347.09 + NONFEDERAL SHARE 1305.73 = TOTAL AMOUNT 1652.82

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 1372.31, 5162.51, 6534.82

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Corey Day, Transaction ID: D520293. Allocated Activity or Event: Administrative. Date: 02/03/2014. Total Amount: 452.84.

Form B: David Weinlick, Transaction ID: D520686. Allocated Activity or Event: Administrative. Date: 02/14/2014. Total Amount: 45.35.

Form C: Direct TV, Transaction ID: D520294. Allocated Activity or Event: Administrative. Date: 02/03/2014. Total Amount: 253.61.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 157.88, 593.92, 751.80.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`-H9A-N5HCB

Form/Schedule: H4

Transaction ID : D520293

12/17/2013, Holiday Gas Station, 200 S Wabasha St, St. Paul, MN 55107, Staff Beverages, \$6.99, 1/10/2014, US Post Office, 292 Eva St, St. Paul, MN 55107, Postage, \$51.35, 1/13/2014, Rudolph's Bar-B-Que, 1930 Lyndale Ave S, Minneapolis, MN 55403, Staff Lunch, \$83.02, 1/24/2014, Keys Cafe, 504 Robert St, St. Paul, MN 55101, Staff Lunch, \$37.50, 1/28/2014, Panera, 1409 S Robert St Ste 102, West St. Paul, MN 55118, Staff Lunch, \$273.98

Form/Schedule: H4

Transaction ID: D520686

1/2/2014, Post Office, 7595 Currell Blvd, Woodbury, MN 55125, Postage, \$45.35

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Full Name (Last, First, Middle Initial) Drake Bank Federal, Transaction ID : D520287, Allocated Activity or Event: Administrative, Date: 02/03/2014, FEDERAL SHARE: 554.00, NONFEDERAL SHARE: 2084.09, TOTAL AMOUNT: 2638.09

Form B: Full Name (Last, First, Middle Initial) Drake Bank Federal, Transaction ID : D520288, Allocated Activity or Event: Administrative, Date: 02/03/2014, FEDERAL SHARE: 531.94, NONFEDERAL SHARE: 2001.12, TOTAL AMOUNT: 2533.06

Form C: Full Name (Last, First, Middle Initial) Drake Bank Federal, Transaction ID : D520289, Allocated Activity or Event: Administrative, Date: 02/03/2014, FEDERAL SHARE: 52.77, NONFEDERAL SHARE: 198.53, TOTAL AMOUNT: 251.30

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE (1138.71), NONFEDERAL SHARE (4283.74), TOTAL AMOUNT (5422.45)

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) <b>Drake Bank Federal</b>		Transaction ID : <b>D520291</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 60 Plato Blvd E			Allocated Activity or Event Year-To-Date 198902.51	
City Saint Paul	State MN	Zip Code 55107-1820	Date 02 / 06 / 2014	
Purpose of Disbursement: Bank Charges		Category/ Type	Date 02 / 06 / 2014	
Activity or Event Identifier: <b>Administrative</b>				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
2.10			7.90	10.00

B. Full Name (Last, First, Middle Initial) <b>Drake Bank Federal</b>		Transaction ID : <b>D521093</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 60 Plato Blvd E			Allocated Activity or Event Year-To-Date 198902.51	
City Saint Paul	State MN	Zip Code 55107-1820	Date 02 / 28 / 2014	
Purpose of Disbursement: Bank Charges		Category/ Type	Date 02 / 28 / 2014	
Activity or Event Identifier: Administrative				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
16.79			63.15	79.94

C. Full Name (Last, First, Middle Initial) <b>Drake Bank Federal</b>		Transaction ID : <b>D521094</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 60 Plato Blvd E			Allocated Activity or Event Year-To-Date 198902.51	
City Saint Paul	State MN	Zip Code 55107-1820	Date 02 / 28 / 2014	
Purpose of Disbursement: Bank Charges		Category/ Type	Date 02 / 28 / 2014	
Activity or Event Identifier: Administrative				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
6.80			25.59	32.39

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.69		96.64		122.33

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT



SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Drake Bank Federal. Transaction ID: D521110. Mailing Address: 60 Plato Blvd E, Saint Paul, MN 55107-1820. Purpose: Bank Charges. Activity: Administrative. Date: 02/28/2014. Total Amount: 23.42.

