

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

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Ellison for Congress

ADDRESS (number and street)

PO Box 6072

Check if different
than previously
reported. (ACC)

Minneapolis

MN

55406

2. FEC IDENTIFICATION NUMBER ▼

C

C00422410

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

MN

05

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y
01 / 01 / 2014

through

M M / D D / Y Y Y Y
03 / 31 / 2014

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 Carla Kjellberg

Signature of Treasurer

Carla Kjellberg

[Electronically Filed]

Date

M M / D D / Y Y Y Y
04 / 15 / 2014

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 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 222

Write or Type Committee Name

Ellison for Congress

Report Covering the Period:

From:

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

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	287949.62	1197323.82
(b) Total Contribution Refunds (from Line 20(d))	80.00	1625.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	287869.62	1195698.82
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	201846.15	882906.58
(b) Total Offsets to Operating Expenditures (from Line 14).....	83.60	6768.98
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	201762.55	876137.60
8. Cash on Hand at Close of Reporting Period (from Line 27).....	229460.28	
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	

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 222

Write or Type Committee Name

Ellison for Congress

Report Covering the Period:

From:

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

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	4

I. RECEIPTS**COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date**11. CONTRIBUTIONS (other than loans) FROM:****(a) Individuals/Persons Other Than Political Committees****(i) Itemized (use Schedule A).....**

124008.00

546732.14

(ii) Unitemized.....

140441.62

477147.43

(iii) TOTAL of contributions from individuals ▶

264449.62

1023879.57

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

23500.00

173444.25

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

287949.62

1197323.82

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:**(a) Made or Guaranteed by the Candidate.....**

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

83.60

6768.98

15. OTHER RECEIPTS (Dividends, Interest, etc.)

9.55

31.31

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

288042.77

1204124.11

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 222

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	201846.15	882906.58
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	80.00	1125.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	80.00	1625.00
21. OTHER DISBURSEMENTS	20281.00	205172.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	222207.15	1089703.58

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	163624.66
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	288042.77
25. SUBTOTAL (add Line 23 and Line 24).....	451667.43
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	222207.15
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	229460.28

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

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

FOR LINE NUMBER:

PAGE 5 OF 222

(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Catharine T. Abbott

Mailing Address **6566 France Ave S**
Apt 308

City **Edina** State **MN** Zip Code **55435-1710**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		11		2014

Transaction ID : VN8A3CC8GK2

Amount of Each Receipt this Period

100.00

B. Full Name (Last, First, Middle Initial)
Moutaz Abdeen

Mailing Address **7222 Deavers Run Ct**

City **Springfield** State **VA** Zip Code **22152-3506**

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

Name of Employer **Reflection Dental** Occupation **DDS**

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		21		2014

Transaction ID : VN8A3CEZFH6

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)
Raied Abdullah

Mailing Address **13557 Turnberry Ln**

City **Orland Park** State **IL** Zip Code **60467-1073**

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

Name of Employer **Rush University Medical Center** Occupation **Pediatric Cardiologists**

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		07		2014

Transaction ID : VN8A3CJHMR0

Amount of Each Receipt this Period

100.00

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

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

300.00

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

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

FOR LINE NUMBER:

PAGE 6 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

Rosalind S Abernathy

A.

Mailing Address 2701 Pickett Rd

Apt 2044

City

Durham

State

NC

Zip Code

27705-5649

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		26		2014

Transaction ID : VN8A3CA48W1

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

Rosalind S Abernathy

B.

Mailing Address 2701 Pickett Rd

Apt 2044

City

Durham

State

NC

Zip Code

27705-5649

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		25		2014

Transaction ID : VN8A3CFDPY7

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

Mustafa Abuelhija

C.

Mailing Address 454 Washington Ave

City

Cliffside Park

State

NJ

Zip Code

07010-1812

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pilot Boy Productions

Occupation

Producer

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		27		2014

Transaction ID : VN8A3C3CZ88

Amount of Each Receipt this Period

300.00

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

650.00

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

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

Hassan Ahmad**A.**

Mailing Address 2 Argonne Farm Dr

City

Bridgewater

State

NJ

Zip Code

08807-1477

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ahmad Naqvi Rodriguez LLP

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		27		2014

Transaction ID : VN8A3C3BAD5

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

Hassan Ahmad**B.**

Mailing Address 2 Argonne Farm Dr

City

Bridgewater

State

NJ

Zip Code

08807-1477

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ahmad Naqvi Rodriguez LLP

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2014

Transaction ID : VN8A3C6RJM8

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Fazal M Ahmed**C.**

Mailing Address 30-04 72nd St

City

Jackson Heights

State

NY

Zip Code

11370

FEC ID number of contributing
federal political committee.

C

Name of Employer

Saint John's Riverside Hospital

Occupation

Medical Doctor

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

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

Transaction ID : VN8A3C6VKZ9

Amount of Each Receipt this Period

250.00

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

1150.00

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

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Helal U Ahmed

Mailing Address 3122 78th St

City	State	Zip Code
East Elmhurst	NY	11370-1827

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

Name of Employer	Occupation
Bangladesh Islamic Center of Arlington	President

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

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

Transaction ID : VN8A3C6VKS2

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
Mohi Ahmed

Mailing Address 3142 75th St

City	State	Zip Code
East Elmhurst	NY	11370-1806

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

Name of Employer	Occupation
Time Warner Cable	Systems Engineer

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		06		2014

Transaction ID : VN8A3C6RB39

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)
Moiz Ahmed

Mailing Address 257 Oradell Ave

City	State	Zip Code
Paramus	NJ	07652-4808

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

Name of Employer	Occupation
Dr. Habeeb Rahman	Physician

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		31		2014

Transaction ID : VN8A3C3VWD2

Amount of Each Receipt this Period

500.00

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

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

1250.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

Nazneen Ahmed

Mailing Address 9N789 Old Mill Ct

City

Elgin

State

IL

Zip Code

60124-8318

FEC ID number of contributing
federal political committee.

C

Name of Employer

Presence Medical Group

Occupation

Physician

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		10		2014

Transaction ID : VN8A3CC3B94

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Kathleen S Ahrens

Mailing Address 4229 Garfield Ave

City

Minneapolis

State

MN

Zip Code

55409-1858

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

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

Transaction ID : VN8A3CCB5F1

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

Kathleen S Ahrens

Mailing Address 4229 Garfield Ave

City

Minneapolis

State

MN

Zip Code

55409-1858

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		06		2014

Transaction ID : VN8A3CBD6M7

Amount of Each Receipt this Period

100.00

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

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

800.00

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

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

FOR LINE NUMBER:

PAGE 11 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

Hussain Al-Darsani

A.

Mailing Address 1668 N San Gabriel Rd

City

Upland

State

CA

Zip Code

91784-2505

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		19		2014

Transaction ID : VN8A3CEBHS8

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Bilal Ali

B.

Mailing Address 9487 Marshall Rd

City

Eden Prairie

State

MN

Zip Code

55347-4197

FEC ID number of contributing
federal political committee.

C

Name of Employer

MN Heart Clinic

Occupation

MD

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		10		2014

Transaction ID : VN8A3CC3EJ1

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Naji Almontaser

C.

Mailing Address 719 Westminster Rd

City

Brooklyn

State

NY

Zip Code

11230-2401

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hilton Hotels

Occupation

Real Estate Professional

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2014

Transaction ID : VN8A3C6RBH9

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).....

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

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

FOR LINE NUMBER:

PAGE 12 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Ali Alnajjar

Mailing Address 628 N Azusa Ave

City Covina	State CA	Zip Code 91722-3505
----------------	-------------	------------------------

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

Name of Employer Planet Stereo	Occupation Owner
-----------------------------------	---------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 19 / 2014

Transaction ID : VN8A3CEBHR0

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
Effie K Ambler

Mailing Address 883 Lakepointe St

City Grosse Pointe Park	State MI	Zip Code 48230-1707
----------------------------	-------------	------------------------

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

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

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 28 / 2014

Transaction ID : VN8A3CG3BY5

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)
Bassam A Amin

Mailing Address 334 84th St

City Brooklyn	State NY	Zip Code 11209-4407
------------------	-------------	------------------------

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

Name of Employer Wychoff Corner Pharmacy	Occupation Owner
---	---------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt

M M / D D / Y Y Y Y
02 / 06 / 2014

Transaction ID : VN8A3C6RF29

Amount of Each Receipt this Period

250.00

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

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

850.00

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

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

FOR LINE NUMBER:

PAGE 13 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Mahmoud Amin

Mailing Address 968 Kenfield Ave

City	State	Zip Code
Los Angeles	CA	90049-1405

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

Name of Employer	Occupation
Self	Investor

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		11		2014

Transaction ID : VN8A3CC7MV6

Amount of Each Receipt this Period

2000.00

B. Full Name (Last, First, Middle Initial)
Reza Amin

Mailing Address 10734 Lindbrook Dr

City	State	Zip Code
Los Angeles	CA	90024-3102

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

Name of Employer	Occupation
Giant Video	Owner

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		20		2014

Transaction ID : VN8A3CEKPK3

Amount of Each Receipt this Period

2500.00

C. Full Name (Last, First, Middle Initial)
Jamal Anaim

Mailing Address PO Box 5849
 Ste 201

City	State	Zip Code
Buena Park	CA	90622-5849

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

Name of Employer	Occupation
Solutions Healthcare Marketing	CEO

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		12		2014

Transaction ID : VN8A3CCS4R8

Amount of Each Receipt this Period

1500.00

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

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

6000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 14 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for CongressFull Name (Last, First, Middle Initial)
A. Allen Anderson

Mailing Address 2120 31st Ave S

City	State	Zip Code
Minneapolis	MN	55406-1421

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allen Anderson Garage DoorsOccupation
Owner

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		11		2014

Transaction ID : VN8A3CCBWD4

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)
B. Grace B Anderson

Mailing Address 131 N Jefferson St

City	State	Zip Code
Bloomington	IN	47408-4153

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

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

Transaction ID : VN8A3C7J131

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)
C. Grace B Anderson

Mailing Address 131 N Jefferson St

City	State	Zip Code
Bloomington	IN	47408-4153

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		03		2014

Transaction ID : VN8A3CAZY3

Amount of Each Receipt this Period

35.00

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

385.00

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

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

FOR LINE NUMBER:

PAGE 15 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Julie J Anderson

Mailing Address 119 Chestnut St W

City Stillwater	State MN	Zip Code 55082-4958
--------------------	-------------	------------------------

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

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

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		19		2014

Transaction ID : VN8A3CEE683

Amount of Each Receipt this Period

2600.00

B. Full Name (Last, First, Middle Initial)
Julie J Anderson

Mailing Address 119 Chestnut St W

City Stillwater	State MN	Zip Code 55082-4958
--------------------	-------------	------------------------

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

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

Receipt For: 2014
☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date
 5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		19		2014

Transaction ID : VN8A3CEE6D2

Amount of Each Receipt this Period

2600.00

C. Full Name (Last, First, Middle Initial)
Aziz A Ansari

Mailing Address 1511 Mya Ct

City Naperville	State IL	Zip Code 60565-1763
--------------------	-------------	------------------------

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

Name of Employer Loyola University	Occupation Physician
---------------------------------------	-------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		10		2014

Transaction ID : VN8A3CC3B11

Amount of Each Receipt this Period

250.00

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

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

5450.00

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

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

FOR LINE NUMBER:

PAGE 16 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

Farid Ansari

A.

Mailing Address 978 Plainfield St

City

Johnston

State

RI

Zip Code

02919-6735

FEC ID number of contributing
federal political committee.

C

Name of Employer

State of Rhode Island

Occupation

Shift Coordinator

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

370.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 06 2014

Transaction ID : VN8A3BVT2G4

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

Farid Ansari

B.

Mailing Address 978 Plainfield St

City

Johnston

State

RI

Zip Code

02919-6735

FEC ID number of contributing
federal political committee.

C

Name of Employer

State of Rhode Island

Occupation

Shift Coordinator

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

405.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 01 2014

Transaction ID : VN8A3CCB1Z9

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

Farid Ansari

C.

Mailing Address 978 Plainfield St

City

Johnston

State

RI

Zip Code

02919-6735

FEC ID number of contributing
federal political committee.

C

Name of Employer

State of Rhode Island

Occupation

Shift Coordinator

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

430.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 06 2014

Transaction ID : VN8A3C6QVD3

Amount of Each Receipt this Period

25.00

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

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

85.00

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

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

FOR LINE NUMBER:

PAGE 17 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial) Farid Ansari		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>06</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	03		06		2014
M M	/	D D	/	Y Y Y Y									
03		06		2014									
Mailing Address 978 Plainfield St		Transaction ID : VN8A3CBCWE7											
City Johnston	State RI	Zip Code 02919-6735											
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div>25.00</div>											
Name of Employer State of Rhode Island	Occupation Shift Coordinator												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div>455.00</div>												
B. Full Name (Last, First, Middle Initial) Farid Ansari		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>31</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	03		31		2014
M M	/	D D	/	Y Y Y Y									
03		31		2014									
Mailing Address 978 Plainfield St		Transaction ID : VN8A3CJHSR2											
City Johnston	State RI	Zip Code 02919-6735											
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div>35.00</div>											
Name of Employer State of Rhode Island	Occupation Shift Coordinator												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div>490.00</div>												
C. Full Name (Last, First, Middle Initial) Arshad Anwar		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>07</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	02		07		2014
M M	/	D D	/	Y Y Y Y									
02		07		2014									
Mailing Address 5224 3rd Ave		Transaction ID : VN8A3C6VP03											
City Brooklyn	State NY	Zip Code 11220-1756											
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div>250.00</div>											
Name of Employer Advanced Medical	Occupation MD												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div>250.00</div>												
SUBTOTAL of Receipts This Page (optional).....		<div>310.00</div>											
TOTAL This Period (last page this line number only).....		<div></div>											

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

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

FOR LINE NUMBER:

PAGE 18 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

Hammad Aziz

A.

Mailing Address 2601 Moutray Ln

City

North Aurora

State

IL

Zip Code

60542-2116

FEC ID number of contributing
federal political committee.

C

Name of Employer
North Aurora SmilesOccupation
Dentist

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

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

Transaction ID : VN8A3C9H4Q4

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Zaher Azzawi

B.

Mailing Address 6028 Vineyard Ave

City

Alta Loma

State

CA

Zip Code

91701-2746

FEC ID number of contributing
federal political committee.

C

Name of Employer
Inland Empire Extra CareOccupation
Physician

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		11		2014

Transaction ID : VN8A3CJN749

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Azzam Baker

C.

Mailing Address 2 Eckert Farm Rd

City

Saddle River

State

NJ

Zip Code

07458-2522

FEC ID number of contributing
federal political committee.

C

Name of Employer
Riverside PediatricsOccupation
Doctor

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		06		2014

Transaction ID : VN8A3C6RMS1

Amount of Each Receipt this Period

2500.00

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

3750.00

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

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

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

FOR LINE NUMBER:

PAGE 19 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

Virginia H Baker

A.

Mailing Address 1716 Bath St

Apt 3

City

Santa Barbara

State

CA

Zip Code

93101-2965

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		01		2014

Transaction ID : VN8A3CJHK18

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Virginia H Baker

B.

Mailing Address 1716 Bath St

Apt 3

City

Santa Barbara

State

CA

Zip Code

93101-2965

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		26		2014

Transaction ID : VN8A3CFKV48

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Sara P Barrow

C.

Mailing Address 8440 Westbend Rd

City

Minneapolis

State

MN

Zip Code

55427-3315

FEC ID number of contributing
federal political committee.

C

Name of Employer

Northwest Area Foundation

Occupation

Program Director

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		17		2014

Transaction ID : VN8A3CE3MW5

Amount of Each Receipt this Period

250.00

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

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

450.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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PAGE 20 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

Anne Barry**A.**

Mailing Address PO Box 701

City

Chilmark

State

MA

Zip Code

02535-0701

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		19		2014

Transaction ID : VN8A3CEE1S7

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

Farook G Begawala**B.**

Mailing Address 4269 Main St

City

Flushing

State

NY

Zip Code

11355-4721

FEC ID number of contributing
federal political committee.

C

Name of Employer

Muslim Center of New York

Occupation

Executive Board Director

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		18		2014

Transaction ID : VN8A3C8SNE8

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Les W Bendtsen**C.**

Mailing Address 4629 13th Ave S

City

Minneapolis

State

MN

Zip Code

55407-3557

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ameriprise Financial

Occupation

Marketing Manager

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		19		2014

Transaction ID : VN8A3CEDYW5

Amount of Each Receipt this Period

250.00

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

550.00

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

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Scott A Benson

Mailing Address 3814 W Calhoun Pkwy

City

Minneapolis

State

MN

Zip Code

55410-1171

FEC ID number of contributing
federal political committee.

C

Name of Employer

Briel & Associated

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		19		2014

Transaction ID : VN8A3CEDXW2

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Barry Berg

Mailing Address 600 S 2nd St

604

City

Minneapolis

State

MN

Zip Code

55401-2143

FEC ID number of contributing
federal political committee.

C

Name of Employer

Coldwell Banker Burnet

Occupation

Realtor

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2014

Transaction ID : VN8A3CG4SW7

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Dale L Berry

Mailing Address 840 Austin Ave

City

Grants

State

NM

Zip Code

87020-3307

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

207.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		06		2014

Transaction ID : VN8A3CBD7E0

Amount of Each Receipt this Period

32.00

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

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

532.00

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

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

FOR LINE NUMBER:

PAGE 22 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Dale L Berry

Mailing Address 840 Austin Ave

City	State	Zip Code
Grants	NM	87020-3307

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

Name of Employer	Occupation
Retired	Retired

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 242.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		24		2014

Transaction ID : VN8A3CF76A5

Amount of Each Receipt this Period

35.00

B. Full Name (Last, First, Middle Initial)
Esther Beynon

Mailing Address 2560 Hill Cir

City	State	Zip Code
Colorado Springs	CO	80904-1111

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

Name of Employer	Occupation
Self-Employed	Attorney

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 500.00

Date of Receipt

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

Transaction ID : VN8A3C75CP3

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)
Abdul A Bhuiyan

Mailing Address 301 Covert Ave

City	State	Zip Code
New Hyde Park	NY	11040-5436

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

Name of Employer	Occupation
Self	Business

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 1750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		28		2014

Transaction ID : VN8A3C3DWE8

Amount of Each Receipt this Period

750.00

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

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

1285.00

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

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

FOR LINE NUMBER:

PAGE 23 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

Owen Bieber

Mailing Address 901 Amber Ridge Dr SW

City

Byron Center

State

MI

Zip Code

49315-9796

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		06		2014

Transaction ID : VN8A3CBD947

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

Cora Biernat

Mailing Address 3839 Hart Blvd
Apt 313

City

Minneapolis

State

MN

Zip Code

55421-4141

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

370.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		29		2014

Transaction ID : VN8A3C3P9H2

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

Cora Biernat

Mailing Address 3839 Hart Blvd
Apt 313

City

Minneapolis

State

MN

Zip Code

55421-4141

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

470.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		06		2014

Transaction ID : VN8A3CBD3S0

Amount of Each Receipt this Period

100.00

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

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

170.00

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

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

FOR LINE NUMBER:

PAGE 24 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial) Cora Biernat		Date of Receipt M M / D D / Y Y Y Y 03 / 27 / 2014	
Mailing Address 3839 Hart Blvd Apt 313		Transaction ID : VN8A3CG16S1	
City Minneapolis	State MN	Zip Code 55421-4141	Amount of Each Receipt this Period 100.00
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)	Election Cycle-to-Date 570.00		
B. Full Name (Last, First, Middle Initial) Muhammad M Billah		Date of Receipt M M / D D / Y Y Y Y 02 / 06 / 2014	
Mailing Address 18306 Dalny Rd		Transaction ID : VN8A3C6R7V9	
City Jamaica	State NY	Zip Code 11432-2465	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Franklin Hospital	Occupation MD		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		
C. Full Name (Last, First, Middle Initial) David A Bjork		Date of Receipt M M / D D / Y Y Y Y 03 / 19 / 2014	
Mailing Address 1900 Mount Curve Ave		Transaction ID : VN8A3CEDX76	
City Minneapolis	State MN	Zip Code 55403-1020	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Integrated Healthcare Strategies	Occupation Senior Vice President		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		
SUBTOTAL of Receipts This Page (optional).....		600.00	
TOTAL This Period (last page this line number only).....			

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 25 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

John Blanchard**A.**

Mailing Address 32111 Eastlady Dr

City

Beverly Hills

State

MI

Zip Code

48025-3738

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		14		2014

Transaction ID : VN8A3CJHPH0

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

James Blume**B.**

Mailing Address 23 Vicente Rd

City

Berkeley

State

CA

Zip Code

94705-1603

FEC ID number of contributing
federal political committee.

C

Name of Employer

Blume Capital

Occupation

Inv. Adv.

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

219.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		14		2014

Transaction ID : VN8A3BXQEK3

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

Cleo J. Bohne**C.**

Mailing Address 516 4th St N

City

New Ulm

State

MN

Zip Code

56073-1706

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2014

Transaction ID : VN8A3CCB391

Amount of Each Receipt this Period

100.00

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

175.00

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

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

FOR LINE NUMBER:

PAGE 26 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial) Cleo J. Bohne		Date of Receipt M M / D D / Y Y Y Y 03 / 19 / 2014	
Mailing Address 516 4th St N		Transaction ID : VN8A3CEE1J2	
City New Ulm	State MN	Zip Code 56073-1706	Amount of Each Receipt this Period _____ 50.00
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)	Election Cycle-to-Date _____ 550.00		
B. Full Name (Last, First, Middle Initial) Cleo J. Bohne		Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2014	
Mailing Address 516 4th St N		Transaction ID : VN8A3CG6DP1	
City New Ulm	State MN	Zip Code 56073-1706	Amount of Each Receipt this Period _____ 50.00
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)	Election Cycle-to-Date _____ 600.00		
C. Full Name (Last, First, Middle Initial) Amer Boukai		Date of Receipt M M / D D / Y Y Y Y 03 / 19 / 2014	
Mailing Address 2 Palma Vly		Transaction ID : VN8A3CEBJ92	
City Trabuco Canyon	State CA	Zip Code 92679-4736	Amount of Each Receipt this Period _____ 1500.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer CFM, Inc.	Occupation President		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1500.00		
SUBTOTAL of Receipts This Page (optional).....		_____ 1600.00	
TOTAL This Period (last page this line number only).....		_____	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

Jeffrey Brooks

Mailing Address 3716 39th Ave S

City

Minneapolis

State

MN

Zip Code

55406-2841

FEC ID number of contributing
federal political committee.

