

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

The Mesabi Fund

ADDRESS (number and street)

P.O. Box 77693

☐Check if different
than previously
reported. (ACC)

Washington

DC

20013

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00437129

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
Quarterly 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 (12G)

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

01

01

2009

through

01

31

2009

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

Wade S. Williams

Signature of Treasurer

Electronically Filed by Wade S. Williams

Date

02

20

2009

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

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
The Mesabi Fund

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	1	0	1	2	0	0	9

To:

M	M	D	D	Y	Y	Y	Y
0	1	3	1	2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2009		32470.09
(b) Cash on Hand at Beginning of Reporting Period	32470.09	
(c) Total Receipts (from Line 19)	10796.25	10796.25
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	43266.34	43266.34
7. Total Disbursements (from Line 31)	19776.87	19776.87
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	23489.47	23489.47
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name
The Mesabi Fund

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

To:

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	9

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	2000.00	2000.00
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	2000.00	2000.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	8796.25	8796.25
(c) Other Political Committees (such as PACs)	10796.25	10796.25
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	10796.25	10796.25
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	10796.25	10796.25

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) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
(i) Federal Share.....		
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	19776.87	19776.87
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	19776.87	19776.87
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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	0.00	0.00
(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))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	19776.87	19776.87
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	19776.87	19776.87

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)	10796.25	10796.25
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10796.25	10796.25
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	19776.87	19776.87
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	19776.87	19776.87

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

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

FOR LINE NUMBER: PAGE 6 / 13

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

The Mesabi Fund

A.

Full Name (Last, First, Middle Initial)

Owner-Operator Independent Drivers Association Inc PAC

Mailing Address 1101 30th Street NW
Suite 300

City State Zip Code
Washington DC 20007

FEC ID number of contributing
federal political committee.

C C00236778

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 2 / 2 0 0 9

Transaction ID: 4968402

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Outdoor Advertising Association of America

Mailing Address 1850 M Street NW
Suite 1040

City State Zip Code
Washington DC 20036

FEC ID number of contributing
federal political committee.

C C00045781

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 9 / 2 0 0 9

Transaction ID: 4968408

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

American Airlines Political Action Committee

Mailing Address 1101 17th Street NW
Suite 600

City State Zip Code
Washington DC 20036

FEC ID number of contributing
federal political committee.

C C00107300

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 9 / 2 0 0 9

Transaction ID: 4968409

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

3000.00

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 7 / 13

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Mesabi Fund

A.

Full Name (Last, First, Middle Initial)

Oldcastle Materials Inc. PAC

Mailing Address 101 Constitution Avenue
600 W

City State Zip Code
Washington DC 20001

FEC ID number of contributing
federal political committee.

C C00346353

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 9 / 2 0 0 9

Transaction ID: 4968410

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

American Maritime Officers Voluntary Political Action Fund

Mailing Address 2 W. Dixie Highway

City State Zip Code
Dania Beach FL 33004

FEC ID number of contributing
federal political committee.

C C00027532

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 9 / 2 0 0 9

Transaction ID: 4968411

Amount of Each Receipt this Period

2500.00

C.

Full Name (Last, First, Middle Initial)

BNSF Rail PAC

Mailing Address PO Box 961039

City State Zip Code
Fort Worth TX 76161

FEC ID number of contributing
federal political committee.

C C00235739

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 9 / 2 0 0 9

Transaction ID: 4968412

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

4500.00

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 8 / 13

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Mesabi Fund

A.

Full Name (Last, First, Middle Initial)
HNTB Holdings LTD. Political Action Committee

Mailing Address 715 Kirk Drive

City State Zip Code
Kansas City MO 64105

FEC ID number of contributing
federal political committee.

C C00386029

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 9 / 2 0 0 9

Transaction ID: 4968413

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)
United Parcel Service INC. PAC

Mailing Address 55 Glenlake Parkway N.E.

City State Zip Code
Atlanta GA 30328

FEC ID number of contributing
federal political committee.

C C00064766

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 5 / 2 0 0 9

Transaction ID: 4994823

Amount of Each Receipt this Period

200.00

(In-Kind) Inkind Contribu-
tion: Facility Usage

C.

Full Name (Last, First, Middle Initial)
United Parcel Service INC. PAC

Mailing Address 55 Glenlake Parkway N.E.

City State Zip Code
Atlanta GA 30328

FEC ID number of contributing
federal political committee.

C C00064766

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.25

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 5 / 2 0 0 9

Transaction ID: 4994824

Amount of Each Receipt this Period

96.25

(In-Kind) Inkind Contribu-
tion: Catering Expense

SUBTOTAL of Receipts This Page (optional)

1296.25

TOTAL This Period (last page this line number only)

8796.25

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

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

FOR LINE NUMBER: PAGE 9 / 13

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Mesabi Fund

A.

Full Name (Last, First, Middle Initial)

E. C. Houghton, Jr.

Mailing Address 414 Executive Center Blvd.
Suite 205

City State Zip Code
El Paso TX 79902

FEC ID number of contributing
federal political committee.

C

Name of Employer
Houghton Financial Partne-
rs, LLC

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 9 / 2 0 0 9

Transaction ID: 4968406

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

John A. Devierno

Mailing Address 9417 Byeforde Rd.

City State Zip Code
Kensington MD 20895

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cadeaux & Taglieri, P.C.

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 9 / 2 0 0 9

Transaction ID: 4968407

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

2000.00

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)

PAGE 10 / 13

<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)
The Mesabi Fund

A.