Form B: EFTPS Fed Tax Payment. Transaction ID: D520623. Mailing Address: Federal Withholding Taxes, Iowa City, IA 52244. Purpose: Federal Withholding Tax. Activity: Administrative. Date: 02/24/2014. Total Amount: 4805.28.

Form C: EFTPS Fed Tax Payment. Transaction ID: D520242. Mailing Address: Federal Withholding Taxes, Iowa City, IA 52244. Purpose: Federal Withholding Tax. Activity: Administrative. Date: 02/07/2014. Total Amount: 3967.70.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE (1847.25), NONFEDERAL SHARE (6949.15), TOTAL AMOUNT (8796.40).

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Full Name (Last, First, Middle Initial) Transaction ID : D521097
Electro Watchman
Mailing Address 1 Water St W Ste 110
City Saint Paul State MN Zip Code 55107-2097
Purpose of Disbursement: Alarm Service
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Date 02/25/2014
FEDERAL SHARE 112.52 NONFEDERAL SHARE 423.29 TOTAL AMOUNT 535.81

Form B: Full Name (Last, First, Middle Initial) Transaction ID : D520687
Elise Convy
Mailing Address 11319 Ewing Cir S
City Bloomington State MN Zip Code 55431
Purpose of Disbursement: Office Supplies
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Date 02/14/2014
FEDERAL SHARE 6.59 NONFEDERAL SHARE 24.77 TOTAL AMOUNT 31.36

Form C: Full Name (Last, First, Middle Initial) Transaction ID : D520581
Ellen Anderson
Mailing Address 1909 1st Ave S Apt 1
City Minneapolis State MN Zip Code 55403
Purpose of Disbursement: Payroll
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Date 02/21/2014
FEDERAL SHARE 256.58 NONFEDERAL SHARE 965.22 TOTAL AMOUNT 1221.80

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 375.69, 1413.28, 1788.97

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: H4

Transaction ID : D520687

1/30/2014, Office Max, 1450 Mendota Heights Rd, Inver Grove Heights, MN 55077, Office Supplies, \$31.36

Form/Schedule:

Transaction ID:

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Full Name (Last, First, Middle Initial) Transaction ID : D520274 Ellen Anderson. Mailing Address 1909 1st Ave S Apt 1. City Minneapolis State MN Zip Code 55403. Purpose of Disbursement: Payroll. Activity or Event Identifier: Administrative. Allocated Activity or Event: Administrative. Date 02/07/2014. FEDERAL SHARE 256.58, NONFEDERAL SHARE 965.22, TOTAL AMOUNT 1221.80.

Form B: Full Name (Last, First, Middle Initial) Transaction ID : D520278 Ellen Perrault. Mailing Address 553 Ashland Ave. City Saint Paul State MN Zip Code 55102-2007. Purpose of Disbursement: Payroll. Activity or Event Identifier: Administrative. Allocated Activity or Event: Administrative. Date 02/07/2014. FEDERAL SHARE 374.28, NONFEDERAL SHARE 1408.00, TOTAL AMOUNT 1782.28.

Form C: Full Name (Last, First, Middle Initial) Transaction ID : D520591 Ellen Perrault. Mailing Address 553 Ashland Ave. City Saint Paul State MN Zip Code 55102-2007. Purpose of Disbursement: Payroll. Activity or Event Identifier: Administrative. Allocated Activity or Event: Administrative. Date 02/21/2014. FEDERAL SHARE 374.27, NONFEDERAL SHARE 1407.99, TOTAL AMOUNT 1782.26.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 1005.13, 3781.21, 4786.34.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : D520688</b> <b>Ellen Perrault</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 553 Ashland Ave		Allocated Activity or Event Year-To-Date 198902.51	
City State Zip Code Saint Paul MN 55102-2007	Date <input type="text" value="02"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>		
Purpose of Disbursement: Hotel, Parking, Office Supplies, Cell Phone	Category/Type		
Activity or Event Identifier: <b>Administrative</b>	FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 49.98 + 188.02 = 238.00		

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : D520306</b> <b>Evans &amp; Katz LLC</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1831 Bay Street SE		Allocated Activity or Event Year-To-Date 198902.51	
City State Zip Code Washington DC 20003	Date <input type="text" value="02"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>		
Purpose of Disbursement: Compliance Consulting	Category/Type		
Activity or Event Identifier: Administrative	FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 1.31 + 4.94 = 6.25		