C

Name of Employer

Murphy Warehouse Co.

Occupation

Truck Driver

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2014

Transaction ID : VN8A3CBP980

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

Rodney BrownMailing Address 95 Lexington Pkwy S
Apt 108

City

Saint Paul

State

MN

Zip Code

55105-2731

FEC ID number of contributing
federal political committee.

C

Name of Employer

Magic STAR

Occupation

CEO

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

335.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2014

Transaction ID : VN8A3CJHT13

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

Jerry A BurgMailing Address 1325 W 27th St
Apt 312

City

Minneapolis

State

MN

Zip Code

55408-1157

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		17		2014

Transaction ID : VN8A3CE3C15

Amount of Each Receipt this Period

250.00

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

325.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 29 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial) Jerry A Burg		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>22</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	03		22		2014
M M M	/	D D D	/	Y Y Y Y Y Y									
03		22		2014									
Mailing Address 1325 W 27th St Apt 312		Transaction ID : VN8A3CF2DX1											
City Minneapolis	State MN	Zip Code 55408-1157	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>100.00</td> </tr> </table>						100.00				
					100.00								
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)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>600.00</td> </tr> </table>								600.00				
					600.00								
B. Full Name (Last, First, Middle Initial) Linda Padou Burkett		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>05</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	03		05		2014
M M M	/	D D D	/	Y Y Y Y Y Y									
03		05		2014									
Mailing Address 3136 Fremont Ave S		Transaction ID : VN8A3CB83T7											
City Minneapolis	State MN	Zip Code 55408-2724	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>400.00</td> </tr> </table>						400.00				
					400.00								
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)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>800.00</td> </tr> </table>								800.00				
					800.00								
C. Full Name (Last, First, Middle Initial) Sheryl Butrymowicz		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>25</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	02		25		2014
M M M	/	D D D	/	Y Y Y Y Y Y									
02		25		2014									
Mailing Address 2830 Aquila Ave S		Transaction ID : VN8A3CA44Z5											
City Saint Louis Park	State MN	Zip Code 55426-2952	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>250.00</td> </tr> </table>						250.00				
					250.00								
FEC ID number of contributing federal political committee. C													
Name of Employer Self	Occupation Forensic Accountant												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>250.00</td> </tr> </table>								250.00				
					250.00								
SUBTOTAL of Receipts This Page (optional).....		<table border="1"> <tr> <td colspan="5"></td> <td>750.00</td> </tr> </table>							750.00				
					750.00								
TOTAL This Period (last page this line number only).....		<table border="1"> <tr> <td colspan="5"></td> <td></td> </tr> </table>											

Diagram illustrating the layout of the 15 numbered boxes on the table. The boxes are arranged in two rows. The top row contains boxes 11a, 11b, 11c, and 11d. The bottom row contains boxes 12, 13a, 13b, 14, and 15. Box 11a is marked with an 'X'.

NAME OF COMMITTEE (In Full)
Ellison for Congress

FEC Schedule A (Form 3) (Revised 02/2009)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial) Richard Carlbom		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>11</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	03		11		2014
M M M	/	D D D	/	Y Y Y Y Y									
03		11		2014									
Mailing Address 305 Dayton Ave Apt 1		Transaction ID : VN8A3CC95V9											
City Saint Paul	State MN	Zip Code 55102-1876											
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00											
Name of Employer United Strategies	Occupation Owner												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00												
B. Full Name (Last, First, Middle Initial) Azfar Chak		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>06</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	02		06		2014
M M M	/	D D D	/	Y Y Y Y Y									
02		06		2014									
Mailing Address 75 Azalea St		Transaction ID : VN8A3C6RNB3											
City Paramus	State NJ	Zip Code 07652-1946											
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00											
Name of Employer Self employed	Occupation Physician												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00												
C. Full Name (Last, First, Middle Initial) Mohammad Chaudry		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>06</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	02		06		2014
M M M	/	D D D	/	Y Y Y Y Y									
02		06		2014									
Mailing Address PO Box 124		Transaction ID : VN8A3C6RN97											
City Basking Ridge	State NJ	Zip Code 07920-0124											
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00											
Name of Employer School of Business-Camden Rutgers	Occupation Lecturer												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00												
SUBTOTAL of Receipts This Page (optional).....		1000.00											
TOTAL This Period (last page this line number only).....													

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

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

FOR LINE NUMBER:

PAGE 32 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Muhammad M Chaudry

Mailing Address 4653 Dempster St

City	State	Zip Code
Skokie	IL	60076-2042

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Islamic Food and Nutrition Council

Occupation
Food Scientist

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		10		2014

Transaction ID : VN8A3CC3A42

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
Saad A Chaudry

Mailing Address 7256 N Kilpatrick Ave

City	State	Zip Code
Lincolnwood	IL	60712-1604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Business Owner

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		10		2014

Transaction ID : VN8A3CC3D06

Amount of Each Receipt this Period

450.00

C. Full Name (Last, First, Middle Initial)
Hammad S Choudhry

Mailing Address 35 Juniper St

City	State	Zip Code
Jersey City	NJ	07305-4827

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Physician

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2014

Transaction ID : VN8A3C6RHC2

Amount of Each Receipt this Period

300.00

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

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

1750.00

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

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

FOR LINE NUMBER: PAGE 33 OF 222

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial) Junmun Choudhury		Date of Receipt M M / D D / Y Y Y Y 01 / 27 / 2014
Mailing Address 25135 Grand Central Pkwy		Transaction ID : VN8A3C3CYN0 Amount of Each Receipt this Period _____ 250.00
City Little Neck	State NY	
Zip Code 11362-2313		
FEC ID number of contributing federal political committee. C _____		
Name of Employer Mount Sinai School of Medicine	Occupation Physician	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00	

B. Full Name (Last, First, Middle Initial) Adnan Chowdhury		Date of Receipt M M / D D / Y Y Y Y 02 / 06 / 2014
Mailing Address 293 Hudson St		Transaction ID : VN8A3C6RJV3 Amount of Each Receipt this Period _____ 300.00
City Hackensack	State NJ	
Zip Code 07601-6732		
FEC ID number of contributing federal political committee. C _____		
Name of Employer Novaglobe	Occupation Analytics Practice Lead	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 300.00	

C. Full Name (Last, First, Middle Initial) Syedur R Chowdury		Date of Receipt M M / D D / Y Y Y Y 02 / 06 / 2014
Mailing Address 50 North Dr		Transaction ID : VN8A3C6RFB0 Amount of Each Receipt this Period _____ 250.00
City New Hyde Park	State NY	
Zip Code 11040-2255		
FEC ID number of contributing federal political committee. C _____		
Name of Employer Queens Hospital	Occupation MD	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00	

SUBTOTAL of Receipts This Page (optional).....	_____ 800.00
TOTAL This Period (last page this line number only).....	_____

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial) Neil Clark		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>06</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	03		06		2014
M M M	/	D D D	/	Y Y Y Y Y									
03		06		2014									
Mailing Address 6711 Lake Shore Dr S Apt 1204		Transaction ID : VN8A3CBCKE9											
City Richfield	State MN	Zip Code 55423-5307	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>55.00</td> </tr> </table>						55.00				
					55.00								
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>215.00</td> </tr> </table>							215.00				
					215.00								
Name of Employer Retired	Occupation Retired												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>215.00</td> </tr> </table>								215.00				
					215.00								

B. Full Name (Last, First, Middle Initial) Alfred W Coleman Jr		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>18</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	03		18		2014
M M M	/	D D D	/	Y Y Y Y Y									
03		18		2014									
Mailing Address 4898 Hamlet Way N		Transaction ID : VN8A3CE7YC2											
City Oakdale	State MN	Zip Code 55128-3352	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>250.00</td> </tr> </table>						250.00				
					250.00								
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>250.00</td> </tr> </table>							250.00				
					250.00								
Name of Employer Coleman-Adams Construction	Occupation Co-owner												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>250.00</td> </tr> </table>								250.00				
					250.00								

C. Full Name (Last, First, Middle Initial) Eileen F Collard		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>15</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	02		15		2014
M M M	/	D D D	/	Y Y Y Y Y									
02		15		2014									
Mailing Address 4412 47th Ave S		Transaction ID : VN8A3C8N451											
City Minneapolis	State MN	Zip Code 55406-3623	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>100.00</td> </tr> </table>						100.00				
					100.00								
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>550.00</td> </tr> </table>							550.00				
					550.00								
Name of Employer Retired	Occupation Retired												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>550.00</td> </tr> </table>								550.00				
					550.00								

SUBTOTAL of Receipts This Page (optional).....	<table border="1"> <tr> <td colspan="5"></td> <td>405.00</td> </tr> </table>						405.00
					405.00		
TOTAL This Period (last page this line number only).....	<table border="1"> <tr> <td colspan="5"></td> <td></td> </tr> </table>						

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Eileen F Collard

Mailing Address 4412 47th Ave S

City Minneapolis	State MN	Zip Code 55406-3623
---------------------	-------------	------------------------

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

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

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		05		2014

Transaction ID : VN8A3CB83Z6

Amount of Each Receipt this Period

100.00

B. Full Name (Last, First, Middle Initial)
Eileen F Collard

Mailing Address 4412 47th Ave S

City Minneapolis	State MN	Zip Code 55406-3623
---------------------	-------------	------------------------

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

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

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Transaction ID : VN8A3CGJAN2

Amount of Each Receipt this Period

50.00

C. Full Name (Last, First, Middle Initial)
Shirley A Conn

Mailing Address 4636 Cedar Lake Rd S
Apt 3

City Minneapolis	State MN	Zip Code 55416-3770
---------------------	-------------	------------------------

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

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

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		07		2014

Transaction ID : VN8A3CBP9P0

Amount of Each Receipt this Period

250.00

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

400.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 36 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for CongressFull Name (Last, First, Middle Initial)
A. Scott Cooper

Mailing Address 2168 Carroll Ave

City	State	Zip Code
Saint Paul	MN	55104-5042

FEC ID number of contributing
federal political committee.

C

Name of Employer
RE-AMP NetworkOccupation
Nonprofit executive

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		09		2014

Transaction ID : VN8A3CBZF41

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)
B. Daniel M Cramer

Mailing Address 1910 Hampshire Ave

City	State	Zip Code
Saint Paul	MN	55116-2403

FEC ID number of contributing
federal political committee.

C

Name of Employer
Grassroots SolutionsOccupation
Co-Founder

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		11		2014

Transaction ID : VN8A3CCADZ5

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)
C. Sheila CrowleyMailing Address 1400 S Joyce St
Apt 733

City	State	Zip Code
Arlington	VA	22202-1830

FEC ID number of contributing
federal political committee.

C

Name of Employer
National Low Income Housing CoalitionOccupation
President

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2014

Transaction ID : VN8A3CA7Z29

Amount of Each Receipt this Period

250.00

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

1000.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

J. Michael Dady

A.

Mailing Address 1415 Summit Ave

City

Saint Paul

State

MN

Zip Code

55105-2240

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dady & Garner, P.A.Occupation
Lawyer

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		11		2014

Transaction ID : VN8A3CCAP93

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

John S. Dahler

B.

Mailing Address 1602 Mississippi River Blvd S

City

Saint Paul

State

MN

Zip Code

55116-1825

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2014

Transaction ID : VN8A3CFD696

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

Fran J Davis

C.

Mailing Address 1512 Douglas Ave

City

Minneapolis

State

MN

Zip Code

55403-2805

FEC ID number of contributing
federal political committee.

C

Name of Employer
Coldwell Banker BurnetOccupation
Sales Manager/REALTOR

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2014

Transaction ID : VN8A3CGMRD5

Amount of Each Receipt this Period

500.00

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

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

950.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

Jeff C Dean

Mailing Address 3048 Lake Shore Dr

B

City

Minneapolis

State

MN

Zip Code

55416-4282

FEC ID number of contributing
federal political committee.

C

Name of Employer

Jeffrey Dean Law Office

Occupation

Attorney

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		19		2014

Transaction ID : VN8A3CEDY11

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

Betty Z Deane

Mailing Address 5800 Saint Croix Ave N

Apt W303

City

Minneapolis

State

MN

Zip Code

55422-4756

FEC ID number of contributing
federal political committee.

C

Name of Employer

NA

Occupation

Retired

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		10		2014

Transaction ID : VN8A3CC0W38

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Mary Charlotte Decker

Mailing Address PO Box 1307

City

Jacksonville

State

TX

Zip Code

75766-1307

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		13		2014

Transaction ID : VN8A3BXM5S9

Amount of Each Receipt this Period

200.00

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

750.00

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

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial) Eve Deikel		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>17</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	01		17		2014
M M	/	D D	/	Y Y Y Y									
01		17		2014									
Mailing Address 1485 Waterford Dr		Transaction ID : VN8A3CCAXD8											
City Golden Valley	State MN	Zip Code 55422-4274											
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div>50.00</div>											
Name of Employer Eve Events	Occupation Owner												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div>250.00</div>												

B. Full Name (Last, First, Middle Initial) Eve Deikel		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>14</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	02		14		2014
M M	/	D D	/	Y Y Y Y									
02		14		2014									
Mailing Address 1485 Waterford Dr		Transaction ID : VN8A3CCB5W4											
City Golden Valley	State MN	Zip Code 55422-4274											
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div>50.00</div>											
Name of Employer Eve Events	Occupation Owner												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div>300.00</div>												

C. Full Name (Last, First, Middle Initial) Eve Deikel		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>14</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	03		14		2014
M M	/	D D	/	Y Y Y Y									
03		14		2014									
Mailing Address 1485 Waterford Dr		Transaction ID : VN8A3CJHP56											
City Golden Valley	State MN	Zip Code 55422-4274											
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div>50.00</div>											
Name of Employer Eve Events	Occupation Owner												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div>350.00</div>												

SUBTOTAL of Receipts This Page (optional).....		<div>150.00</div>	
TOTAL This Period (last page this line number only).....		<div></div>	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Mohamed Diab

Mailing Address 10820 62nd Dr
Apt 5H

City Forest Hills State NY Zip Code 11375-1212

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

Name of Employer EmblemHealth Occupation Medical Management

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		06		2014

Transaction ID : VN8A3C6RN22

Amount of Each Receipt this Period

300.00

B. Full Name (Last, First, Middle Initial)
Emil L Dika

Mailing Address 3312 Warner Ln

City Mound State MN Zip Code 55364-9262

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

Name of Employer MTS Systems Corp Occupation Engineer -- computers

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		18		2014

Transaction ID : VN8A3C923S0

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
Bruce E Dittman

Mailing Address 13462 Kimberly St

City Southgate State MI Zip Code 48195-2421

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

Name of Employer Ford Motor Co. Occupation Electrician

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		26		2014

Transaction ID : VN8A3CFM1Y7










Amount of Each Receipt this Period

100.00

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

650.00

FOR LINE NUMBER:
(check only one)


 11a
 
 11b
 
 11c
 
 11d
 
 12
 
 13a
 
 13b
 
 14
 
 15

NAME OF COMMITTEE (In Full)
Ellison for Congress

750.00

A horizontal bar with a value of 100.00. The bar is light gray with a darker gray border. It has 10 small square markers along its top and bottom edges. The value "100.00" is displayed in black text at the right end of the bar.

500.00

500.00

2000.00

1000.00

1600.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Bethany A. Dusenberry

Mailing Address 3930 River Fls

City

San Antonio

State

TX

Zip Code

78259-3649

FEC ID number of contributing
federal political committee.

C

Name of Employer

Canta Support Services

Occupation

Registered Nurse

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

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

Transaction ID : VN8A3CCB5H7

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Patrice Eddy

Mailing Address 1707 Stevens Ave
Apt 106

City

Minneapolis

State

MN

Zip Code

55403-3857

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hennepin County

Occupation

Lawyer

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		30		2014

Transaction ID : VN8A3C3PVP9

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Patrice Eddy

Mailing Address 1707 Stevens Ave
Apt 106

City

Minneapolis

State

MN

Zip Code

55403-3857

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hennepin County

Occupation

Lawyer

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		28		2014

Transaction ID : VN8A3CAJFX4

Amount of Each Receipt this Period

100.00

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

300.00

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

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

Patrice Eddy

Mailing Address 1707 Stevens Ave

Apt 106

City

Minneapolis

State

MN

Zip Code

55403-3857

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hennepin County

Occupation

Lawyer

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		30		2014

Transaction ID : VN8A3CGDAD7

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Stanley Efron

Mailing Address 1073 Cedar View Dr

City

Minneapolis

State

MN

Zip Code

55405-2108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Henson & Efron P.A.

Occupation

Attorney

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		06		2014

Transaction ID : VN8A3CBDGR8

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

Louise M Eichelberger

Mailing Address 1800 Emerald Trl SE

City

Willmar

State

MN

Zip Code

56201-4696

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

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

Transaction ID : VN8A3CCB4D3

Amount of Each Receipt this Period

100.00

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

350.00

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

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial) Wael Elkhalfawi		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>19</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	03		19		2014
M M	/	D D	/	Y Y Y Y									
03		19		2014									
Mailing Address 1759 Beloit Ave Apt 2		Transaction ID : VN8A3CEAYE0											
City Los Angeles	State CA	Zip Code 90025-4257	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="4"></td> <td>500.00</td> </tr> </table>					500.00					
				500.00									
FEC ID number of contributing federal political committee. C													
Name of Employer Cohen Pagano Accountancy	Occupation CPA												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="4"></td> <td>500.00</td> </tr> </table>							500.00					
				500.00									
B. Full Name (Last, First, Middle Initial) Osama A Elshafie		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>26</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	02		26		2014
M M	/	D D	/	Y Y Y Y									
02		26		2014									
Mailing Address 14 Wyndham Ct		Transaction ID : VN8A3CA7YN6											
City Oak Brook	State IL	Zip Code 60523-1620	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="4"></td> <td>500.00</td> </tr> </table>					500.00					
				500.00									
FEC ID number of contributing federal political committee. C													
Name of Employer Oakbrook Behavioral Health	Occupation Physician												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="4"></td> <td>500.00</td> </tr> </table>							500.00					
				500.00									
C. Full Name (Last, First, Middle Initial) Nancy B Engel		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>23</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	01		23		2014
M M	/	D D	/	Y Y Y Y									
01		23		2014									
Mailing Address 2027 Lenwood Dr SW		Transaction ID : VN8A3C2MJ66											
City Rochester	State MN	Zip Code 55902-1051	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="4"></td> <td>100.00</td> </tr> </table>					100.00					
				100.00									
FEC ID number of contributing federal political committee. C													
Name of Employer Homemaker	Occupation Homemaker												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="4"></td> <td>300.00</td> </tr> </table>							300.00					
				300.00									
SUBTOTAL of Receipts This Page (optional).....		<table border="1"> <tr> <td colspan="4"></td> <td>1100.00</td> </tr> </table>						1100.00					
				1100.00									
TOTAL This Period (last page this line number only).....		<table border="1"> <tr> <td colspan="4"></td> <td></td> </tr> </table>											

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Nancy B Engel

Mailing Address 2027 Lenwood Dr SW

City Rochester	State MN	Zip Code 55902-1051
-------------------	-------------	------------------------

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

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

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		27		2014

Transaction ID : VN8A3CHDWR4

Amount of Each Receipt this Period

100.00

B. Full Name (Last, First, Middle Initial)
Iraj Ershaghi

Mailing Address PO Box 3779

City Rolling Hills Estates	State CA	Zip Code 90274-9528
-------------------------------	-------------	------------------------

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

Name of Employer University of Southern California	Occupation Professor
---	-------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		18		2014

Transaction ID : VN8A3CE8XK0

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
Paul Estrin

Mailing Address 10511 Cedar Lake Rd
Apt 418

City Minnetonka	State MN	Zip Code 55305-3340
--------------------	-------------	------------------------

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

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

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		10		2014

Transaction ID : VN8A3CC0QA4

Amount of Each Receipt this Period

35.00

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

1135.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

Nancy Eustis

A.

Mailing Address 825 Summit Ave

Apt 601

City

Minneapolis

State

MN

Zip Code

55403-3185

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		17		2014

Transaction ID : VN8A3CCAX55

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Nancy Eustis

B.

Mailing Address 825 Summit Ave

Apt 601

City

Minneapolis

State

MN

Zip Code

55403-3185

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2014

Transaction ID : VN8A3CGZ972

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

Edward L Farmer

C.

Mailing Address 147 Cecil St SE

City

Minneapolis

State

MN

Zip Code

55414-3610

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2014

Transaction ID : VN8A3CBP8Z8

Amount of Each Receipt this Period

500.00

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

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

620.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

Lois Fitzgerald

A.

Mailing Address 1296 Pinewood Dr

City

Pittsburgh

State

PA

Zip Code

15243-1851

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		17		2014

Transaction ID : VN8A3CCAX96

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

Lois Fitzgerald

B.

Mailing Address 1296 Pinewood Dr

City

Pittsburgh

State

PA

Zip Code

15243-1851

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

240.00

Date of Receipt

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

Transaction ID : VN8A3CCB714

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

Robert A. Flaten

C.