Full Name (Last, First, Middle Initial)
Francesca Cox

Mailing Address The Wakem Group
1532 Brookhaven Drive

City McLean State VA Zip Code 22101

Purpose of Disbursement
Mesabi Fund Consulting/Fundraising
Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 4890955

Date of Disbursement

01 / 05 / 2009

Amount of Each Disbursement this Period

3850.00

Mesabi Fund Consulting/Fu-
ndraising

B.

Full Name (Last, First, Middle Initial)
Francesca Cox

Mailing Address The Wakem Group
1532 Brookhaven Drive

City McLean State VA Zip Code 22101

Purpose of Disbursement
Mesabi Fundraising Compensation
Candidate Name

003
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 4890956

Date of Disbursement

01 / 05 / 2009

Amount of Each Disbursement this Period

6680.00

Mesabi Fundraising Compen-
sation

C.

Full Name (Last, First, Middle Initial)
Honeywell

Mailing Address 101 Constitution Avenue., NW
Suite 500 West

City Washington State DC Zip Code 20001

Purpose of Disbursement
Room Rental for Mesabi Fund Christmas Party
Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 4915303

Date of Disbursement

01 / 13 / 2009

Amount of Each Disbursement this Period

280.00

Room Rental for Mesabi Fu-
nd Christmas Party

SUBTOTAL of Disbursements This Page (optional)

10810.00

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)

PAGE 11 / 13

<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)
The Mesabi Fund

A. Full Name (Last, First, Middle Initial) Business Card	Transaction ID: 4948452 Date of Disbursement																				
Mailing Address P.O. Box 15710	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	7		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	7		2	0	0	9												
City Wilmington State DE Zip Code 19886 Purpose of Disbursement Credit Card Payment (See Memo Entries) Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>8</td><td>4</td><td>5</td><td>0</td><td>.</td><td>6</td><td>2</td> </tr> </table>	8	4	5	0	.	6	2													
8	4	5	0	.	6	2															
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	001 Category/ Type Credit Card Payment (See Memo Entries)																				
B. Full Name (Last, First, Middle Initial) Occasions Caterers	Transaction ID: 4948453 Date of Disbursement																				
Mailing Address 5458 3rd Street NE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	7		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	7		2	0	0	9												
City Washington State DC Zip Code 20011 Purpose of Disbursement Mesabi Fund Catering Expense Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>8</td><td>4</td><td>0</td><td>0</td><td>.</td><td>4</td><td>3</td> </tr> </table>	8	4	0	0	.	4	3													
8	4	0	0	.	4	3															
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Mesabi Fund Catering Expe- nse																				
C. Full Name (Last, First, Middle Initial) Homestead Technologies	Transaction ID: 4948454 Date of Disbursement																				
Mailing Address 3375 Edison Way	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	7		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	7		2	0	0	9												
City Menlo Park State CA Zip Code 94025 Purpose of Disbursement Mesabi Fund Website Maintenance fee Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>2</td><td>4</td><td>.</td><td>9</td><td>9</td> </tr> </table>	2	4	.	9	9															
2	4	.	9	9																	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Mesabi Fund Website Maint- enance fee																				

SUBTOTAL of Disbursements This Page (optional)

8450.62

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)

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<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)
The Mesabi Fund

A. Full Name (Last, First, Middle Initial) USPS	Transaction ID: 4948461 Date of Disbursement																				
Mailing Address 50 Massachusetts Ave NE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	7		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	7		2	0	0	9												
City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period																				
Purpose of Disbursement Mailing for Mesabi Fund Candidate Name	<table border="1"> <tr> <td colspan="10">25.20</td> </tr> </table>	25.20																			
25.20																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] Mailing for Mesabi Fund																				
B. Full Name (Last, First, Middle Initial) ASAP Printing & Graphics	Transaction ID: 4948462 Date of Disbursement																				
Mailing Address 2805 Mount Vernon Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	7		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	7		2	0	0	9												
City Alexandria State VA Zip Code 22301	Amount of Each Disbursement this Period																				
Purpose of Disbursement Mesabi Fund Posters (Invoice # 12417) Candidate Name	<table border="1"> <tr> <td colspan="10">220.00</td> </tr> </table>	220.00																			
220.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Mesabi Fund Posters (Invoice # 12417)																				
C. Full Name (Last, First, Middle Initial) United Parcel Service INC. PAC	Transaction ID: 4994825 Date of Disbursement																				
Mailing Address 55 Glenlake Parkway N.E.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	0	9												
City Atlanta State GA Zip Code 30328	Amount of Each Disbursement this Period																				
Purpose of Disbursement Inkind Contribution: Facility Usage Candidate Name United Parcel Service INC. PAC	<table border="1"> <tr> <td colspan="10">200.00</td> </tr> </table>	200.00																			
200.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Inkind Contribution: Facility Usage																				

SUBTOTAL of Disbursements This Page (optional)

420.00

TOTAL This Period (last page this line number only)

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

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FOR LINE NUMBER:
(check only one)

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<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)
The Mesabi Fund

A.

Full Name (Last, First, Middle Initial)
United Parcel Service INC. PAC

Mailing Address 55 Glenlake Parkway N.E.

City Atlanta State GA Zip Code 30328

Purpose of Disbursement
Inkind Contribution: Catering Expense

Candidate Name
United Parcel Service INC. PAC

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 4994826

Date of Disbursement

/ /

Amount of Each Disbursement this Period

96.25

Category/
Type

Inkind Contribution: Catering Expense

SUBTOTAL of Disbursements This Page (optional)

96.25

TOTAL This Period (last page this line number only)

19776.87