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : D520295</b> <b>Eventis</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 221 E Hickory St		Allocated Activity or Event Year-To-Date 198902.51	
City State Zip Code Mankato MN 56001	Date <input type="text" value="02"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>		
Purpose of Disbursement: Phone Service	Category/Type		
Activity or Event Identifier: Administrative	FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 245.45 + 923.34 = 1168.79		

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
296.74		1116.30		1413.04

**TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))**

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

: 97 `A -G79 @C B9CI G`H9LH`F9 @ H98 `HC `5 `F9DCFH`G7 <98I @ `CF `H9A -N5 HCB

Form/Schedule: H4

Transaction ID : D520688

12/13/2013, Lowertown Ramp, 316 Jackson St, St. Paul, MN 55101, Parking, \$3.00, State of Minnesota, 75 Rev Dr Martin Luther King Jr Blvd, St. Paul, MN 55155, Parking, \$2.75, 1/7/2014, AT&T, PO Box 6416, Lisle, IL 60197, Cell Phone, \$82.07, 1/25/2014, Best Buy, 12905 Elm Creek Blvd N, Maple Grove, MN 55369, Monitor Adapters, \$32.15, 1/28/2014, State of Minnesota, 75 Rev Dr Martin Luther King Jr Blvd, St. Paul, MN 55155, Parking, \$2.05, 1/30/2014, State of Minnesota, 75 Rev Dr Martin Luther King Jr Blvd, St. Paul, MN 55155, \$1.50, 1/31/2014, Cragun's, 11000 Craguns Dr, Brainerd, MN 56401, Hotel Room, \$105.81, Lowertown Ramp, 316 Jackson St, St. Paul, MN 55101, Parking, \$3.00, 2/2/2014, Office Depot, 12795 Elm Creek Blvd, Maple Grove, MN 55369, Dry Erase Markers, \$5.67

Form/Schedule:

Transaction ID:

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Full Name (Last, First, Middle Initial) Transaction ID : D520695
Eventis
Mailing Address 221 E Hickory St
City Mankato State MN Zip Code 56001
Purpose of Disbursement: Phone Service
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 198902.51
Date 02 / 14 / 2014
FEDERAL SHARE 257.82 + NONFEDERAL SHARE 969.91 = TOTAL AMOUNT 1227.73

Form B: Full Name (Last, First, Middle Initial) Transaction ID : D520697
F & F Janitorial Services, Inc
Mailing Address 318 Page St W
City Saint Paul State MN Zip Code 55107
Purpose of Disbursement: Office Cleaning
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 198902.51
Date 02 / 14 / 2014
FEDERAL SHARE 180.81 + NONFEDERAL SHARE 680.17 = TOTAL AMOUNT 860.98

Form C: Full Name (Last, First, Middle Initial) Transaction ID : D520311
GE Capital
Mailing Address PO Box 31001
City Pasadena State CA Zip Code 91110-0001
Purpose of Disbursement: Copier Lease
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 198902.51
Date 02 / 03 / 2014
FEDERAL SHARE 75.71 + NONFEDERAL SHARE 284.83 = TOTAL AMOUNT 360.54

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 514.34, 1934.91, 2449.25

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: (empty), (empty), (empty)

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Greenberg Quinlan Rosner Research. Transaction ID: D520717. Allocated Activity or Event: Administrative. Date: 02/21/2014. Total Amount: 40100.00.

Form B: HealthPartners. Transaction ID: D521099. Allocated Activity or Event: Administrative. Date: 02/25/2014. Total Amount: 4726.50.

Form C: HealthPartners. Transaction ID: D520296. Allocated Activity or Event: Administrative. Date: 02/03/2014. Total Amount: 3612.50.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 10172.19, 38266.81, 48439.00.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].



SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Honsa Binder Printing. Transaction ID: D520297. Allocated Activity or Event: Administrative. Date: 02/03/2014. Total Amount: 45.21.

Form B: Huebsch. Transaction ID: D520698. Allocated Activity or Event: Administrative. Date: 02/14/2014. Total Amount: 128.34.

Form C: Innovative Office Solutions. Transaction ID: D520298. Allocated Activity or Event: Administrative. Date: 02/03/2014. Total Amount: 429.04.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 126.54, 476.05, 602.59.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Innovative Office Solutions, Transaction ID: D520308. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Office Supplies), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (02/03/2014), and a summary table showing Federal Share (39.76), NonFederal Share (149.57), and Total Amount (189.33).