Mailing Address 5008 90th St E

City

Northfield

State

MN

Zip Code

55057-4349

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		10		2014

Transaction ID : VN8A3CC0Y42

Amount of Each Receipt this Period

100.00

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

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

140.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Susan Guion Flygare
 Mailing Address 5322 Russell Ave S

City State Zip Code
 Minneapolis MN 55410-2542

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Retired

Occupation
 Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
 03 10 2014

Transaction ID : VN8A3CC0VM0

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
Barbara Louise Forster
 Mailing Address 901 S 2nd St
 Unit 603

City State Zip Code
 Minneapolis MN 55415-2119

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Retired

Occupation
 Retired

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

4600.00

Date of Receipt

M M / D D / Y Y Y Y
 03 06 2014

Transaction ID : VN8A3CBCM76

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
Barbara Louise Forster
 Mailing Address 901 S 2nd St
 Unit 603

City State Zip Code
 Minneapolis MN 55415-2119

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Retired

Occupation
 Retired

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5120.00

Date of Receipt

M M / D D / Y Y Y Y
 03 31 2014

Transaction ID : VN8A3CH1HW9

Amount of Each Receipt this Period

20.00

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

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

1270.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Barbara Louise Forster

Mailing Address 901 S 2nd St
Unit 603

City Minneapolis State MN Zip Code 55415-2119

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date
5120.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2014

Transaction ID : VN8A3CH1JP4

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
David Armour Foster

Mailing Address 1901 E River Pkwy

City Minneapolis State MN Zip Code 55414-3675

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

Name of Employer Blue Green Alliance Occupation Executive Director

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		11		2014

Transaction ID : VN8A3CCAP02

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
Bruce Franck

Mailing Address 215 Oak Grove St
Apt 1812

City Minneapolis State MN Zip Code 55403-3360

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

Name of Employer Wells Fargo Home Mortgage Occupation Human Resources Business Partner

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		15		2014

Transaction ID : VN8A3CDY6X4

Amount of Each Receipt this Period

500.00

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

1250.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

Morris Friedell**A.**

Mailing Address 1017 Cedar St

City

Berkeley

State

CA

Zip Code

94710-1522

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2014

Transaction ID : VN8A3CFD1E6

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

James Friend**B.**

Mailing Address 1223 Holly Ave N

City

Oakdale

State

MN

Zip Code

55128-6027

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		11		2014

Transaction ID : VN8A3CCBXG0

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

Michael Furuta**C.**

Mailing Address 1438 W Balmoral Ave

City

Chicago

State

IL

Zip Code

60640-1202

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		29		2014

Transaction ID : VN8A3C3PAR0

Amount of Each Receipt this Period

50.00

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

350.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

Michael Furuta**A.**

Mailing Address 1438 W Balmoral Ave

City

Chicago

State

IL

Zip Code

60640-1202

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		24		2014

Transaction ID : VN8A3CHDVR3

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

James E Gabrielson**B.**

Mailing Address 11585 Riverview Rd NE

City

Hanover

State

MN

Zip Code

55341-4025

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		06		2014

Transaction ID : VN8A3CBCFX8

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Edward Gavin**C.**

Mailing Address 3188 Laughead Ln

City

Garnet Valley

State

PA

Zip Code

19060-2018

FEC ID number of contributing
federal political committee.

C

Name of Employer

Gavin Corporation

Occupation

Professional

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		22		2014

Transaction ID : VN8A3CF2MC3

Amount of Each Receipt this Period

500.00

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

1060.00

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

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
LaDale K George
 Mailing Address 939 N Oak Park Ave

City State Zip Code
 Oak Park IL 60302-1323

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Neal, Gerber, Eisenberg

Occupation
 Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
 03 10 2014

Transaction ID : VN8A3CC3DF5

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
Lily Ghafouri
 Mailing Address 9919 Anthony Pl

City State Zip Code
 Beverly Hills CA 90210-2001

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Self

Occupation
 Dentist

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
 03 11 2014

Transaction ID : VN8A3CC87N8

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
Earl W Giddings
 Mailing Address 612 N Webster Cir E

City State Zip Code
 Kankakee IL 60901-2752

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Retired

Occupation
 Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

175.00

Date of Receipt

M M / D D / Y Y Y Y
 03 11 2014

Transaction ID : VN8A3CC8JC0

Amount of Each Receipt this Period

35.00

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

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

535.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Earl W Giddings
 Mailing Address 612 N Webster Cir E

City State Zip Code
 Kankakee IL 60901-2752

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Retired

Occupation
 Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

210.00

Date of Receipt

M M / D D / Y Y Y Y
 03 24 2014

Transaction ID : VN8A3CHEQX2

Amount of Each Receipt this Period

35.00

B. Full Name (Last, First, Middle Initial)
Clifton W. Gray
 Mailing Address 3032 43rd Ave S

City State Zip Code
 Minneapolis MN 55406-2247

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Retired

Occupation
 Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M / D D / Y Y Y Y
 03 26 2014

Transaction ID : VN8A3CFJZR7

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)
Ronald Greene
 Mailing Address 1210 19th Ave NE

City State Zip Code
 Minneapolis MN 55418-4604

FEC ID number of contributing
federal political committee.

C

Name of Employer
 University Of Mn

Occupation
 Professor

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

290.00

Date of Receipt

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

Transaction ID : VN8A3CCB7S4

Amount of Each Receipt this Period

25.00

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

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

160.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Maureen Hackett

Mailing Address 4919 Arlington Dr

City

Minnetonka

State

MN

Zip Code

55343-8762

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Forensic Psychiatrist

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		27		2014

Transaction ID : VN8A3CG0NG4

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Anees Hafeez

Mailing Address 42275 Chatterton Ct

City

Northville

State

MI

Zip Code

48168-2095

FEC ID number of contributing
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		21		2014

Transaction ID : VN8A3CEZFP6

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Bassel Haffar

Mailing Address 16851 Tamarind Ct

City

Chino Hills

State

CA

Zip Code

91709-6510

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mike Haffar Insurance

Occupation

President

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		19		2014

Transaction ID : VN8A3CEAY33

Amount of Each Receipt this Period

500.00

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

1250.00

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

✕	11a		11b		11c		11d		
	12		13a		13b		14		15

NAME OF COMMITTEE (In Full)
Ellison for Congress

50.00

50.00

50.00

A diagram of a rectangular box with a grid of 10 columns and 4 rows. The top row is shaded gray. The first column is labeled '1' and the second column is labeled '2'. The bottom row is labeled '4'.

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Nina Hale Full Name (Last, First, Middle Initial) Mailing Address 2432 Colfax Ave S City Minneapolis State MN Zip Code 55405-2941 FEC ID number of contributing federal political committee. C Name of Employer Nina Hale, Inc. Occupation Founder & CEO Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 300.00		Date of Receipt M M / D D / Y Y Y Y 01 / 31 / 2014 Transaction ID : VN8A3C3VKH5 Amount of Each Receipt this Period 250.00
B. Ayman Hammous Full Name (Last, First, Middle Initial) Mailing Address 88 Kensington Ave City Staten Island State NY Zip Code 10305-3604 FEC ID number of contributing federal political committee. C Name of Employer Muslim American Society Occupation Board of Trustees Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 250.00		Date of Receipt M M / D D / Y Y Y Y 02 / 07 / 2014 Transaction ID : VN8A3C6VMK7 Amount of Each Receipt this Period 250.00
C. Carl Hanson Full Name (Last, First, Middle Initial) Mailing Address 701 Ridgcrest Dr SE City Albuquerque State NM Zip Code 87108-3366 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) Election Cycle-to-Date 250.00		Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2014 Transaction ID : VN8A3CEKHW4 Amount of Each Receipt this Period 100.00
SUBTOTAL of Receipts This Page (optional).....		600.00
TOTAL This Period (last page this line number only).....		

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

John Harens

Mailing Address 1201 Yale Pl

Apt 1603

City

Minneapolis

State

MN

Zip Code

55403-1959

FEC ID number of contributing
federal political committee.

C

Name of Employer

Harens Mediation Center, LLC

Occupation

Attorney

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		13		2014

Transaction ID : VN8A3C8CD74

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Nile Harper

Mailing Address 1437 Glacier Ln NE

City

Minneapolis

State

MN

Zip Code

55421-1330

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		06		2014

Transaction ID : VN8A3CBCT79

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Robert Harrington

Mailing Address 2551 38th Ave NE

Unit 113

City

Minneapolis

State

MN

Zip Code

55421-5006

FEC ID number of contributing
federal political committee.

C

Name of Employer

Signature Consultants

Occupation

Account Manager

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		24		2014

Transaction ID : VN8A3CCAYS6

Amount of Each Receipt this Period

25.00

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

625.00

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

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial) Robert Harrington		Date of Receipt M M / D D / Y Y Y Y 03 / 01 / 2014	
Mailing Address 2551 38th Ave NE Unit 113		Transaction ID : VN8A3CJHMB9	
City Minneapolis	State MN	Zip Code 55421-5006	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer Signature Consultants	Occupation Account Manager		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 325.00		
B. Full Name (Last, First, Middle Initial) Robert Harrington		Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2014	
Mailing Address 2551 38th Ave NE Unit 113		Transaction ID : VN8A3CJHMC7	
City Minneapolis	State MN	Zip Code 55421-5006	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer Signature Consultants	Occupation Account Manager		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00		
C. Full Name (Last, First, Middle Initial) Asma Hasan		Date of Receipt M M / D D / Y Y Y Y 03 / 07 / 2014	
Mailing Address 2500 E Cherry Creek South Dr Apt 503		Transaction ID : VN8A3CJHN61	
City Denver	State CO	Zip Code 80209-3284	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer HealthTrio, LLC	Occupation Attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		
SUBTOTAL of Receipts This Page (optional).....		550.00	
TOTAL This Period (last page this line number only).....			

FOR LINE NUMBER:		PAGE 59 OF 222	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

NAME OF COMMITTEE (In Full)
Ellison for Congress

250.00

75.00

250.00

575.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Gayford L Hinton

Mailing Address 10613 Savoy Ct

City State Zip Code
Louisville KY 40223-2892

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		06		2014

Transaction ID : VN8A3CBKT57

Amount of Each Receipt this Period

100.00

B. Full Name (Last, First, Middle Initial)
Alan B Hooper

Mailing Address 387 Pelham Blvd
Apt A

City State Zip Code
Saint Paul MN 55104-5248

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

Name of Employer Occupation
Univ. MN Professor emeritus

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		12		2014

Transaction ID : VN8A3CCJ0V0

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)
Nanette Hoover

Mailing Address 2512 Ryan Ave E

City State Zip Code
North St Paul MN 55109-4036

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

Name of Employer Occupation
Hoover Consulting LLC Healthcare Consultant

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		10		2014

Transaction ID : VN8A3CC6QP4

Amount of Each Receipt this Period

500.00

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

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

1100.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Mohd A Hossain

Mailing Address **411 Brown Pl**

City New Hyde Park	State NY	Zip Code 11040-2903
------------------------------	--------------------	-------------------------------

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

Name of Employer Self-Employed	Occupation Doctor
--	-----------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

M M / D D / Y Y Y Y
02 / 06 / 2014

Transaction ID : VN8A3C6RF61

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
S. Aino M Husen

Mailing Address **2625 Boone Ave S**

City Saint Louis Park	State MN	Zip Code 55426-2431
---------------------------------	--------------------	-------------------------------

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

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

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 06 / 2014

Transaction ID : VN8A3CBM9N5

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)
Mohamed Faiyaz Hussain

Mailing Address **6816 Didrikson Ln**

City Woodridge	State IL	Zip Code 60517-1480
--------------------------	--------------------	-------------------------------

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

Name of Employer Grant Thornton	Occupation Attorney
---	-------------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt

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

Transaction ID : VN8A3C9SJ29

Amount of Each Receipt this Period

1000.00

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

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

1350.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial) Siful Islam		Date of Receipt M M / D D / Y Y Y Y 02 / 06 / 2014	
Mailing Address 8636 256th St		Transaction ID : VN8A3C6RG54	
City Floral Park	State NY	Zip Code 11001-1406	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer AIG	Occupation IT Project Manager		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		
B. Full Name (Last, First, Middle Initial) Syed Jafer		Date of Receipt M M / D D / Y Y Y Y 01 / 08 / 2014	
Mailing Address 3128 Harrison St		Transaction ID : VN8A3BWGJK4	
City Glenview	State IL	Zip Code 60025-4554	Amount of Each Receipt this Period 25.00
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)	Election Cycle-to-Date 650.00		
C. Full Name (Last, First, Middle Initial) Syed Jafer		Date of Receipt M M / D D / Y Y Y Y 01 / 21 / 2014	
Mailing Address 3128 Harrison St		Transaction ID : VN8A3C2DHC5	
City Glenview	State IL	Zip Code 60025-4554	Amount of Each Receipt this Period 25.00
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)	Election Cycle-to-Date 675.00		
SUBTOTAL of Receipts This Page (optional).....		300.00	
TOTAL This Period (last page this line number only).....			

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

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

FOR LINE NUMBER:

PAGE 63 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial) Syed Jafer		Date of Receipt M M / D D / Y Y Y Y 02 / 06 / 2014	
Mailing Address 3128 Harrison St		Transaction ID : VN8A3C6RJA9	
City Glenview	State IL	Zip Code 60025-4554	Amount of Each Receipt this Period _____ 25.00
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)	Election Cycle-to-Date _____ 700.00		
B. Full Name (Last, First, Middle Initial) Syed Jafer		Date of Receipt M M / D D / Y Y Y Y 02 / 19 / 2014	
Mailing Address 3128 Harrison St		Transaction ID : VN8A3C99GJ6	
City Glenview	State IL	Zip Code 60025-4554	Amount of Each Receipt this Period _____ 25.00
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)	Election Cycle-to-Date _____ 725.00		
C. Full Name (Last, First, Middle Initial) Syed Jafer		Date of Receipt M M / D D / Y Y Y Y 02 / 25 / 2014	
Mailing Address 3128 Harrison St		Transaction ID : VN8A3CA4317	
City Glenview	State IL	Zip Code 60025-4554	Amount of Each Receipt this Period _____ 25.00
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)	Election Cycle-to-Date _____ 750.00		
SUBTOTAL of Receipts This Page (optional).....		_____ 75.00	
TOTAL This Period (last page this line number only).....		_____	

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Syed Jafer

Mailing Address 3128 Harrison St

City

Glenview

State

IL

Zip Code

60025-4554

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

775.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		10		2014

Transaction ID : VN8A3CC3FE3

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Syed Jafer

Mailing Address 3128 Harrison St

City

Glenview

State

IL

Zip Code

60025-4554

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2014

Transaction ID : VN8A3CG6AZ5

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Irshad H Jafri

Mailing Address 857 Govern Cir

City

Eagan

State

MN

Zip Code

55123-2460

FEC ID number of contributing
federal political committee.

C

Name of Employer

Health Partners

Occupation

Physician

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		10		2014

Transaction ID : VN8A3CC4BW9

Amount of Each Receipt this Period

250.00

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

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

300.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Sheikh Jalaluddin

Mailing Address 8907 169th St

Apt 4B

City

Jamaica

State

NY

Zip Code

11432-5209

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Healthcare

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

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

Transaction ID : VN8A3C6VKH1

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Bilquis S Jaweed

Mailing Address 7602 Legendary Ln

City

West Chester

State

OH

Zip Code

45069-4603

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		24		2014

Transaction ID : VN8A3CHQEB2

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Rany Jazayerli

Mailing Address 3 Rucci Ct

City

Burr Ridge

State

IL

Zip Code

60527-5781

FEC ID number of contributing
federal political committee.

C

Name of Employer

Clear Skin Dermatology

Occupation

Dermatologist

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		10		2014

Transaction ID : VN8A3CC3D64

Amount of Each Receipt this Period

350.00

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

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

750.00

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

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

FOR LINE NUMBER:

PAGE 66 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Thomas R Joyce Jr

Mailing Address 1225 Lasalle Ave
 Apt 1307

City Minneapolis State MN Zip Code 55403-2331

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

Name of Employer Dorsey & Whitney Occupation Attorney

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 500.00

Date of Receipt

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

Transaction ID : VN8A3C67H61

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
Rahil Jummani

Mailing Address 8450 265th St

City Floral Park State NY Zip Code 11001-1134

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

Name of Employer NYU Langone Medical Center Occupation Physician

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		28		2014

Transaction ID : VN8A3C3ETH5

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
Harry P. Kamen

Mailing Address 910 Park Ave

City New York State NY Zip Code 10075-0277

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		02		2014

Transaction ID : VN8A3CCATV2

Amount of Each Receipt this Period

200.00

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

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

950.00

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

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

FOR LINE NUMBER:

PAGE 67 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial)

Imad Kamran

Mailing Address 6 Perry Ave

City

Menlo Park

State

CA

Zip Code

94025-6172

FEC ID number of contributing
federal political committee.

C

Name of Employer
EvercoreOccupation
Finance

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		06		2014

Transaction ID : VN8A3BVT2H2

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

Imad Kamran

Mailing Address 6 Perry Ave

City

Menlo Park

State

CA

Zip Code

94025-6172

FEC ID number of contributing
federal political committee.

C

Name of Employer
EvercoreOccupation
Finance

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		08		2014

Transaction ID : VN8A3BWEZ57

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

Imad Kamran

Mailing Address 6 Perry Ave

City

Menlo Park

State

CA

Zip Code

94025-6172

FEC ID number of contributing
federal political committee.

C

Name of Employer
EvercoreOccupation
Finance

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		24		2014

Transaction ID : VN8A3C2P7W1

Amount of Each Receipt this Period

100.00

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

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

200.00

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

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

FOR LINE NUMBER:

PAGE 68 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial)

Imad Kamran

Mailing Address 6 Perry Ave

City

Menlo Park

State

CA

Zip Code

94025-6172

FEC ID number of contributing
federal political committee.

C

Name of Employer
EvercoreOccupation
Finance

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		06		2014

Transaction ID : VN8A3C6QW78

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

Imad Kamran

Mailing Address 6 Perry Ave

City

Menlo Park

State

CA

Zip Code

94025-6172

FEC ID number of contributing
federal political committee.

C

Name of Employer
EvercoreOccupation
Finance

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

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

Transaction ID : VN8A3C6W7A7

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

Imad Kamran

Mailing Address 6 Perry Ave

City

Menlo Park

State

CA

Zip Code

94025-6172

FEC ID number of contributing
federal political committee.

C

Name of Employer
EvercoreOccupation
Finance

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1600.00

Date of Receipt

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

Transaction ID : VN8A3C9SN75

Amount of Each Receipt this Period

100.00

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

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

200.00

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

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

FOR LINE NUMBER:

PAGE 69 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial) Imad Kamran			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>06</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	03		06		2014
M M M	/	D D D	/	Y Y Y Y Y										
03		06		2014										
Mailing Address 6 Perry Ave			Transaction ID : VN8A3CBCXF8											
City	State	Zip Code												
Menlo Park	CA	94025-6172												
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">50.00</td> </tr> </table>		50.00									
50.00														
Name of Employer Evercore		Occupation Finance												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5">1650.00</td> </tr> </table>			1650.00									
1650.00														

B. Full Name (Last, First, Middle Initial) Imad Kamran			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>08</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	03		08		2014
M M M	/	D D D	/	Y Y Y Y Y										
03		08		2014										
Mailing Address 6 Perry Ave			Transaction ID : VN8A3CBXZW8											
City	State	Zip Code												
Menlo Park	CA	94025-6172												
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">50.00</td> </tr> </table>		50.00									
50.00														
Name of Employer Evercore		Occupation Finance												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5">1700.00</td> </tr> </table>			1700.00									
1700.00														

C. Full Name (Last, First, Middle Initial) Imad Kamran			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>24</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	03		24		2014
M M M	/	D D D	/	Y Y Y Y Y										
03		24		2014										
Mailing Address 6 Perry Ave			Transaction ID : VN8A3CF8XA3											
City	State	Zip Code												
Menlo Park	CA	94025-6172												
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">100.00</td> </tr> </table>		100.00									
100.00														
Name of Employer Evercore		Occupation Finance												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5">1800.00</td> </tr> </table>			1800.00									
1800.00														

SUBTOTAL of Receipts This Page (optional).....			<table border="1"> <tr> <td colspan="5">200.00</td> </tr> </table>		200.00				
200.00									
TOTAL This Period (last page this line number only).....			<table border="1"> <tr> <td colspan="5"></td> </tr> </table>						

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 70 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

Sharandeep Kaur

Mailing Address 1219 Thieriot Ave

City

Bronx

State

NY

Zip Code

10472-4713

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Physician

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2014

Transaction ID : VN8A3C8SMZ9

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Fazal Khan

Mailing Address 11090 18 Mile Rd

City

Sterling Heights

State

MI

Zip Code

48313-3207

FEC ID number of contributing
federal political committee.

C

Name of Employer

General dynamics

Occupation

Engineer

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		05		2014

Transaction ID : VN8A3CBA0H4

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

M. Adil Khan

Mailing Address 1512 Hammer Creek Ct

City

Naperville

State

IL

Zip Code

60563-2592

FEC ID number of contributing
federal political committee.

C

Name of Employer

DuPage Medical Group

Occupation

Physician

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		10		2014

Transaction ID : VN8A3CC3CV7

Amount of Each Receipt this Period

500.00

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

850.00

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

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

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

FOR LINE NUMBER:

PAGE 71 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Mohammed Khan

Mailing Address 5 Glacier Cir

City	State	Zip Code
South Barrington	IL	60010-1090

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

Name of Employer	Occupation
Alexian Brothers	Physician

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		10		2014

Transaction ID : VN8A3CC3BK3

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
Nahid Khan

Mailing Address 6732 Willow Ln

City	State	Zip Code
Brooklyn Ctr	MN	55430-1336

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

Name of Employer	Occupation
Unemployed	Unemployed

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		10		2014

Transaction ID : VN8A3CCA70

Amount of Each Receipt this Period

20.00

C. Full Name (Last, First, Middle Initial)
Nahid Khan

Mailing Address 6732 Willow Ln

City	State	Zip Code
Brooklyn Ctr	MN	55430-1336

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

Name of Employer	Occupation
Unemployed	Unemployed

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

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

Transaction ID : VN8A3CCB3V0

Amount of Each Receipt this Period

20.00

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

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

1040.00

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

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

FOR LINE NUMBER:

PAGE 72 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial)

Nahid Khan

Mailing Address 6732 Willow Ln

City

Brooklyn Ctr

State

MN

Zip Code

55430-1336

FEC ID number of contributing
federal political committee.

C

Name of Employer

Unemployed

Occupation

Unemployed

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2014

Transaction ID : VN8A3CJHM86

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

Sajjad Khan

Mailing Address 3026 Monet Dr

City

Sugar Land

State

TX

Zip Code

77479-1446

FEC ID number of contributing
federal political committee.

C

Name of Employer

direct energy

Occupation

commodities trader

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		01		2014

Transaction ID : VN8A3BV34P5

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Salman Khan

Mailing Address 612 Floyd St

City

Englewood Cliffs

State

NJ

Zip Code

07632-2053

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hyper-Tech Systems, Inc.