Form B: Innovative Office Solutions, Transaction ID: D521100. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Office Supplies), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (02/25/2014), and a summary table showing Federal Share (26.82), NonFederal Share (100.88), and Total Amount (127.70).

Form C: International Office Technologies, Transaction ID: D520700. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Toner), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (02/14/2014), and a summary table showing Federal Share (25.54), NonFederal Share (96.07), and Total Amount (121.61).

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE (92.12) + NONFEDERAL SHARE (346.52) = TOTAL AMOUNT (438.64)

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Full Name (Last, First, Middle Initial) Transaction ID : D520725 Allocated Activity or Event: Administrative [checked] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC [ ] Allocated Activity or Event Year-To-Date 198902.51 Date 02/10/2014 Purpose of Disbursement: Video Production Activity or Event Identifier: Administrative FEDERAL SHARE 249.11 NONFEDERAL SHARE 937.14 TOTAL AMOUNT 1186.25

Form B: Full Name (Last, First, Middle Initial) Transaction ID : D520696 Allocated Activity or Event: Administrative [ ] Fundraising [checked] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC [ ] Allocated Activity or Event Year-To-Date 74635.00 Date 02/14/2014 Purpose of Disbursement: Party Graphics Design, Video Editing Activity or Event Identifier: 2014 HHH-Mondale Dinner FEDERAL SHARE 464.25 NONFEDERAL SHARE 154.75 TOTAL AMOUNT 619.00

Form C: Full Name (Last, First, Middle Initial) Transaction ID : D520728 Allocated Activity or Event: Administrative [ ] Fundraising [checked] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC [ ] Allocated Activity or Event Year-To-Date 74635.00 Date 02/21/2014 Purpose of Disbursement: Catering- HHH/Mondale Dinner Activity or Event Identifier: 2014 HHH-Mondale Dinner FEDERAL SHARE 48900.00 NONFEDERAL SHARE 16300.00 TOTAL AMOUNT 65200.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 49613.36, 17391.89, 67005.25

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [ ], [ ], [ ]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) <b>LexisNexis</b>		Transaction ID : <b>D520702</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address <b>PO Box 933</b>			Allocated Activity or Event Year-To-Date 198902.51	
City <b>Dayton</b>	State <b>OH</b>	Zip Code <b>45401-0933</b>	Date <input type="text" value="02"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: <b>Search Engine</b>		Category/ Type	Date	
Activity or Event Identifier: <b>Administrative</b>				
FEDERAL SHARE		+	NONFEDERAL SHARE	
72.45			272.55	
		=	TOTAL AMOUNT	
			345.00	

B. Full Name (Last, First, Middle Initial) <b>Libby Keefe</b>		Transaction ID : <b>D520281</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address <b>591 Lincoln Ave</b>			Allocated Activity or Event Year-To-Date 198902.51	
City <b>Saint Paul</b>	State <b>MN</b>	Zip Code <b>55102-2814</b>	Date <input type="text" value="02"/> / <input type="text" value="07"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: <b>Payroll</b>		Category/ Type	Date	
Activity or Event Identifier: <b>Administrative</b>				
FEDERAL SHARE		+	NONFEDERAL SHARE	
392.50			1476.57	
		=	TOTAL AMOUNT	
			1869.07	

C. Full Name (Last, First, Middle Initial) <b>Libby Keefe</b>		Transaction ID : <b>D520594</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address <b>591 Lincoln Ave</b>			Allocated Activity or Event Year-To-Date 198902.51	
City <b>Saint Paul</b>	State <b>MN</b>	Zip Code <b>55102-2814</b>	Date <input type="text" value="02"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: <b>Payroll</b>		Category/ Type	Date	
Activity or Event Identifier: <b>Administrative</b>				
FEDERAL SHARE		+	NONFEDERAL SHARE	
392.50			1476.56	
		=	TOTAL AMOUNT	
			1869.06	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
857.45		3225.68		4083.13

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Linda McEwen, Transaction ID: D520590. Allocated Activity or Event: Administrative. Date: 02/21/2014. Total Amount: 1351.01.

Form B: Linda McEwen, Transaction ID: D520277. Allocated Activity or Event: Administrative. Date: 02/07/2014. Total Amount: 1475.03.

Form C: Lockridge Grindal Nauen PLLP, Transaction ID: D520726. Allocated Activity or Event: Administrative. Date: 02/10/2014. Total Amount: 659.80.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 732.03, 2753.81, 3485.84.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Lockridge Grindal Nauen PLLP, Transaction ID: D520304. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Legal Fees), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (02/03/2014), and a summary table showing Federal Share (161.97), NonFederal Share (609.33), and Total Amount (771.30).