Occupation

President

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		27		2014

Transaction ID : VN8A3C3CX69

Amount of Each Receipt this Period

400.00

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

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

920.00

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

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

FOR LINE NUMBER:

PAGE 73 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Khaja Z. Khateeb

Mailing Address 724 Pascack Rd

City Paramus	State NJ	Zip Code 07652-4235
-----------------	-------------	------------------------

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

Name of Employer Thomas Drugs	Occupation Business Owner
----------------------------------	------------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 500.00

Date of Receipt

M M / D D / Y Y Y Y
02 / 06 / 2014

Transaction ID : VN8A3C6RMG0

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
Wanda Kittelson-Driver

Mailing Address 5041 37th Ave S

City Minneapolis	State MN	Zip Code 55417-1524
---------------------	-------------	------------------------

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

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

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 235.00

Date of Receipt

M M / D D / Y Y Y Y
02 / 18 / 2014

Transaction ID : VN8A3C8Z6A2

Amount of Each Receipt this Period

35.00

C. Full Name (Last, First, Middle Initial)
Carla Kjellberg

Mailing Address 5001 3rd Ave S

City Minneapolis	State MN	Zip Code 55419-1413
---------------------	-------------	------------------------

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

Name of Employer Self-Employed	Occupation Lawyer
-----------------------------------	----------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 650.00

Date of Receipt

M M / D D / Y Y Y Y
01 / 18 / 2014

Transaction ID : VN8A3C24RT0

Amount of Each Receipt this Period

50.00

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

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

585.00

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

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

FOR LINE NUMBER:

PAGE 74 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial)

Carla Kjellberg

Mailing Address 5001 3rd Ave S

City

Minneapolis

State

MN

Zip Code

55419-1413

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Lawyer

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2014

Transaction ID : VN8A3C8VEH3

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

Carla Kjellberg

Mailing Address 5001 3rd Ave S

City

Minneapolis

State

MN

Zip Code

55419-1413

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Lawyer

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		11		2014

Transaction ID : VN8A3CCAPF0

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

Carla Kjellberg

Mailing Address 5001 3rd Ave S

City

Minneapolis

State

MN

Zip Code

55419-1413

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Lawyer

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		18		2014

Transaction ID : VN8A3CER5Z2

Amount of Each Receipt this Period

50.00

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

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

150.00

FOR LINE NUMBER:
(check only one)

NAME OF COMMITTEE (In Full)
Ellison for Congress

2600.00

250.00

FOR LINE NUMBER:		PAGE 76 OF 222	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

NAME OF COMMITTEE (In Full)
Ellison for Congress

MM / DD / YYYY

C

250.00

250.00

MM / DD / YYYY

C

250.00

50.00

MM / DD / YYYY

C

200.00

100.00

400.00

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

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

FOR LINE NUMBER:

PAGE 77 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Merle Krause

Mailing Address 105 W Greensboro St

City Plains	State KS	Zip Code 67869-9757
----------------	-------------	------------------------

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

Name of Employer Self Employed	Occupation Farmer
-----------------------------------	----------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		26		2014

Transaction ID : VN8A3CFM0Y4

Amount of Each Receipt this Period

100.00

B. Full Name (Last, First, Middle Initial)
Janice Krinsky

Mailing Address 310 W Noyes St

City Arlington Heights	State IL	Zip Code 60005-3638
---------------------------	-------------	------------------------

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

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

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		07		2014

Transaction ID : VN8A3CBPR23

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)
Donna Taylor Krislov

Mailing Address 1718 Oliver Ave S

City Minneapolis	State MN	Zip Code 55405-2207
---------------------	-------------	------------------------

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

Name of Employer Self-Employed	Occupation Piano Teacher
-----------------------------------	-----------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Transaction ID : VN8A3CJHS94

Amount of Each Receipt this Period

40.00

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

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

240.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 78 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial) Ernest W Lampe		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>29</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	01		29		2014
M M M	/	D D D	/	Y Y Y Y Y									
01		29		2014									
Mailing Address 317 Groveland Ave Unit 503		Transaction ID : VN8A3C3PA76											
City Minneapolis	State MN	Zip Code 55403-3666											
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00											
Name of Employer Retired	Occupation Retired												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1100.00												

B. Full Name (Last, First, Middle Initial) Ernest W Lampe		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>14</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	02		14		2014
M M M	/	D D D	/	Y Y Y Y Y									
02		14		2014									
Mailing Address 317 Groveland Ave Unit 503		Transaction ID : VN8A3C8E6G5											
City Minneapolis	State MN	Zip Code 55403-3666											
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00											
Name of Employer Retired	Occupation Retired												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1200.00												

C. Full Name (Last, First, Middle Initial) LaJune Thomas Lange		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>18</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	02		18		2014
M M M	/	D D D	/	Y Y Y Y Y									
02		18		2014									
Mailing Address 1800 Humboldt Ave S		Transaction ID : VN8A3C8V5C4											
City Minneapolis	State MN	Zip Code 55403-2813											
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00											
Name of Employer Self-Employed	Occupation Attorney												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00												

SUBTOTAL of Receipts This Page (optional).....		1350.00	
TOTAL This Period (last page this line number only).....			

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

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

FOR LINE NUMBER:

PAGE 79 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
John E Larsen

Mailing Address 2002 W Lake Of The Isles Pkwy

City Minneapolis	State MN	Zip Code 55405-2438
---------------------	-------------	------------------------

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

Name of Employer Design 45, LLC	Occupation Residential Designer
------------------------------------	------------------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		27		2014

Transaction ID : VN8A3CFRMZ7

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
Leonard Leving

Mailing Address 935 Arbor Rd

City Menlo Park	State CA	Zip Code 94025-5023
--------------------	-------------	------------------------

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

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

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		07		2014

Transaction ID : VN8A3CCA VP6

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)
Steve R Lewis Jr.

Mailing Address 300 Wall St
 Unit 705

City Saint Paul	State MN	Zip Code 55101-2480
--------------------	-------------	------------------------

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

Name of Employer Self-Employed	Occupation Economist
-----------------------------------	-------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		23		2014

Transaction ID : VN8A3C9PW19

Amount of Each Receipt this Period

500.00

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

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

1100.00

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

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

FOR LINE NUMBER:

PAGE 80 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

James E Lindell

Mailing Address 53 4th Ave N

102

City

Minneapolis

State

MN

Zip Code

55401-3347

FEC ID number of contributing
federal political committee.

C

Name of Employer
selfOccupation
attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		08		2014

Transaction ID : VN8A3CBXB54

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Robert Lindstrom

Mailing Address 418 Chestnut St

City

Fremont

State

OH

Zip Code

43420-4216

FEC ID number of contributing
federal political committee.

C

Name of Employer
NoneOccupation
Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2014

Transaction ID : VN8A3CFD0D5

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

Dean Lund

Mailing Address 92 Orlin Ave SE

City

Minneapolis

State

MN

Zip Code

55414-3562

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2014

Transaction ID : VN8A3C99JZ2

Amount of Each Receipt this Period

100.00

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

250.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 81 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Merle Lustig

Mailing Address 307 Dickens Way

City Santa Cruz	State CA	Zip Code 95064-1065
--------------------	-------------	------------------------

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

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

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt

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

Transaction ID : VN8A3C72Q26

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
Charles P Lutz

Mailing Address 6022 Oliver Ave S

City Minneapolis	State MN	Zip Code 55419-2025
---------------------	-------------	------------------------

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

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

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		05		2014

Transaction ID : VN8A3CB9ZN5

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)
Janis Madkins

Mailing Address 362 W Calle Montero

City Sahuarita	State AZ	Zip Code 85629-8545
-------------------	-------------	------------------------

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

Name of Employer Self-Employed	Occupation Physician
-----------------------------------	-------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		26		2014

Transaction ID : VN8A3CFMPR3

Amount of Each Receipt this Period

100.00

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

700.00

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

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

FOR LINE NUMBER:

PAGE 82 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) Mohammed A Mahmood		Date of Receipt M M / D D / Y Y Y Y 02 / 06 / 2014
Mailing Address 1261 Broadway Rm 812		Transaction ID : VN8A3C6RS53
City New York	State NY	
Zip Code 10001-3522		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		
Name of Employer Self-Employed	Occupation CPA	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) Mohannad Malas		Date of Receipt M M / D D / Y Y Y Y 03 / 19 / 2014
Mailing Address 31591 Bluff Dr		Transaction ID : VN8A3CEBHK1
City Laguna Beach	State CA	
Zip Code 92651-8323		Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. C		
Name of Employer Dana Investments	Occupation President	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

Full Name (Last, First, Middle Initial) Khursheed A Mallick		Date of Receipt M M / D D / Y Y Y Y 02 / 01 / 2014
Mailing Address 810 73rd St		Transaction ID : VN8A3CCB1F3
City Downers Grove	State IL	
Zip Code 60516-3818		Amount of Each Receipt this Period 100.00
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)	Election Cycle-to-Date 200.00	

SUBTOTAL of Receipts This Page (optional).....	2850.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER:

PAGE 83 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial) Khursheed A Mallick		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>24</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	03		24		2014
M M M	/	D D D	/	Y Y Y Y Y									
03		24		2014									
Mailing Address 810 73rd St		Transaction ID : VN8A3CHQEM3											
City Downers Grove	State IL	Zip Code 60516-3818	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>250.00</td> </tr> </table>						250.00				
					250.00								
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>450.00</td> </tr> </table>							450.00				
					450.00								
Name of Employer Retired	Occupation Retired												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>450.00</td> </tr> </table>								450.00				
					450.00								

B. Full Name (Last, First, Middle Initial) Aftab Uddin Mannan		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>07</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	02		07		2014
M M M	/	D D D	/	Y Y Y Y Y									
02		07		2014									
Mailing Address 8512 Radnor St		Transaction ID : VN8A3C6VP36											
City Jamaica	State NY	Zip Code 11432-2326	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>250.00</td> </tr> </table>						250.00				
					250.00								
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>1250.00</td> </tr> </table>							1250.00				
					1250.00								
Name of Employer Jamaica Muslim Center	Occupation Secretary												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>1250.00</td> </tr> </table>								1250.00				
					1250.00								

C. Full Name (Last, First, Middle Initial) Kyle B Mansfield		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>31</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	03		31		2014
M M M	/	D D D	/	Y Y Y Y Y									
03		31		2014									
Mailing Address 250 Marquette Ave Ste 1200		Transaction ID : VN8A3CH1JZ5											
City Minneapolis	State MN	Zip Code 55401-1874	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>20.00</td> </tr> </table>						20.00				
					20.00								
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>1120.00</td> </tr> </table>							1120.00				
					1120.00								
Name of Employer Foley & Mansfield	Occupation Attorney												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>520.00</td> </tr> </table>								520.00				
					520.00								

SUBTOTAL of Receipts This Page (optional).....	<table border="1"> <tr> <td colspan="5"></td> <td>520.00</td> </tr> </table>						520.00
					520.00		
TOTAL This Period (last page this line number only).....	<table border="1"> <tr> <td colspan="5"></td> <td></td> </tr> </table>						

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 84 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

Seymour Mansfield

Mailing Address 2837 Sunset Blvd

City

Minneapolis

State

MN

Zip Code

55416-4232

FEC ID number of contributing
federal political committee.

C

Name of Employer

Foley & Mansfield

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		27		2014

Transaction ID : VN8A3CG0VP4

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Mary Ellen Marino

Mailing Address 9 Hornor Ln

City

Princeton

State

NJ

Zip Code

08540-3936

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

190.00

Date of Receipt

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

Transaction ID : VN8A3CCB4W1

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

Mary Ellen Marino

Mailing Address 9 Hornor Ln

City

Princeton

State

NJ

Zip Code

08540-3936

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

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

Transaction ID : VN8A3CCB529

Amount of Each Receipt this Period

10.00

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

270.00

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

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Mary Ellen Marino

Mailing Address 9 Hornor Ln

City State Zip Code
Princeton NJ 08540-3936

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

Name of Employer Occupation
Not Employed Not Employed

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		14		2014

Transaction ID : VN8A3CJHPT2

Amount of Each Receipt this Period

10.00

B. Full Name (Last, First, Middle Initial)
Shahana Masum

Mailing Address 252A Lake Ave

City State Zip Code
Staten Island NY 10303-2602

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

Name of Employer Occupation
Self-Employed Healthcare Service Coordinator

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

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

Transaction ID : VN8A3C6VKC1

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
Jana L Maxwell

Mailing Address 9225 Medicine Lake Rd
Apt 104

City State Zip Code
Golden Valley MN 55427-3166

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		06		2014

Transaction ID : VN8A3CBDG92

Amount of Each Receipt this Period

500.00

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

760.00

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

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

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial) Marita Mayer		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>21</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	03		21		2014
M M M	/	D D D	/	Y Y Y Y Y Y									
03		21		2014									
Mailing Address 12 Austin Ave		Transaction ID : VN8A3CEZJ92											
City San Anselmo	State CA	Zip Code 94960-2908											
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div>100.00</div>											
Name of Employer Retired	Occupation Retired												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div>250.00</div>												
B. Full Name (Last, First, Middle Initial) Marita Mayer		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>21</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	03		21		2014
M M M	/	D D D	/	Y Y Y Y Y Y									
03		21		2014									
Mailing Address 12 Austin Ave		Transaction ID : VN8A3CF0R42											
City San Anselmo	State CA	Zip Code 94960-2908											
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div>50.00</div>											
Name of Employer Retired	Occupation Retired												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div>250.00</div>												
C. Full Name (Last, First, Middle Initial) Carol T McCarthy		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>27</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	03		27		2014
M M M	/	D D D	/	Y Y Y Y Y Y									
03		27		2014									
Mailing Address 1201 N Harrison St Apt 1006		Transaction ID : VN8A3CFVYS3											
City Wilmington	State DE	Zip Code 19806-3527											
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div>100.00</div>											
Name of Employer Retired	Occupation Retired												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div>450.00</div>												
SUBTOTAL of Receipts This Page (optional).....		<div>250.00</div>											
TOTAL This Period (last page this line number only).....		<div></div>											

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

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

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Marion McCrory

Mailing Address 14819 210th Ave

City Glenwood	State MN	Zip Code 56334-2118
------------------	-------------	------------------------

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

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

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		06		2014

Transaction ID : VN8A3CBCK99

Amount of Each Receipt this Period

100.00

B. Full Name (Last, First, Middle Initial)
M Brigid M McDonough

Mailing Address 126 Mackubin St

City Saint Paul	State MN	Zip Code 55102-2024
--------------------	-------------	------------------------

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

Name of Employer Briggs And Morgan	Occupation Attorney
---------------------------------------	------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		11		2014

Transaction ID : VN8A3CCAJM1

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
Mary McGuire

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)

Election Cycle-to-Date
 250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		25		2014

Transaction ID : VN8A3CFE7Y2

Amount of Each Receipt this Period

100.00

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

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

450.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
John S McKillop

Mailing Address 10442 SE Eastmont Dr

City Damascus	State OR	Zip Code 97089-6350
------------------	-------------	------------------------

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

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

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		06		2014

Transaction ID : VN8A3CBDE05

Amount of Each Receipt this Period

50.00

B. Full Name (Last, First, Middle Initial)
John S McKillop

Mailing Address 10442 SE Eastmont Dr

City Damascus	State OR	Zip Code 97089-6350
------------------	-------------	------------------------

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

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

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		24		2014

Transaction ID : VN8A3CF77V2

Amount of Each Receipt this Period

50.00

C. Full Name (Last, First, Middle Initial)
Bill McKinney

Mailing Address 4800 Emerson Ave S

City Minneapolis	State MN	Zip Code 55419-5332
---------------------	-------------	------------------------

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

Name of Employer Thrivent Financial for Lutherans	Occupation Manager
--	-----------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		11		2014

Transaction ID : VN8A3CCAPS9

Amount of Each Receipt this Period

250.00

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

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

350.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

Sheila J McNally

A.

Mailing Address 124 Bedford St SE

City

Minneapolis

State

MN

Zip Code

55414-3526

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Minnesota

Occupation

Professor Emeritus - Art History

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		02		2014

Transaction ID : VN8A3CCATX8

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

Deborah S. McNeil

B.

Mailing Address 95 King St

City

Mill Valley

State

CA

Zip Code

94941-4512

FEC ID number of contributing
federal political committee.

C

Name of Employer

Family Service Agency of Marin

Occupation

Therapist

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		10		2014

Transaction ID : VN8A3CC0X65

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

Sultana Mehtab

C.

Mailing Address 732 Pembroke Way

City

Ridgefield

State

NJ

Zip Code

07657-1308

FEC ID number of contributing
federal political committee.

C

Name of Employer

Indus Consulting Inc

Occupation

President

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		06		2014

Transaction ID : VN8A3C6RND9

Amount of Each Receipt this Period

1000.00

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

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

1400.00

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

Use separate schedule(s)
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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. Asadur R Miah		Date of Receipt M M / D D / Y Y Y Y 02 / 06 / 2014
Mailing Address 4217 66th St Apt 4		Transaction ID : VN8A3C6REX0
City Woodside	State NY	
Zip Code 11377-5017		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		
Name of Employer Asadur Miah Physicians PC	Occupation Doctor	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) B. Mustafa Milbis		Date of Receipt M M / D D / Y Y Y Y 03 / 19 / 2014
Mailing Address 6481 Napa Ave		Transaction ID : VN8A3CEBHV4
City Rancho Cucamonga	State CA	
Zip Code 91701-3900		Amount of Each Receipt this Period 1500.00
FEC ID number of contributing federal political committee. C		
Name of Employer Nobel Farm Market	Occupation President	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) C. Razwan Mirza		Date of Receipt M M / D D / Y Y Y Y 02 / 06 / 2014
Mailing Address 125 Worth St Rm 514		Transaction ID : VN8A3C6RGV7
City New York	State NY	
Zip Code 10013-4006		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		
Name of Employer New York City Health and Hospitals	Occupation System Engineer	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	2250.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

Khalid C Mitha

Mailing Address 3776 Bayberry Ln

City

Eagan

State

MN

Zip Code

55123-2420

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

505.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		27		2014

Transaction ID : VN8A3CFRPC1

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

Tarak Mohamed

Mailing Address 3761 Gundry Ave

City

Long Beach

State

CA

Zip Code

90807-4211

FEC ID number of contributing
federal political committee.

C

Name of Employer

Stop and go Insurance

Occupation

Insurance Agent

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		11		2014

Transaction ID : VN8A3CC9C19

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Farooqui Moin

Mailing Address 23805 88th Ave

City

Bellerose

State

NY

Zip Code

11426-1213

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Management Consultant

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2014

Transaction ID : VN8A3C6RN64

Amount of Each Receipt this Period

500.00

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

1005.00

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

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

Sandy Morris

Mailing Address 1200 Kenwood Pkwy

City

Minneapolis

State

MN

Zip Code

55405-2201

FEC ID number of contributing
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		04		2014

Transaction ID : VN8A3CJMH5

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Sean MoshiriMailing Address 9440 Santa Monica Blvd
Ste 505

City

Beverly Hills

State

CA

Zip Code

90210-4608

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Accountant

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		10		2014

Transaction ID : VN8A3CCAOW5

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

Sima Mostafavi

Mailing Address 1024 Kenfield Ave

City

Los Angeles

State

CA

Zip Code

90049-1406

FEC ID number of contributing
federal political committee.

C

Name of Employer

Murphy Research

Occupation

Research Manager

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		11		2014

Transaction ID : VN8A3CC87C7

Amount of Each Receipt this Period

500.00

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

1150.00

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

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Hadia Mubarak

Mailing Address 21860 Goodwood Ter

City

Ashburn

State

VA

Zip Code

20147-6726

FEC ID number of contributing
federal political committee.

C

Name of Employer

Student

Occupation

Student

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		01		2014

Transaction ID : VN8A3CCB1Y2

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. Hashem Mubarak

Mailing Address 3317 Harbour Pl

City

Panama City

State

FL

Zip Code

32405-1638

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cadiology Associates

Occupation

Physician

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		14		2014

Transaction ID : VN8A3CJHPZ1

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Abdul Mubarez

Mailing Address 7608 25th Ave

City

East Elmhurst

State

NY

Zip Code

11370-1420

FEC ID number of contributing
federal political committee.

C

Name of Employer

ATM World

Occupation

Chairman

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		27		2014

Transaction ID : VN8A3C3CZF3

Amount of Each Receipt this Period

500.00

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

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

780.00

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

Use separate schedule(s)
for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Marcia Murray

Mailing Address 10325 Scarborough Rd

City Bloomington	State MN	Zip Code 55437-2547
---------------------	-------------	------------------------

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

Name of Employer TreeHouse	Occupation Administrative Coordinator
-------------------------------	--

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 350.00

Date of Receipt

M M / D D / Y Y Y Y
01 / 10 / 2014

Transaction ID : VN8A3CCAWF3

Amount of Each Receipt this Period

100.00

B. Full Name (Last, First, Middle Initial)
Syed A Naeem

Mailing Address 4 Camden Ct

City Sugar Land	State TX	Zip Code 77479-4136
--------------------	-------------	------------------------

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

Name of Employer Teli Group LLC	Occupation Insurance Agent
------------------------------------	-------------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 350.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : VN8A3CJHST8

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)
Tahera Nasreen

Mailing Address 15 Hamilton Dr

City Roslyn	State NY	Zip Code 11576-3103
----------------	-------------	------------------------

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

Name of Employer Self-Employed	Occupation Physician
-----------------------------------	-------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt

M M / D D / Y Y Y Y
02 / 06 / 2014

Transaction ID : VN8A3C6RFX0

Amount of Each Receipt this Period

250.00

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

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

450.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

Charles N Nauen

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 P. L. L. P.

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		11		2014

Transaction ID : VN8A3CCANV2

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Nona J Nelson

Mailing Address 748 McSorley St

City

Red Wing

State

MN

Zip Code

55066-3404

FEC ID number of contributing
federal political committee.

C

Name of Employer

MN DFL Party

Occupation

Chairperson

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		01		2014

Transaction ID : VN8A3CJHK83

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

Nona J Nelson

Mailing Address 748 McSorley St

City

Red Wing

State

MN

Zip Code

55066-3404

FEC ID number of contributing
federal political committee.

C

Name of Employer

MN DFL Party

Occupation

Chairperson

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2014

Transaction ID : VN8A3CJHKK0

Amount of Each Receipt this Period

50.00

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

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

350.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial)

Patricia Norwood

Mailing Address 521 Argo Ave

City

San Antonio

State

TX

Zip Code

78209-4403

FEC ID number of contributing
federal political committee.

C

Name of Employer
selfOccupation
Physician

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

550.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		03		2014

Transaction ID : VN8A3CFKHK6

Amount of Each Receipt this Period

50.00

* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)

ActBlue

Mailing Address PO Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Conduit total listed in Agg. field

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

825.68

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		05		2014

Transaction ID : VN8A3CFKHK6E

Amount of Each Receipt this Period

50.00

[MEMO ITEM]

Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)

Patricia Norwood

Mailing Address 521 Argo Ave

City

San Antonio

State

TX

Zip Code

78209-4403

FEC ID number of contributing
federal political committee.

C

Name of Employer
selfOccupation
Physician

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		03		2014

Transaction ID : VN8A3CFKJ09

Amount of Each Receipt this Period

50.00

* Earmarked Contribution: See Below

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

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

100.00

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

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

FOR LINE NUMBER: PAGE 98 OF 222

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) ActBlue		Date of Receipt <div> <div>M M / D D / Y Y Y Y</div> <div>02 / 09 / 2014</div> </div>
Mailing Address PO Box 382110		Transaction ID : VN8A3CFKJ09E
City Cambridge	State MA	
Zip Code 02238-2110		Amount of Each Receipt this Period <div> <div></div> <div>50.00</div> </div>
FEC ID number of contributing federal political committee. C		[MEMO ITEM] Note: Above Contribution earmarked through this organization.
Name of Employer	Occupation Conduit total listed in Agg. field	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div> <div></div> <div>825.68</div> </div>	

Full Name (Last, First, Middle Initial) Patricia Norwood		Date of Receipt <div> <div>M M / D D / Y Y Y Y</div> <div>03 / 03 / 2014</div> </div>
Mailing Address 521 Argo Ave		Transaction ID : VN8A3CFKJ74
City San Antonio	State TX	
Zip Code 78209-4403		Amount of Each Receipt this Period <div> <div></div> <div>50.00</div> </div>
FEC ID number of contributing federal political committee. C		* Earmarked Contribution: See Below
Name of Employer self	Occupation Physician	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div> <div></div> <div>650.00</div> </div>	

Full Name (Last, First, Middle Initial) ActBlue		Date of Receipt <div> <div>M M / D D / Y Y Y Y</div> <div>03 / 09 / 2014</div> </div>
Mailing Address PO Box 382110		Transaction ID : VN8A3CFKJ74E
City Cambridge	State MA	
Zip Code 02238-2110		Amount of Each Receipt this Period <div> <div></div> <div>50.00</div> </div>
FEC ID number of contributing federal political committee. C		[MEMO ITEM] Note: Above Contribution earmarked through this organization.
Name of Employer	Occupation Conduit total listed in Agg. field	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div> <div></div> <div>825.68</div> </div>	

SUBTOTAL of Receipts This Page (optional).....	<div> <div></div> <div>50.00</div> </div>
TOTAL This Period (last page this line number only).....	<div> <div></div> </div>

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial) Mahmoud Nauh		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>11</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	03		11		2014
M M M	/	D D D	/	Y Y Y Y Y									
03		11		2014									
Mailing Address 830 Greenridge Dr		Transaction ID : VN8A3CC8DX4											
City La Canada	State CA	Zip Code 91011-4205	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>500.00</td> </tr> </table>						500.00				
					500.00								
FEC ID number of contributing federal political committee. <div>C</div>													
Name of Employer Self	Occupation Physician												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>500.00</td> </tr> </table>								500.00				
					500.00								

B. Full Name (Last, First, Middle Initial) John J O'Neill		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>06</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	03		06		2014
M M M	/	D D D	/	Y Y Y Y Y									
03		06		2014									
Mailing Address 300 Morris Ave Dock 1		Transaction ID : VN8A3CBCPK5											
City Key Largo	State FL	Zip Code 33037-3117	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>100.00</td> </tr> </table>						100.00				
					100.00								
FEC ID number of contributing federal political committee. <div>C</div>													
Name of Employer Retired	Occupation Retired												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>300.00</td> </tr> </table>								300.00				
					300.00								

C. Full Name (Last, First, Middle Initial) Molly Oberbillig		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>24</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	01		24		2014
M M M	/	D D D	/	Y Y Y Y Y									
01		24		2014									
Mailing Address 1907 Parkwood Dr SE		Transaction ID : VN8A3CCAY32											
City Olympia	State WA	Zip Code 98501-3059	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>20.00</td> </tr> </table>						20.00				
					20.00								
FEC ID number of contributing federal political committee. <div>C</div>													
Name of Employer Retired	Occupation Retired												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>342.00</td> </tr> </table>								342.00				
					342.00								

SUBTOTAL of Receipts This Page (optional).....	<table border="1"> <tr> <td colspan="5"></td> <td>620.00</td> </tr> </table>						620.00
					620.00		
TOTAL This Period (last page this line number only).....	<table border="1"> <tr> <td colspan="5"></td> <td></td> </tr> </table>						

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

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

FOR LINE NUMBER:

PAGE 100 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

Molly Oberbillig

Mailing Address 1907 Parkwood Dr SE

City

Olympia

State

WA

Zip Code

98501-3059

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

362.00

Date of Receipt

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

Transaction ID : VN8A3CCB756

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

Molly Oberbillig

Mailing Address 1907 Parkwood Dr SE

City

Olympia

State

WA

Zip Code

98501-3059

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

417.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		10		2014

Transaction ID : VN8A3CC0R15

Amount of Each Receipt this Period

55.00

Full Name (Last, First, Middle Initial)

Molly Oberbillig

Mailing Address 1907 Parkwood Dr SE

City

Olympia

State

WA

Zip Code

98501-3059

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

437.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		21		2014

Transaction ID : VN8A3CJHQT2

Amount of Each Receipt this Period

20.00

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

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

95.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 101 OF 222

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Molly Oberbillig
Mailing Address 1907 Parkwood Dr SE

City State Zip Code
Olympia WA 98501-3059

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
457.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 24 2014

Transaction ID : VN8A3CF8942

Amount of Each Receipt this Period

20.00

B. Full Name (Last, First, Middle Initial)
Lynn C Olson
Mailing Address 1224 2nd St NE

City State Zip Code
Minneapolis MN 55413-1130

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 19 2014

Transaction ID : VN8A3CEDYF2

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)
Tarik Omari
Mailing Address 12653 Osborne St
Ste 25

City State Zip Code
Pacoima CA 91331-2158

FEC ID number of contributing
federal political committee.

C

Name of Employer
AMS

Occupation
General Manager

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 11 2014

Transaction ID : VN8A3CC9ZZ7

Amount of Each Receipt this Period

500.00

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

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

620.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial) Gayle Oneill		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>07</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	02		07		2014
M M	/	D D	/	Y Y Y Y									
02		07		2014									
Mailing Address 2221 Hillside Ln SW		Transaction ID : VN8A3CCB4E1											
City Rochester	State MN	Zip Code 55902-1150											
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div>100.00</div>											
Name of Employer Homemaker	Occupation Homemaker												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div>210.00</div>												
B. Full Name (Last, First, Middle Initial) Anas Osman		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>24</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	02		24		2014
M M	/	D D	/	Y Y Y Y									
02		24		2014									
Mailing Address 8501 Timber Ridge Dr		Transaction ID : VN8A3C9SHR2											
City Burr Ridge	State IL	Zip Code 60527-5691											
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div>1400.00</div>											
Name of Employer Google	Occupation Manager												
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div>4000.00</div>												
C. Full Name (Last, First, Middle Initial) Anas Osman		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>24</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	02		24		2014
M M	/	D D	/	Y Y Y Y									
02		24		2014									
Mailing Address 8501 Timber Ridge Dr		Transaction ID : VN8A3C9SQY2											
City Burr Ridge	State IL	Zip Code 60527-5691											
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div>1100.00</div>											
Name of Employer Google	Occupation Manager												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div>4000.00</div>												
SUBTOTAL of Receipts This Page (optional).....		<div>2600.00</div>											
TOTAL This Period (last page this line number only).....		<div></div>											

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Ataul H Osmani

Mailing Address 15 Hamilton Dr

City Roslyn State NY Zip Code 11576-3103

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

Name of Employer Self-Employed Occupation Physician

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt

M M	D D	Y Y Y Y
02	06	2014

Transaction ID : VN8A3C6RG12

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
Robert J Owens

Mailing Address 71320 W Thunderbird Ter

City Rancho Mirage State CA Zip Code 92270-3567

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date 365.00

Date of Receipt

M M	D D	Y Y Y Y
02	11	2014

Transaction ID : VN8A3CCB594

Amount of Each Receipt this Period

365.00

C. Full Name (Last, First, Middle Initial)
Clyde P Patton

Mailing Address 35 W 90th St

City New York State NY Zip Code 10024-1507

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date 300.00

Date of Receipt

M M	D D	Y Y Y Y
03	26	2014

Transaction ID : VN8A3CFJWK1

Amount of Each Receipt this Period

100.00

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

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

965.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial) William Percy		Date of Receipt M M / D D / Y Y Y Y 01 / 16 / 2014	
Mailing Address 2 Upper School Road		Transaction ID : VN8A3BZ47R3	
City Hope	State ID	Zip Code 83836	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C			
Name of Employer Capella University	Occupation Psychologist		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 201.00		
B. Full Name (Last, First, Middle Initial) William Percy		Date of Receipt M M / D D / Y Y Y Y 02 / 16 / 2014	
Mailing Address 2 Upper School Road		Transaction ID : VN8A3C8NCQ9	
City Hope	State ID	Zip Code 83836	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C			
Name of Employer Capella University	Occupation Psychologist		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 211.00		
C. Full Name (Last, First, Middle Initial) William Percy		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2014	
Mailing Address 2 Upper School Road		Transaction ID : VN8A3CE0Q63	
City Hope	State ID	Zip Code 83836	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C			
Name of Employer Capella University	Occupation Psychologist		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 221.00		
SUBTOTAL of Receipts This Page (optional).....		30.00	
TOTAL This Period (last page this line number only).....			

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Michael R Perez
 Mailing Address 1420 Washburn Ave N

City State Zip Code
 Minneapolis MN 55411-2843

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Self-Employed

Occupation
 Perez Charitable Vending

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

275.00

Date of Receipt

M M / D D / Y Y Y Y
 02 01 2014

Transaction ID : VN8A3CCB2Q9

Amount of Each Receipt this Period

75.00

B. Full Name (Last, First, Middle Initial)
Antoinette Perkins
 Mailing Address 38 Uncle Bobs Way

City State Zip Code
 South Dennis MA 02660-2610

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Retired

Occupation
 Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

275.00

Date of Receipt

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

Transaction ID : VN8A3CCB5K3

Amount of Each Receipt this Period

55.00

C. Full Name (Last, First, Middle Initial)
Rowshon A Perveen
 Mailing Address 7841 221st St

City State Zip Code
 Oakland Gardens NY 11364-3632

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Cypress Hills Library

Occupation
 Board Member

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
 02 06 2014

Transaction ID : VN8A3C6R7Y3

Amount of Each Receipt this Period

500.00

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

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

630.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Kyle Pettersen-Scott

Mailing Address 8100 23rd Ave N

City State Zip Code
 Golden Valley MN 55427-3412

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

Name of Employer Occupation
 Optum/UnitedHealth Group Compliance Director

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		11		2014

Transaction ID : VN8A3CCB7A5

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
Joel Pieper

Mailing Address 2643 Monroe St NE

City State Zip Code
 Minneapolis MN 55418-2829

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

Name of Employer Occupation
 Self-employed Artist

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2014

Transaction ID : VN8A3CJHRY7

Amount of Each Receipt this Period

120.00

C. Full Name (Last, First, Middle Initial)
Alberta Pinero

Mailing Address 878 Countrywood Dr

City State Zip Code
 Adams TN 37010-8959

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

Name of Employer Occupation
 Homemaker Homemaker

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		06		2014

Transaction ID : VN8A3CBD8A1

Amount of Each Receipt this Period

50.00

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

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

420.00

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

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

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Alberta Pinero

Mailing Address 878 Countrywood Dr

City State Zip Code
Adams TN 37010-8959

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

M M / D D / Y Y Y Y
03 25 2014

Transaction ID : VN8A3CFDN31

Amount of Each Receipt this Period

50.00

B. Full Name (Last, First, Middle Initial)
Helen Pitt

Mailing Address 4350 Brookside Ct
Apt 205

City State Zip Code
Minneapolis MN 55436-1450

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt

M M / D D / Y Y Y Y
01 02 2014

Transaction ID : VN8A3CCATP3

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)
Helen Pitt

Mailing Address 4350 Brookside Ct
Apt 205

City State Zip Code
Minneapolis MN 55436-1450

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt

M M / D D / Y Y Y Y
02 03 2014

Transaction ID : VN8A3CCB368

Amount of Each Receipt this Period

100.00

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

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

250.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial) James Pochert		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>M</td> <td>/</td> <td>D</td><td>D</td><td>D</td> <td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td> <td></td> <td>1</td><td>0</td><td></td> <td></td> <td>2</td><td>0</td><td>1</td><td>4</td><td></td><td></td> </tr> </table>		M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y	0	1			1	0			2	0	1	4		
M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y																		
0	1			1	0			2	0	1	4																				
Mailing Address 5861 Penny Farm Dr SE		Transaction ID : VN8A3CCAWT0																													
City Kentwood	State MI	Zip Code 49508-6495																													
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div>200.00</div>																													
Name of Employer Spectrum Health	Occupation Physician																														
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div>800.00</div>																														
B. Full Name (Last, First, Middle Initial) Steve Pospisil		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>M</td> <td>/</td> <td>D</td><td>D</td><td>D</td> <td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td> <td></td> <td>2</td><td>7</td><td></td> <td></td> <td>2</td><td>0</td><td>1</td><td>4</td><td></td><td></td> </tr> </table>		M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y	0	3			2	7			2	0	1	4		
M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y																		
0	3			2	7			2	0	1	4																				
Mailing Address 3511 Vincent Ave N		Transaction ID : VN8A3CFRV65																													
City Minneapolis	State MN	Zip Code 55412-2219																													
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div>500.00</div>																													
Name of Employer First Data	Occupation Account Manager																														
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div>500.00</div>																														
C. Full Name (Last, First, Middle Initial) David Potter		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>M</td> <td>/</td> <td>D</td><td>D</td><td>D</td> <td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td> <td></td> <td>1</td><td>3</td><td></td> <td></td> <td>2</td><td>0</td><td>1</td><td>4</td><td></td><td></td> </tr> </table>		M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y	0	3			1	3			2	0	1	4		
M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y																		
0	3			1	3			2	0	1	4																				
Mailing Address 222 S 9th St Ste 2000		Transaction ID : VN8A3CD9XP3																													
City Minneapolis	State MN	Zip Code 55402-3338																													
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div>250.00</div>																													
Name of Employer Oppenheimer Law Firm	Occupation attorney																														
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div>250.00</div>																														
SUBTOTAL of Receipts This Page (optional).....		<div>950.00</div>																													
TOTAL This Period (last page this line number only).....		<div></div>																													

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

Barbara Powers

Mailing Address 12000 Rist Canyon Rd

City

Bellvue

State

CO

Zip Code

80512-6404

FEC ID number of contributing
federal political committee.

C

Name of Employer

Colorado State University

Occupation

Professor

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		03		2014

Transaction ID : VN8A3CAY2T6

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Leonard Prescott

Mailing Address 13733 Thunderbird Cir

City

Shakopee

State

MN

Zip Code

55379-9616

FEC ID number of contributing
federal political committee.

C

Name of Employer

Eaglevisions Energy LLC

Occupation

Signage sales

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		29		2014

Transaction ID : VN8A3C3J720

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

Leonard Prescott

Mailing Address 13733 Thunderbird Cir

City

Shakopee

State

MN

Zip Code

55379-9616

FEC ID number of contributing
federal political committee.

C

Name of Employer

Eaglevisions Energy LLC

Occupation

Signage sales

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2014

Transaction ID : VN8A3CH2966

Amount of Each Receipt this Period

500.00

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

950.00

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

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

FOR LINE NUMBER:

PAGE 110 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

Joseph B Proctor

A.

Mailing Address 2204 Solmar Dr

City

Silver Spring

State

MD

Zip Code

20904-5452

FEC ID number of contributing
federal political committee.

C

Name of Employer
Info RequestedOccupation
Info Requested

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

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

Transaction ID : VN8A3C6VM15

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Joseph B Proctor

B.

Mailing Address 2204 Solmar Dr

City

Silver Spring

State

MD

Zip Code

20904-5452

FEC ID number of contributing
federal political committee.

C

Name of Employer
Info RequestedOccupation
Info Requested

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		11		2014

Transaction ID : VN8A3CCBWZ6

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

Joseph B Proctor

C.

Mailing Address 2204 Solmar Dr

City

Silver Spring

State

MD

Zip Code

20904-5452

FEC ID number of contributing
federal political committee.

C

Name of Employer
Info RequestedOccupation
Info Requested

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		24		2014

Transaction ID : VN8A3CF7AA4

Amount of Each Receipt this Period

750.00

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

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

2000.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial)

Habeebur Rahman

Mailing Address 11 Godwin Pl

City
CliftonState
NJZip Code
07013-3707FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-EmployedOccupation
Physician

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		06		2014

Transaction ID : VN8A3C6RMC8

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

Mirza M RahmanMailing Address 17233 90th Ave
1FLCity
JamaicaState
NYZip Code
11432-5508FEC ID number of contributing
federal political committee.

C

Name of Employer
Alibi AveOccupation
Executive Director

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		18		2014

Transaction ID : VN8A3C8SMH9

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Mohammad M Rahman

Mailing Address 8520 Radnor St

City
JamaicaState
NYZip Code
11432-2326FEC ID number of contributing
federal political committee.

C

Name of Employer
Queens Hospital CenterOccupation
Physician

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		06		2014

Transaction ID : VN8A3C6RFT7

Amount of Each Receipt this Period

200.00

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

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

2450.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Mohammad M Rahman

Mailing Address 8520 Radnor St

City Jamaica	State NY	Zip Code 11432-2326
-----------------	-------------	------------------------

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

Name of Employer Queens Hospital Center	Occupation Physician
--	-------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt

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

Transaction ID : VN8A3C6VMQ9

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
Jaffar Raza

Mailing Address 222 Franklin Ave

City Cliffside Park	State NJ	Zip Code 07010-2602
------------------------	-------------	------------------------

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

Name of Employer Lenox Hill Heart and Vascular Institut	Occupation MD
--	------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt

M M / D D / Y Y Y Y
02 / 06 / 2014

Transaction ID : VN8A3C6RMK3

Amount of Each Receipt this Period

1500.00

C. Full Name (Last, First, Middle Initial)
Antoinette L Reichow

Mailing Address 809 W Minnehaha Pkwy

City Minneapolis	State MN	Zip Code 55419-1244
---------------------	-------------	------------------------

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

Name of Employer Landamerica Inc.	Occupation manager
--------------------------------------	-----------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 10 / 2014

Transaction ID : VN8A3CC0V61

Amount of Each Receipt this Period

300.00

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

2050.00

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

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

FOR LINE NUMBER:

PAGE 114 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

Kathleen Rhodes

A.

Mailing Address PO Box 6694

City

Rochester

State

MN

Zip Code

55903-6694

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		26		2014

Transaction ID : VN8A3CHQE96

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Alice O Ritter

B.

Mailing Address 2121 S Timberline Ave

City

Tucson

State

AZ

Zip Code

85710-6026

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		06		2014

Transaction ID : VN8A3CBKW34

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

Alice O Ritter

C.

Mailing Address 2121 S Timberline Ave

City

Tucson

State

AZ

Zip Code

85710-6026

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		24		2014

Transaction ID : VN8A3CHDVS1

Amount of Each Receipt this Period

50.00

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

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

200.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

Herbert H Rozoff**A.**

Mailing Address 601 Mulberry Pl

Apt 4I

City

Highland Park

State

IL

Zip Code

60035-3670

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		26		2014

Transaction ID : VN8A3CFMXR9

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

GM Sadat**B.**

Mailing Address 1038 Swift Rd

Unit 1D

City

Glen Ellyn

State

IL

Zip Code

60137-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer

Concordia Wireless, Inc.

Occupation

Civil Engineer

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		02		2014

Transaction ID : VN8A3CAWEH6

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

Charles Sadler**C.**

Mailing Address 9100 Wilshire Blvd

245 East

City

Beverly Hills

State

CA

Zip Code

90212-3415

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Physician

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2014

Transaction ID : VN8A3CGMTV8

Amount of Each Receipt this Period

1500.00

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

4350.00

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

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

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

FOR LINE NUMBER:

PAGE 117 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial)

Fara Salamat

Mailing Address 24742 Kings Rd

City

Laguna Niguel

State

CA

Zip Code

92677-7451

FEC ID number of contributing
federal political committee.

C

Name of Employer

Real Estate Online Group

Occupation

Principal

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		19		2014

Transaction ID : VN8A3CEAWR4

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Moeen Saleem

Mailing Address 3 Stafford Ln

City

Oak Brook

State

IL

Zip Code

60523-2366

FEC ID number of contributing
federal political committee.

C

Name of Employer

Midwest Heart

Occupation

Physician

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		10		2014

Transaction ID : VN8A3CC3EP3

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Fateh N SalehMailing Address 199 Sherman Ave
Apt 3A

City

New York

State

NY

Zip Code

10034-3305

FEC ID number of contributing
federal political committee.

C

Name of Employer

Yemen American Association

Occupation

President

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

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

Transaction ID : VN8A3C6VXX5

Amount of Each Receipt this Period

500.00

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

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

1000.00

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

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

FOR LINE NUMBER:

PAGE 118 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial) Mohammed Saleh		Date of Receipt M M / D D / Y Y Y Y 02 / 06 / 2014	
Mailing Address 1945 Leonard Ln		Transaction ID : VN8A3C6RGG1	
City Merrick	State NY	Zip Code 11566-4935	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self-employed	Occupation Pharmaceuticals		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		
B. Full Name (Last, First, Middle Initial) Ibrahim A Salman		Date of Receipt M M / D D / Y Y Y Y 01 / 30 / 2014	
Mailing Address 4236 SW 32nd St		Transaction ID : VN8A3C3PH22	
City Ocala	State FL	Zip Code 34474-9823	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Salman Consulting	Occupation Principal		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00		
C. Full Name (Last, First, Middle Initial) Ibrahim A Salman		Date of Receipt M M / D D / Y Y Y Y 02 / 28 / 2014	
Mailing Address 4236 SW 32nd St		Transaction ID : VN8A3CAGE81	
City Ocala	State FL	Zip Code 34474-9823	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Salman Consulting	Occupation Principal		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		
SUBTOTAL of Receipts This Page (optional).....		750.00	
TOTAL This Period (last page this line number only).....			