Form B: Marge Hoffa, Transaction ID: D520275. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Payroll), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (02/07/2014), and a summary table showing Federal Share (138.89), NonFederal Share (522.49), and Total Amount (661.38).

Form C: Marge Hoffa, Transaction ID: D520582. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Payroll), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (02/21/2014), and a summary table showing Federal Share (138.89), NonFederal Share (522.49), and Total Amount (661.38).

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE (439.75) + NONFEDERAL SHARE (1654.31) = TOTAL AMOUNT (2094.06)

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Michael McCool, Transaction ID: D520589. Allocated Activity: Administrative. Date: 02/21/2014. Total Amount: 873.58.

Form B: Michael McCool, Transaction ID: D520704. Allocated Activity: Administrative. Date: 02/14/2014. Total Amount: 208.32.

Form C: Michael McCool, Transaction ID: D520276. Allocated Activity: Administrative. Date: 02/07/2014. Total Amount: 873.58.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 410.65, 1544.83, 1955.48.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: H4

Transaction ID : D520704

1/18/2014, Ramsey County GOP Debate, 2400 N Dale St, St. Paul, MN 55113, Ticket, \$10.00, Mileage, \$198.32

Form/Schedule:

Transaction ID:



SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Minikahda Mini Storage. Transaction ID: D520299. Allocated Activity: Administrative. Date: 02/03/2014. Amounts: FEDERAL SHARE 76.44, NONFEDERAL SHARE 287.56, TOTAL AMOUNT 364.00.

Form B: Minneapolis Urban League. Transaction ID: D520711. Allocated Activity: Administrative. Date: 02/14/2014. Amounts: FEDERAL SHARE 33.60, NONFEDERAL SHARE 126.40, TOTAL AMOUNT 160.00.

Form C: Minnesota Department of Revenue. Transaction ID: D520571. Allocated Activity: Administrative. Date: 02/21/2014. Amounts: FEDERAL SHARE 169.47, NONFEDERAL SHARE 637.53, TOTAL AMOUNT 807.00.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE 279.51, NONFEDERAL SHARE 1051.49, TOTAL AMOUNT 1331.00.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Minnesota Department of Revenue. Transaction ID: D520243. Allocated Activity or Event: Administrative. Date: 02/07/2014. Total Amount: 685.00.

Form B: Minnesota DFL Building Fund, Inc. Transaction ID: D520313. Allocated Activity or Event: Administrative. Date: 02/03/2014. Total Amount: 4750.00.

Form C: Mitel Leasing. Transaction ID: D520300. Allocated Activity or Event: Administrative. Date: 02/03/2014. Total Amount: 1191.78.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 1391.62, 5235.16, 6626.78.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : D520699</b> <b>Mpls Convention Center</b>		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1301 2nd Ave S		Allocated Activity or Event Year-To-Date _____ 74635.00	
City State Zip Code Minneapolis MN 55403-2735	Date <input type="text" value="02"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>		
Purpose of Disbursement: Down Payment Additional Room	Category/Type <input type="text"/>		
Activity or Event Identifier: <b>2014 HHH-Mondale Dinner</b>			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
_____ 956.25	_____ 318.75	_____ 1275.00	

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : D521107</b> <b>Mpls Convention Center</b>		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1301 2nd Ave S		Allocated Activity or Event Year-To-Date _____ 74635.00	
City State Zip Code Minneapolis MN 55403-2735	Date <input type="text" value="02"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>		
Purpose of Disbursement: Down Payment Additional Room	Category/Type <input type="text"/>		
Activity or Event Identifier: 2014 HHH-Mondale Dinner			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
_____ 956.25	_____ 318.75	_____ 1275.00	

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : D520701</b> <b>NGP VAN Inc.</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1101 15th St SW		Allocated Activity or Event Year-To-Date _____ 198902.51	
City State Zip Code Washington DC 20005	Date <input type="text" value="02"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>		
Purpose of Disbursement: Email & Compliance Software	Category/Type <input type="text"/>		
Activity or Event Identifier: Administrative			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
_____ 157.50	_____ 592.50	_____ 750.00	

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
_____ 2070.00		_____ 1230.00		_____ 3300.00

**TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))**

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
_____	_____	_____

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : D520570</b> <b>NGP VAN Inc.</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1101 15th St SW		Allocated Activity or Event Year-To-Date _____ 198902.51	
City State Zip Code Washington DC 20005	Category/ Type	Date <input type="text" value="02"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Reporting Software		_____	
Activity or Event Identifier: <b>Administrative</b>		_____	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT		_____ 157.50 _____ 592.50 _____ 750.00	

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : D520714</b> <b>Northern Clay Center</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2424 E Franklin Ave		Allocated Activity or Event Year-To-Date _____ 198902.51	
City State Zip Code Minneapolis MN 55406-1027	Category/ Type	Date <input type="text" value="02"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Memorial		_____	
Activity or Event Identifier: Administrative		_____	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT		_____ 21.00 _____ 79.00 _____ 100.00	

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : D520305</b> <b>Paetec</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 600 Willowbrook Office Park		Allocated Activity or Event Year-To-Date _____ 198902.51	
City State Zip Code Fairport NY 14450	Category/ Type	Date <input type="text" value="02"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Customer Proprietary Network Information		_____	
Activity or Event Identifier: Administrative		_____	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT		_____ 94.40 _____ 355.11 _____ 449.51	

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
_____ 272.90		_____ 1026.61		_____ 1299.51

**TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))**

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
_____	_____	_____

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Full Name (Last, First, Middle Initial) Transaction ID : D521102 Paetec. Mailing Address 600 Willowbrook Office Park. City Fairport State NY Zip Code 14450. Purpose of Disbursement: Customer Proprietary Network Information. Activity or Event Identifier: Administrative. Allocated Activity or Event: Administrative. Date 02/25/2014. FEDERAL SHARE 95.81, NONFEDERAL SHARE 360.44, TOTAL AMOUNT 456.25.

Form B: Full Name (Last, First, Middle Initial) Transaction ID : D520706 Peggy Shapiro Graphic Design. Mailing Address 2255 N Clark St #206. City Chicago State IL Zip Code 60614. Purpose of Disbursement: Invitation Design HHH-Mondale Dinner. Activity or Event Identifier: 2014 HHH-Mondale Dinner. Allocated Activity or Event: Fundraising. Date 02/14/2014. FEDERAL SHARE 337.50, NONFEDERAL SHARE 112.50, TOTAL AMOUNT 450.00.

Form C: Full Name (Last, First, Middle Initial) Transaction ID : D520301 Principal Life. Mailing Address PO Box 14416. City Des Moines State IA Zip Code 50306-3416. Purpose of Disbursement: Dental & Life Insurance. Activity or Event Identifier: Administrative. Allocated Activity or Event: Administrative. Date 02/03/2014. FEDERAL SHARE 51.71, NONFEDERAL SHARE 194.55, TOTAL AMOUNT 246.26.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 485.02, 667.49, 1152.51.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values are empty.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Principal Life, Transaction ID: D521105. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Dental & Life Insurance), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (02/25/2014), and a summary table showing Federal Share (72.66), NonFederal Share (273.34), and Total Amount (346.00).

Form B: Ready Landscape, Transaction ID: D520715. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Snow Removal), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (02/14/2014), and a summary table showing Federal Share (339.36), NonFederal Share (1276.64), and Total Amount (1616.00).

Form C: Sarah Duevel, Transaction ID: D520593. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Payroll), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (02/21/2014), and a summary table showing Federal Share (375.43), NonFederal Share (1412.32), and Total Amount (1787.75).

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE (787.45) + NONFEDERAL SHARE (2962.30) = TOTAL AMOUNT (3749.75)

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Schaaf Floral, Transaction ID: D520309. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Memorial), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (02/03/2014), and a summary table showing Federal Share (13.50), NonFederal Share (50.79), and Total Amount (64.29).

Form B: SEIU Healthcare Minnesota, Transaction ID: D520654. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Employee Leaseback, Wages, Taxes, Benefits), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (02/06/2014), and a summary table showing Federal Share (2341.68), NonFederal Share (8809.20), and Total Amount (11150.88).

Form C: Seven Corners Printing, Transaction ID: D521134. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Office Business Cards), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (02/14/2014), and a summary table showing Federal Share (81.36), NonFederal Share (306.09), and Total Amount (387.45).

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE (2436.54) + NONFEDERAL SHARE (9166.08) = TOTAL AMOUNT (11602.62)

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Solutions Builders - OK. Transaction ID: D520310. Allocated Activity or Event: Administrative. Date: 02/03/2014. Total Amount: 1560.00.