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

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

FOR LINE NUMBER:

PAGE 119 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Ibrahim A Salman

Mailing Address 4236 SW 32nd St

City State Zip Code
 Ocala FL 34474-9823

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

Name of Employer Occupation
 Salman Consulting Principal

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		28		2014

Transaction ID : VN8A3CG2432

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
Shahid Satti

Mailing Address 91 Clearstream Ave

City State Zip Code
 Valley Stream NY 11580-5103

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

Name of Employer Occupation
 Laffey Fine Homes Real Estate Agent

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		06		2014

Transaction ID : VN8A3C6RGX3

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
J. Diane Savage

Mailing Address 222 2nd St SE
 Apt 403

City State Zip Code
 Minneapolis MN 55414-5186

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

Name of Employer Occupation
 Retired Retired

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		26		2014

Transaction ID : VN8A3CFNFK7

Amount of Each Receipt this Period

50.00

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

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

550.00

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

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

FOR LINE NUMBER:

PAGE 120 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

Joyce E Schlagel

Mailing Address 701 3rd Ave E

City

Ada

State

MN

Zip Code

56510-1118

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

295.00

Date of Receipt

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

Transaction ID : VN8A3CCB5Q4

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

Judith N Scoville

Mailing Address 2093 Jefferson Ave

City

Saint Paul

State

MN

Zip Code

55105-1302

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		10		2014

Transaction ID : VN8A3CCAWJ7

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Judith G Screaton

Mailing Address 2474 Oakgreen Ave N

City

Stillwater

State

MN

Zip Code

55082-1525

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		09		2014

Transaction ID : VN8A3BWP1C0

Amount of Each Receipt this Period

100.00

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

380.00

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

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

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

FOR LINE NUMBER:

PAGE 121 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial) Judith G Screaton		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>31</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	03		31		2014
M M M	/	D D D	/	Y Y Y Y Y									
03		31		2014									
Mailing Address 2474 Oakgreen Ave N		Transaction ID : VN8A3CGZXX7											
City Stillwater	State MN	Zip Code 55082-1525	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>100.00</td> </tr> </table>						100.00				
					100.00								
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>300.00</td> </tr> </table>							300.00				
					300.00								
Name of Employer Retired	Occupation Retired												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>300.00</td> </tr> </table>								300.00				
					300.00								
B. Full Name (Last, First, Middle Initial) Nida Shakir		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>10</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	03		10		2014
M M M	/	D D D	/	Y Y Y Y Y									
03		10		2014									
Mailing Address 4653 Dempster St		Transaction ID : VN8A3CC3CB2											
City Skokie	State IL	Zip Code 60076-2042	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>250.00</td> </tr> </table>						250.00				
					250.00								
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>250.00</td> </tr> </table>							250.00				
					250.00								
Name of Employer Whyte Hirschboeck Dudek	Occupation Attorney												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>250.00</td> </tr> </table>								250.00				
					250.00								
C. Full Name (Last, First, Middle Initial) Sofia Shakir		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>10</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	03		10		2014
M M M	/	D D D	/	Y Y Y Y Y									
03		10		2014									
Mailing Address 18 N Edgewood Ave		Transaction ID : VN8A3CC3DS4											
City La Grange	State IL	Zip Code 60525-5818	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>1250.00</td> </tr> </table>						1250.00				
					1250.00								
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>1250.00</td> </tr> </table>							1250.00				
					1250.00								
Name of Employer Pediatric Health Associates	Occupation Pediatrician												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>1250.00</td> </tr> </table>								1250.00				
					1250.00								
SUBTOTAL of Receipts This Page (optional).....		<table border="1"> <tr> <td colspan="5"></td> <td>1600.00</td> </tr> </table>							1600.00				
					1600.00								
TOTAL This Period (last page this line number only).....		<table border="1"> <tr> <td colspan="5"></td> <td></td> </tr> </table>											

Diagram illustrating the layout of the 15 numbered boxes:

- Box 11a: 2x2 grid (top-left cell contains 'X')
- Box 11b: 2x1 vertical grid
- Box 11c: 2x1 vertical grid
- Box 11d: 2x1 vertical grid
- Box 12: 1x1 square
- Box 13a: 2x1 vertical grid
- Box 13b: 1x1 square
- Box 14: 2x1 vertical grid
- Box 15: 1x1 square

NAME OF COMMITTEE (In Full)
Ellison for Congress

FEC Schedule A (Form 3) (Revised 02/2009)

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

Jihad Shoshara

Mailing Address 18 N Edgewood Ave

City

La Grange

State

IL

Zip Code

60525-5818

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pediatric Health Associates

Occupation

Physician

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		10		2014

Transaction ID : VN8A3CC3DH1

Amount of Each Receipt this Period

1250.00

Full Name (Last, First, Middle Initial)

Ginger L Sisco

Mailing Address 8308 40th Ave N

City

New Hope

State

MN

Zip Code

55427-1135

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sisco Public Relations, Inc

Occupation

Public Relations Consultant

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		10		2014

Transaction ID : VN8A3CCAWH9

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Ginger L Sisco

Mailing Address 8308 40th Ave N

City

New Hope

State

MN

Zip Code

55427-1135

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sisco Public Relations, Inc

Occupation

Public Relations Consultant

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		06		2014

Transaction ID : VN8A3CBCHC8

Amount of Each Receipt this Period

100.00

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

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

1450.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 124 OF 222

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

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NAME OF COMMITTEE (In Full)
Ellison for CongressFull Name (Last, First, Middle Initial)
A. George Skorezewski

Mailing Address 3927 130th Ave

City	State	Zip Code
Hendricks	MN	56136-4018

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		05		2014

Transaction ID : VN8A3CBA194

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)
B. George Skorezewski

Mailing Address 3927 130th Ave

City	State	Zip Code
Hendricks	MN	56136-4018

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		26		2014

Transaction ID : VN8A3CFKTE5

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)
C. Emil J SlowinskiMailing Address 4300 W River Pkwy
Apt 400

City	State	Zip Code
Minneapolis	MN	55406-3680

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		08		2014

Transaction ID : VN8A3BWGNQ2

Amount of Each Receipt this Period

200.00

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

350.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 125 OF 222

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Emil J Slowinski

Mailing Address 4300 W River Pkwy
Apt 400

City State Zip Code
Minneapolis MN 55406-3680

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt

M M / D D / Y Y Y Y
03 27 2014

Transaction ID : VN8A3CHET17

Amount of Each Receipt this Period

200.00

B. Full Name (Last, First, Middle Initial)
Corey Smith

Mailing Address 2500 Ensign Ave N

City State Zip Code
Minneapolis MN 55427-3105

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

Name of Employer Occupation
Target Diversity and Inclusion Manager

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

M M / D D / Y Y Y Y
03 17 2014

Transaction ID : VN8A3CE4ZQ7

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
Jill J Smith

Mailing Address 6945 Xerxes Ave S

City State Zip Code
Richfield MN 55423-1936

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

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

Transaction ID : VN8A3C82546

Amount of Each Receipt this Period

250.00

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

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

700.00

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

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

FOR LINE NUMBER:

PAGE 126 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

Joyce Soliman

Mailing Address 415 W Prospect St

City

Lake Mills

State

WI

Zip Code

53551-1054

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		13		2014

Transaction ID : VN8A3BXKZG5

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

Joyce Soliman

Mailing Address 415 W Prospect St

City

Lake Mills

State

WI

Zip Code

53551-1054

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		05		2014

Transaction ID : VN8A3CB90T7

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

Joyce Soliman

Mailing Address 415 W Prospect St

City

Lake Mills

State

WI

Zip Code

53551-1054

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		20		2014

Transaction ID : VN8A3CEKJY0

Amount of Each Receipt this Period

50.00

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

150.00

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

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

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

FOR LINE NUMBER:

PAGE 127 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial) Samer S. Soubra			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>27</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	03		27		2014
M M M	/	D D D	/	Y Y Y Y Y										
03		27		2014										
Mailing Address 12122 Diamond St			Transaction ID : VN8A3CFVJY7											
City	State	Zip Code												
Garden Grove	CA	92845-1819												
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">500.00</td> </tr> </table>		500.00									
500.00														
Name of Employer Reproductive Partners		Occupation Embryologist												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5">1000.00</td> </tr> </table>	1000.00											
1000.00														
B. Full Name (Last, First, Middle Initial) April Louise Spas			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>31</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	03		31		2014
M M M	/	D D D	/	Y Y Y Y Y										
03		31		2014										
Mailing Address 4310 Dupont Ave S			Transaction ID : VN8A3CGKW69											
City	State	Zip Code												
Minneapolis	MN	55409-1717												
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">100.00</td> </tr> </table>		100.00									
100.00														
Name of Employer retired		Occupation retired												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5">650.00</td> </tr> </table>	650.00											
650.00														
C. Full Name (Last, First, Middle Initial) Robert C. Steinman MD			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>05</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	03		05		2014
M M M	/	D D D	/	Y Y Y Y Y										
03		05		2014										
Mailing Address 412 Ruth Ridge Dr			Transaction ID : VN8A3CBAKV4											
City	State	Zip Code												
Lancaster	PA	17601-3634												
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">50.00</td> </tr> </table>		50.00									
50.00														
Name of Employer Retired		Occupation Retired												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5">250.00</td> </tr> </table>	250.00											
250.00														
SUBTOTAL of Receipts This Page (optional).....			<table border="1"> <tr> <td colspan="5">650.00</td> </tr> </table>		650.00									
650.00														
TOTAL This Period (last page this line number only).....			<table border="1"> <tr> <td colspan="5"></td> </tr> </table>											

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

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

FOR LINE NUMBER:

PAGE 128 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Robert C. Steinman MD

Mailing Address 412 Ruth Ridge Dr

City	State	Zip Code
Lancaster	PA	17601-3634

FEC ID number of contributing federal political committee.

C

Name of Employer
 Retired

Occupation
 Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		24		2014

Transaction ID : VN8A3CHDVN9

Amount of Each Receipt this Period

60.00

B. Full Name (Last, First, Middle Initial)
Muriel Sterne

Mailing Address 12600 Marion Ln W
 Apt 802

City	State	Zip Code
Minnetonka	MN	55305-1356

FEC ID number of contributing federal political committee.

C

Name of Employer
 Retired

Occupation
 Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		27		2014

Transaction ID : VN8A3CG0EM0

Amount of Each Receipt this Period

135.00

C. Full Name (Last, First, Middle Initial)
Richard G Stratton

Mailing Address 749 Crescent Ave

City	State	Zip Code
Buffalo	NY	14216-3417

FEC ID number of contributing federal political committee.

C

Name of Employer
 Nichols School

Occupation
 Teacher

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

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

Transaction ID : VN8A3CA3PY9

Amount of Each Receipt this Period

300.00

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

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

495.00

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

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

FOR LINE NUMBER:

PAGE 129 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

Richard G Stratton

A.

Mailing Address 749 Crescent Ave

City

Buffalo

State

NY

Zip Code

14216-3417

FEC ID number of contributing
federal political committee.

C

Name of Employer

Nichols School

Occupation

Teacher

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		24		2014

Transaction ID : VN8A3CF8492

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Peggy Stubs

B.

Mailing Address 208 Saint Mark Way

City

Westminster

State

MD

Zip Code

21158-4164

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

575.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		14		2014

Transaction ID : VN8A3BXQDJ5

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

Peggy Stubs

C.

Mailing Address 208 Saint Mark Way

City

Westminster

State

MD

Zip Code

21158-4164

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

625.00

Date of Receipt

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

Transaction ID : VN8A3C8DSN9

Amount of Each Receipt this Period

50.00

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

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

600.00

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

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

FOR LINE NUMBER:

PAGE 130 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial)

Peggy Stubs

Mailing Address 208 Saint Mark Way

City

Westminster

State

MD

Zip Code

21158-4164

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

675.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		05		2014

Transaction ID : VN8A3CB90K3

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

Peggy Stubs

Mailing Address 208 Saint Mark Way

City

Westminster

State

MD

Zip Code

21158-4164

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

725.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		14		2014

Transaction ID : VN8A3CDDG01

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

Ammar Sukari

Mailing Address 5425 Centerbrook Dr

City

West Bloomfield

State

MI

Zip Code

48322-3814

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wayne State Medical School

Occupation

Physician

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Transaction ID : VN8A3CJHSZ7

Amount of Each Receipt this Period

200.00

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

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

300.00

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

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

FOR LINE NUMBER:

PAGE 131 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Constance A Sullivan

Mailing Address 1071 14th Ave SE

City Minneapolis	State MN	Zip Code 55414-2314
---------------------	-------------	------------------------

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

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

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 350.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 26 / 2014

Transaction ID : VN8A3CFKFR2

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
Mohammad Z Tabibi

Mailing Address 8605 Menteith Ter

City Miami Lakes	State FL	Zip Code 33016-1427
---------------------	-------------	------------------------

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

Name of Employer COTO Pharmacy Inc	Occupation General Manager
---------------------------------------	-------------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 260.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 01 / 2014

Transaction ID : VN8A3CJHK00

Amount of Each Receipt this Period

80.00

C. Full Name (Last, First, Middle Initial)
Patty A Tanji

Mailing Address 1467 Pond Wynde N

City Eagan	State MN	Zip Code 55122-3809
---------------	-------------	------------------------

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

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

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 400.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 28 / 2014

Transaction ID : VN8A3CJHS28

Amount of Each Receipt this Period

200.00

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

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

530.00

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

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

FOR LINE NUMBER:

PAGE 132 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Saleem A Tatari

Mailing Address 90 Devonshire Dr

City

New Hyde Park

State

NY

Zip Code

11040-3634

FEC ID number of contributing
federal political committee.

C

Name of Employer

Saleem Tatari RPH

Occupation

Pharmacist/Owner

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		18		2014

Transaction ID : VN8A3C8SN80

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Jack Tesmer

Mailing Address 6600 Lyndale Ave S
Apt 302

City

Richfield

State

MN

Zip Code

55423-3383

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		05		2014

Transaction ID : VN8A3CB9ZR9

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Mahmud Thamer

Mailing Address 525 Belmont Bay Dr
Unit 206

City

Woodbridge

State

VA

Zip Code

22191-5478

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		05		2014

Transaction ID : VN8A3CBA1D5

Amount of Each Receipt this Period

50.00

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

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

400.00

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

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

FOR LINE NUMBER:

PAGE 133 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial) Mahmud Thamer		Date of Receipt M M / D D / Y Y Y Y 03 / 21 / 2014	
Mailing Address 525 Belmont Bay Dr Unit 206		Transaction ID : VN8A3CF10C3	
City Woodbridge	State VA	Zip Code 22191-5478	Amount of Each Receipt this Period 50.00
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)	Election Cycle-to-Date 300.00		
B. Full Name (Last, First, Middle Initial) Anthony J Thompson		Date of Receipt M M / D D / Y Y Y Y 01 / 29 / 2014	
Mailing Address 5101 Beard Ave S		Transaction ID : VN8A3C3HJR8	
City Minneapolis	State MN	Zip Code 55410-2148	Amount of Each Receipt this Period 50.00
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)	Election Cycle-to-Date 235.00		
C. Full Name (Last, First, Middle Initial) Anthony J Thompson		Date of Receipt M M / D D / Y Y Y Y 03 / 05 / 2014	
Mailing Address 5101 Beard Ave S		Transaction ID : VN8A3CB86W9	
City Minneapolis	State MN	Zip Code 55410-2148	Amount of Each Receipt this Period 25.00
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)	Election Cycle-to-Date 260.00		
SUBTOTAL of Receipts This Page (optional).....		125.00	
TOTAL This Period (last page this line number only).....			

FOR LINE NUMBER:
(check only one)

Diagram illustrating the layout of the numbered boxes on the table:

- Top row: 11a, 11b, 11c, 11d
- Bottom row: 12, 13a, 13b, 14, 15

Note: Box 11a contains an 'X'.

NAME OF COMMITTEE (In Full)
Ellison for Congress

A diagram of a rectangular frame structure. It consists of 10 vertical members and 2 horizontal members (top and bottom). The members are connected at nodes, forming a grid. The nodes are labeled with numbers 1 through 19. The top horizontal member has nodes 1, 2, 3, 4, 5, 6, 7, 8, 9, and 10. The bottom horizontal member has nodes 11, 12, 13, 14, 15, 16, 17, 18, 19, and 20. The vertical members connect the top and bottom nodes. The frame is supported by a fixed support at node 1.

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

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

FOR LINE NUMBER:

PAGE 135 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
George Tiers

Mailing Address 165 Cleveland Ave S

City Saint Paul	State MN	Zip Code 55105-1103
--------------------	-------------	------------------------

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

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

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		07		2014

Transaction ID : VN8A3CCAVY9

Amount of Each Receipt this Period

100.00

B. Full Name (Last, First, Middle Initial)
David Tilsen

Mailing Address 3220 10th Ave S

City Minneapolis	State MN	Zip Code 55407-2111
---------------------	-------------	------------------------

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

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

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2014

Transaction ID : VN8A3CH2RZ4

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)
William Tilton

Mailing Address 195 Chatsworth St S
 # 1

City Saint Paul	State MN	Zip Code 55105-3224
--------------------	-------------	------------------------

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

Name of Employer Tilton & Dunn PLLP	Occupation Attorney
--	------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		13		2014

Transaction ID : VN8A3BXHV04

Amount of Each Receipt this Period

50.00

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

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

650.00

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

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

FOR LINE NUMBER:

PAGE 136 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial) William Tilton		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>13</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	02		13		2014
M M M	/	D D D	/	Y Y Y Y Y									
02		13		2014									
Mailing Address 195 Chatsworth St S # 1		Transaction ID : VN8A3C8AD02											
City Saint Paul	State MN	Zip Code 55105-3224											
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00											
Name of Employer Tilton & Dunn PLLP	Occupation Attorney												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 900.00												
B. Full Name (Last, First, Middle Initial) William Tilton		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>13</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	03		13		2014
M M M	/	D D D	/	Y Y Y Y Y									
03		13		2014									
Mailing Address 195 Chatsworth St S # 1		Transaction ID : VN8A3CDAJ29											
City Saint Paul	State MN	Zip Code 55105-3224											
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00											
Name of Employer Tilton & Dunn PLLP	Occupation Attorney												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 950.00												
C. Full Name (Last, First, Middle Initial) William Tilton		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>17</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	03		17		2014
M M M	/	D D D	/	Y Y Y Y Y									
03		17		2014									
Mailing Address 195 Chatsworth St S # 1		Transaction ID : VN8A3CE3FP7											
City Saint Paul	State MN	Zip Code 55105-3224											
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00											
Name of Employer Tilton & Dunn PLLP	Occupation Attorney												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1050.00												
SUBTOTAL of Receipts This Page (optional).....		200.00											
TOTAL This Period (last page this line number only).....													

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Shakeel H Tirmizi

Mailing Address 76 Idolstone Ln

City State Zip Code
 Matawan NJ 07747-1760

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

Name of Employer Self Occupation Scientist

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 201.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		06		2014

Transaction ID : VN8A3C6RMY0

Amount of Each Receipt this Period

201.00

B. Full Name (Last, First, Middle Initial)
Elaine Towns

Mailing Address 4229 Creed Ave

City State Zip Code
 Los Angeles CA 90008-4501

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 455.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		05		2014

Transaction ID : VN8A3CBA1B0

Amount of Each Receipt this Period

35.00

C. Full Name (Last, First, Middle Initial)
James Trench

Mailing Address 6738 Wentworth Ave

City State Zip Code
 Richfield MN 55423-2360

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		11		2014

Transaction ID : VN8A3CCBXC9

Amount of Each Receipt this Period

50.00

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

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

286.00

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Chris Van Lierop

Mailing Address 306 7th St S

City State Zip Code
 Hopkins MN 55343-7721

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

Name of Employer Occupation
 Hennepin Technical College Teacher

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 500.00

Date of Receipt

M M / D D / Y Y Y Y
 03 26 2014

Transaction ID : VN8A3CFKMA0

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
Mary W. Vaughan

Mailing Address 510 Groveland Ave

City State Zip Code
 Minneapolis MN 55403-3220

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

Name of Employer Occupation
 Retired Retired

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 2000.00

Date of Receipt

M M / D D / Y Y Y Y
 03 25 2014

Transaction ID : VN8A3CFE788

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
Peter Vaughan

Mailing Address 1967 Sheridan Ave S

City State Zip Code
 Minneapolis MN 55405-2212

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

Name of Employer Occupation
 Self Research Consultant

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt

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

Transaction ID : VN8A3C67HT9

Amount of Each Receipt this Period

250.00

1500.00

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

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

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial) Janis Verruso		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>19</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	03		19		2014
M M M	/	D D D	/	Y Y Y Y Y									
03		19		2014									
Mailing Address 5151 17th Ave S		Transaction ID : VN8A3CEDZ89											
City Minneapolis	State MN	Zip Code 55417-1213											
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div>250.00</div>											
Name of Employer United Healthcare	Occupation Director of Compliance												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div>250.00</div>												
B. Full Name (Last, First, Middle Initial) Phillipe Villers		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>19</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	02		19		2014
M M M	/	D D D	/	Y Y Y Y Y									
02		19		2014									
Mailing Address 20 Whits End Rd		Transaction ID : VN8A3C99M45											
City Concord	State MA	Zip Code 01742-5411											
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div>300.00</div>											
Name of Employer Computervision	Occupation Co-founder												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div>300.00</div>												
C. Full Name (Last, First, Middle Initial) Samina Waggoner		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>10</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	03		10		2014
M M M	/	D D D	/	Y Y Y Y Y									
03		10		2014									
Mailing Address 106 Kohl Ave		Transaction ID : VN8A3CC3F28											
City Lake Bluff	State IL	Zip Code 60044-1316											
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div>250.00</div>											
Name of Employer Evanston Hospital	Occupation MD												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div>250.00</div>												
SUBTOTAL of Receipts This Page (optional).....		<div>800.00</div>											
TOTAL This Period (last page this line number only).....		<div></div>											

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

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial) A. Sarah Walker		Date of Receipt M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address 500 Robert St N Unit 302		Transaction ID : VN8A3CCAQ86
City Saint Paul	State MN	Zip Code 55101-4453
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Capital Hill Strategies	Occupation Government Affairs Consultant	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) B. McLennan Welles		Date of Receipt M M / D D / Y Y Y Y 02 / 13 / 2014
Mailing Address 3439 Minnesota Ave		Transaction ID : VN8A3C8CCS4
City Duluth	State MN	Zip Code 55802-2561
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 340.00	

Full Name (Last, First, Middle Initial) C. McLennan Welles		Date of Receipt M M / D D / Y Y Y Y 03 / 26 / 2014
Mailing Address 3439 Minnesota Ave		Transaction ID : VN8A3CFMKV0
City Duluth	State MN	Zip Code 55802-2561
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 440.00	

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary Page

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

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

Norman D. Whealy

Mailing Address 1937 S Owyhee St

City

Boise

State

ID

Zip Code

83705-3341

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		05		2014

Transaction ID : VN8A3CBAV91

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

Eugene Wiese

Mailing Address 6316 Walnut Bend Ter

City

Midlothian

State

VA

Zip Code

23112-2391

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

140.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		08		2014

Transaction ID : VN8A3BWGND3

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)

Eugene Wiese

Mailing Address 6316 Walnut Bend Ter

City

Midlothian

State

VA

Zip Code

23112-2391

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

190.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		10		2014

Transaction ID : VN8A3CC20J5

Amount of Each Receipt this Period

50.00

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

120.00

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

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

Use separate schedule(s)
for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

Eugene Wiese

A.

Mailing Address 6316 Walnut Bend Ter

City

Midlothian

State

VA

Zip Code

23112-2391

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		26		2014

Transaction ID : VN8A3CFMT60

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

Diane Wiley

B.

Mailing Address 126 N 3rd St
Ste 515

City

Minneapolis

State

MN

Zip Code

55401-1685

FEC ID number of contributing
federal political committee.

C

Name of Employer

NJP Midwest

Occupation

Senior Litigation Consultant

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		17		2014

Transaction ID : VN8A3CE3AD6

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

Diane Wiley

C.

Mailing Address 126 N 3rd St
Ste 515

City

Minneapolis

State

MN

Zip Code

55401-1685

FEC ID number of contributing
federal political committee.

C

Name of Employer

NJP Midwest

Occupation

Senior Litigation Consultant

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		23		2014

Transaction ID : VN8A3CF50P4

Amount of Each Receipt this Period

100.00

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

165.00

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

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

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Charles Williams JR
 Mailing Address 3021 Woodbridge St

City State Zip Code
 Roseville MN 55113-2131

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Retired

Occupation
 Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M / D D / Y Y Y Y
 03 12 2014

Transaction ID : VN8A3CCJ7F1

Amount of Each Receipt this Period

300.00

B. Full Name (Last, First, Middle Initial)
Helen Wilson
 Mailing Address 2399 Harris Rd

City State Zip Code
 Mariposa CA 95338-9761

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Not Employed

Occupation
 Not Employed

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

160.00

Date of Receipt

M M / D D / Y Y Y Y
 01 05 2014

Transaction ID : VN8A3BVNPC6

Amount of Each Receipt this Period

25.00

C. Full Name (Last, First, Middle Initial)
Helen Wilson
 Mailing Address 2399 Harris Rd

City State Zip Code
 Mariposa CA 95338-9761

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Not Employed

Occupation
 Not Employed

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

185.00

Date of Receipt

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

Transaction ID : VN8A3C66DF6

Amount of Each Receipt this Period

25.00

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

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

350.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

Helen Wilson

Mailing Address 2399 Harris Rd

City

Mariposa

State

CA

Zip Code

95338-9761

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		05		2014

Transaction ID : VN8A3CB96N2

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

Medora Woods

Mailing Address 4311 Cedar Lake Rd S

City

Saint Louis Park

State

MN

Zip Code

55416-3760

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		05		2014

Transaction ID : VN8A3CB8FC2

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Suzanne C Woods

Mailing Address 6745 Lakeway Dr

City

Chanhassen

State

MN

Zip Code

55317-7579

FEC ID number of contributing
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2014

Transaction ID : VN8A3CCB2K7

Amount of Each Receipt this Period

500.00

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

625.00

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

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

Use separate schedule(s)
for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial)

Jean Wylie

Mailing Address 4300 W River Pkwy
Apt 363

City	State	Zip Code
Minneapolis	MN	55406-3680

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		03		2014

Transaction ID : VN8A3CCAVE2

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

Jean Wylie

Mailing Address 4300 W River Pkwy
Apt 363

City	State	Zip Code
Minneapolis	MN	55406-3680

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

620.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		13		2014

Transaction ID : VN8A3BXHVG0

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

Jean Wylie

Mailing Address 4300 W River Pkwy
Apt 363

City	State	Zip Code
Minneapolis	MN	55406-3680

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

630.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		13		2014

Transaction ID : VN8A3C8AD93

Amount of Each Receipt this Period

10.00

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

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

95.00

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

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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial) Jean Wylie		Date of Receipt M M / D D / Y Y Y Y 03 / 06 / 2014	
Mailing Address 4300 W River Pkwy Apt 363		Transaction ID : VN8A3CBD2T5	
City Minneapolis	State MN	Zip Code 55406-3680	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 730.00		

B. Full Name (Last, First, Middle Initial) Jean Wylie		Date of Receipt M M / D D / Y Y Y Y 03 / 13 / 2014	
Mailing Address 4300 W River Pkwy Apt 363		Transaction ID : VN8A3CDAJF1	
City Minneapolis	State MN	Zip Code 55406-3680	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 740.00		

C. Full Name (Last, First, Middle Initial) Jean Wylie		Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2014	
Mailing Address 4300 W River Pkwy Apt 363		Transaction ID : VN8A3CJHRQ1	
City Minneapolis	State MN	Zip Code 55406-3680	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 815.00		

SUBTOTAL of Receipts This Page (optional).....	185.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial) Ellen Zablow		Date of Receipt M M / D D / Y Y Y Y 03 / 14 / 2014	
Mailing Address 305 W 28th St Apt 18H City New York State NY Zip Code 10001-7935		Transaction ID : VN8A3CDDXN5	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00	
Name of Employer Retired Occupation Retired			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 265.00	
B. Full Name (Last, First, Middle Initial) Raied Zahriyeh		Date of Receipt M M / D D / Y Y Y Y 02 / 07 / 2014	
Mailing Address 34 Ocean Ct City Staten Island State NY Zip Code 10301-4563		Transaction ID : VN8A3C6VM72	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Fresh n Save Gourmet Food Market Occupation Supervisor			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00	
C. Full Name (Last, First, Middle Initial) Sabih Zaman		Date of Receipt M M / D D / Y Y Y Y 03 / 01 / 2014	
Mailing Address 4940 Underwood Ln N Unit G City Plymouth State MN Zip Code 55442-4517		Transaction ID : VN8A3CAPJ43	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer General Electric Occupation Marketing			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00	
SUBTOTAL of Receipts This Page (optional).....		535.00	
TOTAL This Period (last page this line number only).....		124008.00	

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial)

A. American Federation of Government Employees PAC

Mailing Address 80 F St NW

City

Washington

State

DC

Zip Code

20001-1528

FEC ID number of contributing federal political committee.

C C00009936

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 11 / 2014

Transaction ID : VN8A3CCAT66

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. American Federation of Teachers AFL-CIO Committee on Political Education

Mailing Address 555 New Jersey Ave NW

City

Washington

State

DC

Zip Code

20001-2029

FEC ID number of contributing federal political committee.

C C00028860

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y
02 / 19 / 2014

Transaction ID : VN8A3C935C7

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

C. BAKERY, CONFECTIONERY, TOBACCO WORKERS AND GRAIN MILLERS INTERNATIONAL UNION

Mailing Address 10401 Connecticut Ave

City

Kensington

State

MD

Zip Code

20895-3961

FEC ID number of contributing federal political committee.

C C00127621

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

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

Transaction ID : VN8A3C67H95

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 3) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 149 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
Comcast Corp. PAC

Mailing Address 1500 Market St

City	State	Zip Code
Philadelphia	PA	19102-2100

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer	Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		11		2014

Transaction ID : VN8A3CCAT09

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
General Mills PAC

Mailing Address 1 General Mills Blvd

City	State	Zip Code
Minneapolis	MN	55426-1348

FEC ID number of contributing federal political committee. **C** C00062646

Name of Employer	Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 4000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		18		2014

Transaction ID : VN8A3CE8W90

Amount of Each Receipt this Period

2000.00

C. Full Name (Last, First, Middle Initial)
Gray, Plant, Mooty, Mooty and Bennett National PAC

Mailing Address 500 IDS Center

City	State	Zip Code
Minneapolis	MN	55402

FEC ID number of contributing federal political committee. **C** C00099473

Name of Employer	Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 3000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		18		2014

Transaction ID : VN8A3CE7YR6

Amount of Each Receipt this Period

3000.00

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

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

6000.00

FOR LINE NUMBER:
(check only one)

Diagram illustrating a 1D lattice with 6 sites. The sites are labeled 11a, 11b, 11c, 11d, 12, 13a, 13b, 14, and 15. Site 11c is marked with an 'X' in the top box, indicating a defect or excitation.

NAME OF COMMITTEE (In Full)
Ellison for Congress

3000.00

1000.00

1000.00

1000.00

2000.00

1000.00

3000.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 151 OF 222

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Ellison for Congress

A. Full Name (Last, First, Middle Initial)
National Education Association Fund for Children And Public Education

Mailing Address 1201 16th St NW

City	State	Zip Code
Washington	DC	20036-3290

FEC ID number of contributing federal political committee.

C C00003251

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		08		2014

Transaction ID : VN8A3BWGJQ6

Amount of Each Receipt this Period

2000.00

B. Full Name (Last, First, Middle Initial)
OHIO ASSOCIATION OF INDEPENDENT TITLE AGENTS POLITICAL ACTION COMMITTEE

Mailing Address 216 Bradenton Ave

City	State	Zip Code
Dublin	OH	43017-7515

FEC ID number of contributing federal political committee.

C C00471250

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		19		2014

Transaction ID : VN8A3C935K2

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
RGA Reinsurance Company Federal PAC

Mailing Address 1370 Timberlake Manor Pkwy

City	State	Zip Code
Chesterfield	MO	63017-6039

FEC ID number of contributing federal political committee.

C C00461129

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		10		2014

Transaction ID : VN8A3CC3FP4

Amount of Each Receipt this Period

2000.00

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

5000.00

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

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

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

FOR LINE NUMBER:

PAGE 152 OF 222

(check only one)

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

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

United Steelworkers Political Action Fund

Mailing Address Five Gateway Center

City

Pittsburgh

State

PA

Zip Code

15222

FEC ID number of contributing
federal political committee.

C C00003590

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2014

Transaction ID : VN8A3CGZY01

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

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

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

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

Amount of Each Receipt this Period

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

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

5000.00

23500.00

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

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

FOR LINE NUMBER:

PAGE 153 OF 222

(check only one)

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

ADP, Inc.

A.

Mailing Address 8100 Old Cedar Ave S

City

Minneapolis

State

MN

Zip Code

55425-1802

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

294.78

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		22		2014

Transaction ID : VN8A3CJHVA5

Amount of Each Receipt this Period

76.60

Refund

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

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

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

76.60

76.60

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 154 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. 1-800-Flowers.com

Date of Disbursement

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

Mailing Address 1 Old Country Rd
Ste 500City State Zip Code
Carle Place NY 11514-1847Purpose of Disbursement
Event Expense

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

302.46

Transaction ID : VN7AV9RR838

B. 1-800-Flowers.com

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		20		2014

Mailing Address 1 Old Country Rd
Ste 500City State Zip Code
Carle Place NY 11514-1847Purpose of Disbursement
Event Expense

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

54.98

Transaction ID : VN7AV9RR846

C. 1-800-Flowers.com

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		03		2014

Mailing Address 1 Old Country Rd
Ste 500City State Zip Code
Carle Place NY 11514-1847Purpose of Disbursement
Event Expense

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

119.04

Transaction ID : VN7AV9RVME0

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

476.48

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

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

FOR LINE NUMBER:
(check only one)

PAGE 155 OF 222

☒ 17 ☐ 18 ☐ 19a ☐ 19b
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. 1-800-Flowers.com

Mailing Address 1 Old Country Rd
Ste 500

City State Zip Code
Carle Place NY 11514-1847

Purpose of Disbursement
Event Expense

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 12 / 2014

Amount of Each Disbursement this Period

54.98

Transaction ID : VN7AV9RVMG6

B. 1-800-Flowers.com

Mailing Address 1 Old Country Rd
Ste 500

City State Zip Code
Carle Place NY 11514-1847

Purpose of Disbursement
Event Expense

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 21 / 2014

Amount of Each Disbursement this Period

99.96

Transaction ID : VN7AV9RVMH4

C. 1-800-Flowers.com

Mailing Address 1 Old Country Rd
Ste 500

City State Zip Code
Carle Place NY 11514-1847

Purpose of Disbursement
Event Expense

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 25 / 2014

Amount of Each Disbursement this Period

59.93

Transaction ID : VN7AV9RW844

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

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

214.87

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 156 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Acorn Mini Storage

Mailing Address 4652 Lyndale Ave N

City	State	Zip Code
Minneapolis	MN	55412-1441

Purpose of Disbursement
Storage Rent

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		24		2014

Amount of Each Disbursement this Period

113.00

Transaction ID : VN7AV9R1J28

B. Acorn Mini Storage

Mailing Address 4652 Lyndale Ave N

City	State	Zip Code
Minneapolis	MN	55412-1441

Purpose of Disbursement
Storage Rent

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		17		2014

Amount of Each Disbursement this Period

113.00

Transaction ID : VN7AV9RR854

C. Acorn Mini Storage

Mailing Address 4652 Lyndale Ave N

City	State	Zip Code
Minneapolis	MN	55412-1441

Purpose of Disbursement
Storage Rent

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		21		2014

Amount of Each Disbursement this Period

113.00

Transaction ID : VN7AV9RVMJ2

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

339.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 157 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Actblue Technical

Mailing Address PO Box 382110

City	State	Zip Code
Cambridge	MA	02238-2110

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		05		2014

Amount of Each Disbursement this Period

5.61

Transaction ID : VN7AV9R1J93

B. Actblue Technical

Mailing Address PO Box 382110

City	State	Zip Code
Cambridge	MA	02238-2110

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		12		2014

Amount of Each Disbursement this Period

1.59

Transaction ID : VN7AV9R1JD5

C. Actblue Technical

Mailing Address PO Box 382110

City	State	Zip Code
Cambridge	MA	02238-2110

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		20		2014

Amount of Each Disbursement this Period

0.99

Transaction ID : VN7AV9R1JE3

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

8.19

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 158 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Actblue Technical

Mailing Address PO Box 382110

City	State	Zip Code
Cambridge	MA	02238-2110

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		26		2014

Amount of Each Disbursement this Period

0.99

Transaction ID : VN7AV9R1JF1

B. Actblue Technical

Mailing Address PO Box 382110

City	State	Zip Code
Cambridge	MA	02238-2110

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

6.35

Transaction ID : VN7AV9RR862

C. Actblue Technical

Mailing Address PO Box 382110

City	State	Zip Code
Cambridge	MA	02238-2110

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		09		2014

Amount of Each Disbursement this Period

3.97

Transaction ID : VN7AV9RR879

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

11.31

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 159 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Actblue Technical

Mailing Address PO Box 382110

City	State	Zip Code
Cambridge	MA	02238-2110

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		02		2014

Amount of Each Disbursement this Period

3.67

Transaction ID : VN7AV9RVMK0

B. Actblue Technical

Mailing Address PO Box 382110

City	State	Zip Code
Cambridge	MA	02238-2110

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		09		2014

Amount of Each Disbursement this Period

5.56

Transaction ID : VN7AV9RVMM8

C. Actblue Technical

Mailing Address PO Box 382110

City	State	Zip Code
Cambridge	MA	02238-2110

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		16		2014

Amount of Each Disbursement this Period

1.48

Transaction ID : VN7AV9RVMN5

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

10.71

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 160 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Actblue Technical

Mailing Address PO Box 382110

City	State	Zip Code
Cambridge	MA	02238-2110

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2014

Amount of Each Disbursement this Period

4.30

Transaction ID : VN7AV9RX1C1

B. ADP, Inc.

Mailing Address 8100 Old Cedar Ave S

City	State	Zip Code
Minneapolis	MN	55425-1802

Purpose of Disbursement
Payroll - See Memos

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		03		2014

Amount of Each Disbursement this Period

5671.64

Transaction ID : VN7AV9PJSV0

C. ADP, Inc.

Mailing Address 8100 Old Cedar Ave S

City	State	Zip Code
Minneapolis	MN	55425-1802

Purpose of Disbursement
Payroll Taxes

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		03		2014

Amount of Each Disbursement this Period

1983.70

Transaction ID : VN7AV9PJSX6

[MEMO ITEM]

*

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

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

5675.94

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 161 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Dinah M DaleMailing Address 5610 Laurel Ave
321City State Zip Code
Golden Valley MN 55416-1048Purpose of Disbursement
Payroll

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		03		2014

Amount of Each Disbursement this Period

2240.18

Transaction ID : VN7AV9PJT00

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. David A LeonardMailing Address 7425 Oak Park Village Dr
Apt 3City State Zip Code
Saint Louis Park MN 55426-4142Purpose of Disbursement
Payroll

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		03		2014

Amount of Each Disbursement this Period

1447.76

Transaction ID : VN7AV9PJT33

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. ADP, Inc.

Mailing Address 8100 Old Cedar Ave S

City State Zip Code
Minneapolis MN 55425-1802Purpose of Disbursement
Payroll Service Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		10		2014

Amount of Each Disbursement this Period

60.60

Transaction ID : VN7AV9R1JJ5

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

60.60

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 162 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. ADP, Inc.

Mailing Address 8100 Old Cedar Ave S

City	State	Zip Code
Minneapolis	MN	55425-1802

Purpose of Disbursement
Payroll - See Memos

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		17		2014

Amount of Each Disbursement this Period

5595.04

Transaction ID : VN7AV9Q5BB4

B. ADP, Inc.

Mailing Address 8100 Old Cedar Ave S

City	State	Zip Code
Minneapolis	MN	55425-1802

Purpose of Disbursement
Payroll Taxes

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		17		2014

Amount of Each Disbursement this Period

1907.10

Transaction ID : VN7AV9Q5BC2

[MEMO ITEM]

*

c. Dinah M DaleMailing Address 5610 Laurel Ave
321

City	State	Zip Code
Golden Valley	MN	55416-1048

Purpose of Disbursement
Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		17		2014

Amount of Each Disbursement this Period

2240.18

Transaction ID : VN7AV9Q5BD0

[MEMO ITEM]

*

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

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

5595.04

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 163 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. David A LeonardMailing Address 7425 Oak Park Village Dr
Apt 3City State Zip Code
Saint Louis Park MN 55426-4142Purpose of Disbursement
Payroll

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
01 / 17 / 2014

Amount of Each Disbursement this Period

1447.76

Transaction ID : VN7AV9Q5BE8

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. ADP, Inc.

Mailing Address 8100 Old Cedar Ave S

City State Zip Code
Minneapolis MN 55425-1802Purpose of Disbursement
Payroll Service Fees

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
01 / 21 / 2014

Amount of Each Disbursement this Period

40.00

Transaction ID : VN7AV9R1JK2

Full Name (Last, First, Middle Initial)

C. ADP, Inc.

Mailing Address 8100 Old Cedar Ave S

City State Zip Code
Minneapolis MN 55425-1802Purpose of Disbursement
Payroll Service Fees

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
01 / 21 / 2014

Amount of Each Disbursement this Period

49.00

Transaction ID : VN7AV9R1JM0

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

89.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 164 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. ADP, Inc.

Mailing Address 8100 Old Cedar Ave S

City	State	Zip Code
Minneapolis	MN	55425-1802

Purpose of Disbursement
Payroll Service Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		24		2014

Amount of Each Disbursement this Period

60.60

Transaction ID : VN7AV9R1JP6

B. ADP, Inc.

Mailing Address 8100 Old Cedar Ave S

City	State	Zip Code
Minneapolis	MN	55425-1802

Purpose of Disbursement
Payroll - See Memos

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

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

Amount of Each Disbursement this Period

6870.75

Transaction ID : VN7AV9QRPZ5

C. ADP, Inc.

Mailing Address 8100 Old Cedar Ave S

City	State	Zip Code
Minneapolis	MN	55425-1802

Purpose of Disbursement
Payroll Taxes

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

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

Amount of Each Disbursement this Period

2303.48

Transaction ID : VN7AV9QRQ03

[MEMO ITEM]

*

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

6931.35

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 165 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Dinah M DaleMailing Address 5610 Laurel Ave
321City State Zip Code
Golden Valley MN 55416-1048Purpose of Disbursement
Payroll

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

2240.18

Transaction ID : VN7AV9QRQ11

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. David A LeonardMailing Address 7425 Oak Park Village Dr
Apt 3City State Zip Code
Saint Louis Park MN 55426-4142Purpose of Disbursement
Payroll

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

1447.77

Transaction ID : VN7AV9QRQ29

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

c. Justin Young

Mailing Address 2131 Watson Ave

City State Zip Code
Saint Paul MN 55116-1147Purpose of Disbursement
Payroll

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

879.32

Transaction ID : VN7AV9QRQ37

[MEMO ITEM]

*

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

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

0.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 166 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. ADP, Inc.