Form B: St Paul Publishing. Transaction ID: D520307. Allocated Activity or Event: Administrative. Date: 02/03/2014. Total Amount: 145.11.

Form C: US Postmaster. Transaction ID: D520693. Allocated Activity or Event: Administrative. Date: 02/10/2014. Total Amount: 19.99.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 362.27, 1362.83, 1725.10.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].



**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Verizon Wireless</b>		<b>Transaction ID : D520292</b>	<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 25505			Allocated Activity or Event Year-To-Date 198902.51	
City Lehigh Valley	State PA	Zip Code 18002-5505	Date MM / DD / YYYY 02 / 03 / 2014	
Purpose of Disbursement: Cell Phone		Category/ Type	Date	
Activity or Event Identifier: <b>Administrative</b>			02 / 03 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	
123.56			464.80	
		=	TOTAL AMOUNT	
			588.36	

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Verizon Wireless</b>		<b>Transaction ID : D521096</b>	<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 25505			Allocated Activity or Event Year-To-Date 198902.51	
City Lehigh Valley	State PA	Zip Code 18002-5505	Date MM / DD / YYYY 02 / 25 / 2014	
Purpose of Disbursement: Cell Phones		Category/ Type	Date	
Activity or Event Identifier: Administrative			02 / 25 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	
125.64			472.64	
		=	TOTAL AMOUNT	
			598.28	

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Vicki Wright</b>		<b>Transaction ID : D520312</b>	<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 3475 Golfview Dr Apt 317			Allocated Activity or Event Year-To-Date 198902.51	
City Eagan	State MN	Zip Code 55123-2412	Date MM / DD / YYYY 02 / 03 / 2014	
Purpose of Disbursement: Staff Food & Beverages		Category/ Type	Date	
Activity or Event Identifier: Administrative			02 / 03 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	
4.83			18.17	
		=	TOTAL AMOUNT	
			23.00	

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
254.03		955.61		1209.64

**TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))**

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
[ ]	[ ]	[ ]

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: H4

Transaction ID : D520312

1/26/2014, Caribou Coffee #192, 1193 S Robert St, West St. Paul, MN 51118, Beverages for State Party Meeting, \$13.19, Super America #4045, 1285 S Robert St, West St. Paul, MN 55118, Food and Beverages for State Party Meeting, \$9.81

Form/Schedule:

Transaction ID:

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Vlad Ryaboy, Transaction ID: D520279. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Payroll), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (02/07/2014), and Amounts (Federal Share: 110.97, Nonfederal Share: 417.45, Total Amount: 528.42).

Form B: Vlad Ryaboy, Transaction ID: D520592. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Payroll), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (02/21/2014), and Amounts (Federal Share: 110.97, Nonfederal Share: 417.44, Total Amount: 528.41).

Form C: W Matthew Little Memorial Fund, Transaction ID: D520229. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Memorial), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (02/03/2014), and Amounts (Federal Share: 21.00, Nonfederal Share: 79.00, Total Amount: 100.00).

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE (242.94) + NONFEDERAL SHARE (913.89) = TOTAL AMOUNT (1156.83)

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Well & Lighthouse LLC, Transaction ID: D520716. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, Date, and a summary table for FEDERAL SHARE (525.00), NONFEDERAL SHARE (1975.00), and TOTAL AMOUNT (2500.00).

Form B: Xcel Energy, Transaction ID: D520302. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, Date, and a summary table for FEDERAL SHARE (159.57), NONFEDERAL SHARE (600.27), and TOTAL AMOUNT (759.84).

Form C: XO Communications, Transaction ID: D520303. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, Date, and a summary table for FEDERAL SHARE (35.33), NONFEDERAL SHARE (132.89), and TOTAL AMOUNT (168.22).

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for SUBTOTAL: FEDERAL SHARE 719.90, NONFEDERAL SHARE 2708.16, TOTAL AMOUNT 3428.06.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Summary table for TOTAL: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) Transaction ID : D521106
XO Communications
Mailing Address PO Box 828618
City Philadelphia State PA Zip Code 19182-8618
Purpose of Disbursement: Phone Service
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative [checked] Fundraising [ ] Exempt [ ]
Voter Drive [ ] Direct Candidate Support [ ]
Public Comm (ref to party only) by PAC [ ]
Allocated Activity or Event Year-To-Date 198902.51
Date 02 / 25 / 2014
FEDERAL SHARE 37.05 + NONFEDERAL SHARE 139.38 = TOTAL AMOUNT 176.43

B. Full Name (Last, First, Middle Initial) Transaction ID : D520720
Visa Cardmember Services
Mailing Address PO Box 790408
City Saint Louis State MO Zip Code 63179
Purpose of Disbursement: Airfare
Activity or Event Identifier: 2014 HHH-Mondale Dinner
Allocated Activity or Event: Administrative [ ] Fundraising [checked] Exempt [ ]
Voter Drive [ ] Direct Candidate Support [ ]
Public Comm (ref to party only) by PAC [ ]
Allocated Activity or Event Year-To-Date 74635.00
Date 02 / 07 / 2014
FEDERAL SHARE 762.00 + NONFEDERAL SHARE 254.00 = TOTAL AMOUNT 1016.00

C. Full Name (Last, First, Middle Initial) Transaction ID : D520721
ELIZABETH FOR MA INC
Mailing Address PO BOX 290568
City BOSTON State MA Zip Code 02129
Purpose of Disbursement: Airfare for HHH/Mondale Dinner
Activity or Event Identifier: 2014 HHH-Mondale Dinner
[MEMO ITEM]
Allocated Activity or Event: Administrative [ ] Fundraising [checked] Exempt [ ]
Voter Drive [ ] Direct Candidate Support [ ]
Public Comm (ref to party only) by PAC [ ]
Allocated Activity or Event Year-To-Date 74635.00
Date 01 / 29 / 2014
FEDERAL SHARE 762.00 + NONFEDERAL SHARE 254.00 = TOTAL AMOUNT 1016.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 799.05, 393.38, 1192.43

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [ ], [ ], [ ]

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: H4

Transaction ID : D520721

1/29/2014 Delta Airlines, PO Box 20706, Atlanta, GA 30320, Airfare for HHH/Mondale Dinner, \$1016.00

Form/Schedule:

Transaction ID:

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Cardmember Service-Drake Bank. Transaction ID: D520732. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and a summary table for FEDERAL SHARE (592.69), NONFEDERAL SHARE (2229.62), and TOTAL AMOUNT (2822.31).

Form B: Adobe Systems. Transaction ID: D520741. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and a summary table for FEDERAL SHARE (11.30), NONFEDERAL SHARE (42.50), and TOTAL AMOUNT (53.80).

Form C: Apple-iTunes Store. Transaction ID: D520739. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and a summary table for FEDERAL SHARE (79.10), NONFEDERAL SHARE (297.56), and TOTAL AMOUNT (376.66).

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for SUBTOTAL: FEDERAL SHARE (592.69), NONFEDERAL SHARE (2229.62), TOTAL AMOUNT (2822.31).

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Summary table for TOTAL: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Micro Center. Transaction ID: D520742. Allocated Activity or Event: Administrative. Date: 01/09/2014. Purpose: Computer Equipment. Activity Identifier: Administrative. Summary: FEDERAL SHARE 278.88, NONFEDERAL SHARE 1049.14, TOTAL AMOUNT 1328.02.

Form B: MSFT On Line. Transaction ID: D520737. Allocated Activity or Event: Administrative. Date: 01/06/2014. Purpose: Online Backup Server. Activity Identifier: Administrative. Summary: FEDERAL SHARE 136.88, NONFEDERAL SHARE 514.95, TOTAL AMOUNT 651.83.

Form C: Solera Event Center. Transaction ID: D520735. Allocated Activity or Event: Administrative. Date: 01/03/2014. Purpose: Food- Public Meet & Greet- Party Officers. Activity Identifier: Administrative. Summary: FEDERAL SHARE 84.00, NONFEDERAL SHARE 316.00, TOTAL AMOUNT 400.00.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: (empty), (empty), (empty).



SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: St Cloud Times. Transaction ID: D520738. Allocated Activity: Administrative. Date: 01/08/2014. Amounts: FEDERAL SHARE 2.52, NONFEDERAL SHARE 9.48, TOTAL AMOUNT 12.00.

Form B: Empty form for disbursement entry.

Form C: Empty form for disbursement entry.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE (0.00), NONFEDERAL SHARE (0.00), TOTAL AMOUNT (0.00).

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE (80347.99), NONFEDERAL SHARE (122685.72), TOTAL AMOUNT (203033.71).