Mailing Address 8100 Old Cedar Ave S

City	State	Zip Code
Minneapolis	MN	55425-1802

Purpose of Disbursement
Payroll Service Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

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

Amount of Each Disbursement this Period

64.10

Transaction ID : VN7AV9RR887

B. ADP, Inc.

Mailing Address 8100 Old Cedar Ave S

City	State	Zip Code
Minneapolis	MN	55425-1802

Purpose of Disbursement
Payroll - See Memos

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02	/	20	/	2014

Amount of Each Disbursement this Period

7123.44

Transaction ID : VN7AV9REYV4

C. ADP, Inc.

Mailing Address 8100 Old Cedar Ave S

City	State	Zip Code
Minneapolis	MN	55425-1802

Purpose of Disbursement
Payroll Taxes

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02	/	20	/	2014

Amount of Each Disbursement this Period

2393.09

Transaction ID : VN7AV9REYW2

[MEMO ITEM]

*

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

7187.54

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 167 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Dinah M DaleMailing Address 5610 Laurel Ave
321City State Zip Code
Golden Valley MN 55416-1048Purpose of Disbursement
Payroll

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		20		2014

Amount of Each Disbursement this Period

2240.18

Transaction ID : VN7AV9REYX0

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. David A LeonardMailing Address 7425 Oak Park Village Dr
Apt 3City State Zip Code
Saint Louis Park MN 55426-4142Purpose of Disbursement
Payroll

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		20		2014

Amount of Each Disbursement this Period

1447.76

Transaction ID : VN7AV9REYY8

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

c. Justin Young

Mailing Address 2131 Watson Ave

City State Zip Code
Saint Paul MN 55116-1147Purpose of Disbursement
Payroll

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		20		2014

Amount of Each Disbursement this Period

1042.41

Transaction ID : VN7AV9REYZ6

[MEMO ITEM]

*

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

0.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 168 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. ADP, Inc.

Mailing Address 8100 Old Cedar Ave S

City	State	Zip Code
Minneapolis	MN	55425-1802

Purpose of Disbursement
Payroll Service Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		28		2014

Amount of Each Disbursement this Period

64.10

Transaction ID : VN7AV9RR895

B. ADP, Inc.

Mailing Address 8100 Old Cedar Ave S

City	State	Zip Code
Minneapolis	MN	55425-1802

Purpose of Disbursement
Payroll - See Memos

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		05		2014

Amount of Each Disbursement this Period

8066.60

Transaction ID : VN7AV9REYP5

C. ADP, Inc.

Mailing Address 8100 Old Cedar Ave S

City	State	Zip Code
Minneapolis	MN	55425-1802

Purpose of Disbursement
Payroll Taxes

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		05		2014

Amount of Each Disbursement this Period

2825.22

Transaction ID : VN7AV9REYQ2

[MEMO ITEM]

*

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

8130.70

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 169 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Dinah M DaleMailing Address 5610 Laurel Ave
321City State Zip Code
Golden Valley MN 55416-1048Purpose of Disbursement
Payroll

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		05		2014

Amount of Each Disbursement this Period

2240.18

Transaction ID : VN7AV9REYR0

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. David A LeonardMailing Address 7425 Oak Park Village Dr
Apt 3City State Zip Code
Saint Louis Park MN 55426-4142Purpose of Disbursement
Payroll

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		05		2014

Amount of Each Disbursement this Period

1958.80

Transaction ID : VN7AV9REYS8

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Justin Young

Mailing Address 2131 Watson Ave

City State Zip Code
Saint Paul MN 55116-1147Purpose of Disbursement
Payroll

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		05		2014

Amount of Each Disbursement this Period

1042.40

Transaction ID : VN7AV9REYT6

[MEMO ITEM]

*

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

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

0.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 170 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. ADP, Inc.

Mailing Address 8100 Old Cedar Ave S

City	State	Zip Code
Minneapolis	MN	55425-1802

Purpose of Disbursement
Payroll Service Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 14 / 2014

Amount of Each Disbursement this Period

64.10

Transaction ID : VN7AV9RVMP3

B. ADP, Inc.

Mailing Address 8100 Old Cedar Ave S

City	State	Zip Code
Minneapolis	MN	55425-1802

Purpose of Disbursement
Payroll - See Memos

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 20 / 2014

Amount of Each Disbursement this Period

7353.04

Transaction ID : VN7AV9RS5T0

C. ADP, Inc.

Mailing Address 8100 Old Cedar Ave S

City	State	Zip Code
Minneapolis	MN	55425-1802

Purpose of Disbursement
Payroll Taxes

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 20 / 2014

Amount of Each Disbursement this Period

2488.52

Transaction ID : VN7AV9RS5V8

[MEMO ITEM]

*

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

7417.14

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 171 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Dinah M DaleMailing Address 5610 Laurel Ave
321City State Zip Code
Golden Valley MN 55416-1048Purpose of Disbursement
Payroll

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		20		2014

Amount of Each Disbursement this Period

2240.18

Transaction ID : VN7AV9RS5W6

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. David A LeonardMailing Address 7425 Oak Park Village Dr
Apt 3City State Zip Code
Saint Louis Park MN 55426-4142Purpose of Disbursement
Payroll

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		20		2014

Amount of Each Disbursement this Period

1581.93

Transaction ID : VN7AV9RS5X3

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Justin Young

Mailing Address 2131 Watson Ave

City State Zip Code
Saint Paul MN 55116-1147Purpose of Disbursement
Payroll

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		20		2014

Amount of Each Disbursement this Period

1042.41

Transaction ID : VN7AV9RS5Y1

[MEMO ITEM]

*

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

0.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 172 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. ADP, Inc.

Mailing Address 8100 Old Cedar Ave S

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		28		2014

City	State	Zip Code
Minneapolis	MN	55425-1802

Purpose of Disbursement
Payroll Service Fees

Amount of Each Disbursement this Period

64.10

Transaction ID : VN7AV9RW852

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

B. Aloft Chicago

Mailing Address 515 N Clark St

Date of Disbursement

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

City	State	Zip Code
Chicago	IL	60654-3279

Purpose of Disbursement
Travel

Amount of Each Disbursement this Period

103.60

Transaction ID : VN7AV9RR8A3

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

C. Aloft Chicago

Mailing Address 515 N Clark St

Date of Disbursement

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

City	State	Zip Code
Chicago	IL	60654-3279

Purpose of Disbursement
Travel

Amount of Each Disbursement this Period

47.00

Transaction ID : VN7AV9RR8B1

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

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

214.70

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Aloft Chicago

Mailing Address 515 N Clark St

Date of Disbursement

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

City	State	Zip Code
Chicago	IL	60654-3279

Purpose of Disbursement
Travel

Amount of Each Disbursement this Period

7	8	9	0	1	2	3	4	5	6	7	8	9	0	.	1	2	3	4	5	6	7	8	9	0		

Transaction ID : VN7AV9RR8C9

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. American AirlinesMailing Address PO Box 619612
MD 2400

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		21		2014

City	State	Zip Code
Dfw Airport	TX	75261-9612

Purpose of Disbursement
Travel

Amount of Each Disbursement this Period

7	8	9	0	1	2	3	4	5	6	7	8	9	0	.	1	2	3	4	5	6	7	8	9		

Transaction ID : VN7AV9R1JT8

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. American AirlinesMailing Address PO Box 619612
MD 2400

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		21		2014

City	State	Zip Code
Dfw Airport	TX	75261-9612

Purpose of Disbursement
Travel

Amount of Each Disbursement this Period

7	8	9	0	1	2	3	4	5	6	7	8	9	0	.	1	2	3	4	5	6	7	8	9		

Transaction ID : VN7AV9R1JW4

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

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

786.06

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 174 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. American AirlinesMailing Address PO Box 619612
MD 2400City State Zip Code
Dfw Airport TX 75261-9612Purpose of Disbursement
Travel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

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

Amount of Each Disbursement this Period

744.99

Transaction ID : VN7AV9RR8D7

B. American AirlinesMailing Address PO Box 619612
MD 2400City State Zip Code
Dfw Airport TX 75261-9612Purpose of Disbursement
Travel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		26		2014

Amount of Each Disbursement this Period

1177.00

Transaction ID : VN7AV9RW860

C. American AirlinesMailing Address PO Box 619612
MD 2400City State Zip Code
Dfw Airport TX 75261-9612Purpose of Disbursement
Travel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		26		2014

Amount of Each Disbursement this Period

174.50

Transaction ID : VN7AV9RW878

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

2096.49

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 175 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. American AirlinesMailing Address PO Box 619612
MD 2400City State Zip Code
Dfw Airport TX 75261-9612Purpose of Disbursement
Travel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		26		2014

Amount of Each Disbursement this Period

39.99

Transaction ID : VN7AV9RW886

B. American AirlinesMailing Address PO Box 619612
MD 2400City State Zip Code
Dfw Airport TX 75261-9612Purpose of Disbursement
Travel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		26		2014

Amount of Each Disbursement this Period

22.62

Transaction ID : VN7AV9RW894

c. American Express

Mailing Address PO Box 53852

City State Zip Code
Phoenix AZ 85072-3852Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		02		2014

Amount of Each Disbursement this Period

7.95

Transaction ID : VN7AV9R1JX1

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

70.56

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 176 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 53852

City	State	Zip Code
Phoenix	AZ	85072-3852

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		06		2014

Amount of Each Disbursement this Period

203.04

Transaction ID : VN7AV9R1JY9

B. American Express

Mailing Address PO Box 53852

City	State	Zip Code
Phoenix	AZ	85072-3852

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		06		2014

Amount of Each Disbursement this Period

43.89

Transaction ID : VN7AV9R1JZ7

C. American Express

Mailing Address PO Box 53852

City	State	Zip Code
Phoenix	AZ	85072-3852

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2014

Amount of Each Disbursement this Period

7.95

Transaction ID : VN7AV9RR8E5

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

254.88

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 177 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 53852

City	State	Zip Code
Phoenix	AZ	85072-3852

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2014

Amount of Each Disbursement this Period

7.95

Transaction ID : VN7AV9RR8H8

B. American Express

Mailing Address PO Box 53852

City	State	Zip Code
Phoenix	AZ	85072-3852

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

104.11

Transaction ID : VN7AV9RR8G1

C. American Express

Mailing Address PO Box 53852

City	State	Zip Code
Phoenix	AZ	85072-3852

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

32.17

Transaction ID : VN7AV9RR8J6

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

144.23

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 178 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 53852

City	State	Zip Code
Phoenix	AZ	85072-3852

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 03 / 2014

Amount of Each Disbursement this Period

7.95

Transaction ID : VN7AV9RVMQ1

B. American Express

Mailing Address PO Box 53852

City	State	Zip Code
Phoenix	AZ	85072-3852

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 03 / 2014

Amount of Each Disbursement this Period

7.95

Transaction ID : VN7AV9RVMT5

C. American Express

Mailing Address PO Box 53852

City	State	Zip Code
Phoenix	AZ	85072-3852

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 05 / 2014

Amount of Each Disbursement this Period

86.94

Transaction ID : VN7AV9RVMS7

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

102.84

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 179 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 53852

City	State	Zip Code
Phoenix	AZ	85072-3852

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		05		2014

Amount of Each Disbursement this Period

362.90

Transaction ID : VN7AV9RVMV3

B. Amtrak

Mailing Address 2955 Market St

City	State	Zip Code
Philadelphia	PA	19104-2898

Purpose of Disbursement
Travel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		21		2014

Amount of Each Disbursement this Period

304.00

Transaction ID : VN7AV9R1K05

C. Amtrak

Mailing Address 2955 Market St

City	State	Zip Code
Philadelphia	PA	19104-2898

Purpose of Disbursement
Travel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		17		2014

Amount of Each Disbursement this Period

38.00

Transaction ID : VN7AV9RVMW1

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

362.90

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 180 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Amtrak

Mailing Address 2955 Market St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		17		2014

City	State	Zip Code
Philadelphia	PA	19104-2898

Purpose of Disbursement
Travel

Amount of Each Disbursement this Period

727.51

Transaction ID : VN7AV9RVMX9

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. Atomic

Mailing Address 615 N 3rd St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		17		2014

City	State	Zip Code
Minneapolis	MN	55401-4401

Purpose of Disbursement
Computer Expense

Amount of Each Disbursement this Period

397.73

Transaction ID : VN7AV9RR8K4

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C. Atomic

Mailing Address 615 N 3rd St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		21		2014

City	State	Zip Code
Minneapolis	MN	55401-4401

Purpose of Disbursement
Computer Expense

Amount of Each Disbursement this Period

160.78

Transaction ID : VN7AV9RVN36

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

727.51

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 181 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Bankcard Assoc

Mailing Address 2221 W Broadway St

City	State	Zip Code
Fort Worth	TX	76102-4311

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		02		2014

Amount of Each Disbursement this Period

12.95

Transaction ID : VN7AV9R1K39

B. Bankcard Assoc

Mailing Address 2221 W Broadway St

City	State	Zip Code
Fort Worth	TX	76102-4311

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		02		2014

Amount of Each Disbursement this Period

183.15

Transaction ID : VN7AV9R1K47

C. Bankcard Assoc

Mailing Address 2221 W Broadway St

City	State	Zip Code
Fort Worth	TX	76102-4311

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

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

Amount of Each Disbursement this Period

12.95

Transaction ID : VN7AV9RR8N0

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

209.05

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 182 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Bankcard Assoc

Mailing Address 2221 W Broadway St

City	State	Zip Code
Fort Worth	TX	76102-4311

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

197.08

Transaction ID : VN7AV9RR8P8

B. Bankcard Assoc

Mailing Address 2221 W Broadway St

City	State	Zip Code
Fort Worth	TX	76102-4311

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		03		2014

Amount of Each Disbursement this Period

12.95

Transaction ID : VN7AV9RVN44

c. Bankcard Assoc

Mailing Address 2221 W Broadway St

City	State	Zip Code
Fort Worth	TX	76102-4311

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		03		2014

Amount of Each Disbursement this Period

227.56

Transaction ID : VN7AV9RVN60

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

437.59

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 183 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Bayside Hotel Santa Monica

Mailing Address 2001 Ocean Ave

City	State	Zip Code
Santa Monica	CA	90405-1011

Purpose of Disbursement
Travel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		11		2014

Amount of Each Disbursement this Period

512.26

Transaction ID : VN7AV9RVPT1

B. Beth Foster Consultants LLC

Mailing Address 2102 W 49th St

City	State	Zip Code
Minneapolis	MN	55419-5230

Purpose of Disbursement
Consulting - Direct Mail

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		17		2014

Amount of Each Disbursement this Period

1600.00

Transaction ID : VN7AV9RR8W5

c. Beth Foster Consultants LLC

Mailing Address 2102 W 49th St

City	State	Zip Code
Minneapolis	MN	55419-5230

Purpose of Disbursement
Consulting - Direct Mail

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		21		2014

Amount of Each Disbursement this Period

1600.00

Transaction ID : VN7AV9RT330

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

3712.26

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 184 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Big Sky Copywriting

Mailing Address 6710 Linda Vista Blvd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		02		2014

City	State	Zip Code
Missoula	MT	59803-2769

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement
Consulting - Direct MailCategory/
Type

Transaction ID : VN7AV9RT348

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. Dustin Brandenburg

Mailing Address 10146 Palmer Dr

Date of Disbursement

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

City	State	Zip Code
Oakton	VA	22124-2621

Amount of Each Disbursement this Period

565.62

Purpose of Disbursement
TravelCategory/
Type

Transaction ID : VN7AV9RR980

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. Broadway Pizza

Mailing Address 2025 W River Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		23		2014

City	State	Zip Code
Minneapolis	MN	55411-2226

Amount of Each Disbursement this Period

340.15

Purpose of Disbursement
Event Expense - Food & BeveragesCategory/
Type

Transaction ID : VN7AV9R1K63

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

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

2905.77

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 185 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Capital Accounting ServicesMailing Address 620 Wesley Commons Dr
Ste 28City State Zip Code
Golden Valley MN 55427-4079Purpose of Disbursement
Compliance Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		17		2014

Amount of Each Disbursement this Period

1500.00

Transaction ID : VN7AV9RR8Y1

B. Capital Accounting ServicesMailing Address 620 Wesley Commons Dr
Ste 28City State Zip Code
Golden Valley MN 55427-4079Purpose of Disbursement
Compliance Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		02		2014

Amount of Each Disbursement this Period

1500.00

Transaction ID : VN7AV9RVPX4

C. Capital Accounting ServicesMailing Address 620 Wesley Commons Dr
Ste 28City State Zip Code
Golden Valley MN 55427-4079Purpose of Disbursement
Compliance Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		21		2014

Amount of Each Disbursement this Period

1500.00

Transaction ID : VN7AV9RVPY2

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

4500.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 186 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. CHS Mailing

Mailing Address 12006 Old Baltimore Pike

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		22		2014

City	State	Zip Code
Beltsville	MD	20705-1412

Purpose of Disbursement
Direct Mailing

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

37331.75

Transaction ID : VN7AV9R1K88

B. CHS Mailing

Mailing Address 12006 Old Baltimore Pike

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		13		2014

City	State	Zip Code
Beltsville	MD	20705-1412

Purpose of Disbursement
Direct Mailing

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

5313.20

Transaction ID : VN7AV9RR8Z9

c. CHS Mailing

Mailing Address 12006 Old Baltimore Pike

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		12		2014

City	State	Zip Code
Beltsville	MD	20705-1412

Purpose of Disbursement
Direct Mailing

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

3933.36

Transaction ID : VN7AV9RVPZ0

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

46578.31

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 187 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Comcast

Mailing Address PO Box 34227

City	State	Zip Code
Seattle	WA	98124-1227

Purpose of Disbursement
Internet Service

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		21		2014

Amount of Each Disbursement this Period

140.61

Transaction ID : VN7AV9R1KA4

B. Comcast

Mailing Address PO Box 34227

City	State	Zip Code
Seattle	WA	98124-1227

Purpose of Disbursement
Internet Service

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		20		2014

Amount of Each Disbursement this Period

140.61

Transaction ID : VN7AV9RR907

C. Comcast

Mailing Address PO Box 34227

City	State	Zip Code
Seattle	WA	98124-1227

Purpose of Disbursement
Internet Service

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		20		2014

Amount of Each Disbursement this Period

140.61

Transaction ID : VN7AV9RVQ06

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

421.83

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 188 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Culligan Water

Mailing Address 7165 Boone Ave N

City	State	Zip Code
Brooklyn Park	MN	55428-1531

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		17		2014

Amount of Each Disbursement this Period

9.29

Transaction ID : VN7AV9RR923

B. Culligan Water

Mailing Address 7165 Boone Ave N

City	State	Zip Code
Brooklyn Park	MN	55428-1531

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		20		2014

Amount of Each Disbursement this Period

10.29

Transaction ID : VN7AV9RVQ14

c. Delta Air

Mailing Address PO Box 20706

City	State	Zip Code
Atlanta	GA	30320-6001

Purpose of Disbursement
Travel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		14		2014

Amount of Each Disbursement this Period

298.00

Transaction ID : VN7AV9R1KB2

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

317.58

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Delta Air

Mailing Address PO Box 20706

City	State	Zip Code
Atlanta	GA	30320-6001

Purpose of Disbursement
Travel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		13		2014

Amount of Each Disbursement this Period

255.00

Transaction ID : VN7AV9RR949

B. Delta Air

Mailing Address PO Box 20706

City	State	Zip Code
Atlanta	GA	30320-6001

Purpose of Disbursement
Travel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		20		2014

Amount of Each Disbursement this Period

740.00

Transaction ID : VN7AV9RR956

C. Delta Air

Mailing Address PO Box 20706

City	State	Zip Code
Atlanta	GA	30320-6001

Purpose of Disbursement
Travel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		10		2014

Amount of Each Disbursement this Period

572.00

Transaction ID : VN7AV9RVQ71

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

1567.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Delta Air

Mailing Address PO Box 20706

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		25		2014

City	State	Zip Code
Atlanta	GA	30320-6001

Purpose of Disbursement
Travel

Amount of Each Disbursement this Period

211.00

Transaction ID : VN7AV9RW8C7

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

B. Delta Air

Mailing Address PO Box 20706

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2014

City	State	Zip Code
Atlanta	GA	30320-6001

Purpose of Disbursement
Travel

Amount of Each Disbursement this Period

1033.00

Transaction ID : VN7AV9RW8D5

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

C. Deluxe Business Checks

Mailing Address PO Box 742572

Date of Disbursement

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

City	State	Zip Code
Cincinnati	OH	45274-2572

Purpose of Disbursement
Office Supplies

Amount of Each Disbursement this Period

50.67

Transaction ID : VN7AV9RR964

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

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

1294.67

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. First National Bank of the Lakes

Mailing Address 3100 Hennepin Ave

City	State	Zip Code
Minneapolis	MN	55408-2619

Purpose of Disbursement
Bank Fee

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		03		2014

Amount of Each Disbursement this Period

110.03

Transaction ID : VN7AV9R1KC0

B. First National Bank of the Lakes

Mailing Address 3100 Hennepin Ave

City	State	Zip Code
Minneapolis	MN	55408-2619

Purpose of Disbursement
Bank Fee

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		31		2014

Amount of Each Disbursement this Period

56.12

Transaction ID : VN7AV9R1KD8

C. First National Bank of the Lakes

Mailing Address 3100 Hennepin Ave

City	State	Zip Code
Minneapolis	MN	55408-2619

Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		28		2014

Amount of Each Disbursement this Period

137.36

Transaction ID : VN7AV9RR9A6

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

303.51

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. First National Bank of the Lakes

Mailing Address 3100 Hennepin Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2014

City	State	Zip Code
Minneapolis	MN	55408-2619

Amount of Each Disbursement this Period

186.88

Purpose of Disbursement
Bank Fees

Transaction ID : VN7AV9RW8E3

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. Guthrie

Mailing Address 818 S. 2nd St.

Date of Disbursement

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

City	State	Zip Code
Minneapolis	MN	55415

Amount of Each Disbursement this Period

318.38

Purpose of Disbursement
Event Expense - Food & Beverages

Transaction ID : VN7AV9RR9C2

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. Health Partners

Mailing Address PO Box 1289

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		31		2014

City	State	Zip Code
Minneapolis	MN	55440-1289

Amount of Each Disbursement this Period

1527.86

Purpose of Disbursement
Health Insurance

Transaction ID : VN7AV9R1KF4

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

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

2033.12

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Health Partners

Mailing Address PO Box 1289

City	State	Zip Code
Minneapolis	MN	55440-1289

Purpose of Disbursement
Health Insurance

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		02		2014

Amount of Each Disbursement this Period

2374.92

Transaction ID : VN7AV9RVQ89

B. Holiday Inn

Mailing Address 440 W 57th St

City	State	Zip Code
New York	NY	10019-3013

Purpose of Disbursement
Travel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		28		2014

Amount of Each Disbursement this Period

110.22

Transaction ID : VN7AV9R1KG2

c. Holiday Inn

Mailing Address 440 W 57th St

City	State	Zip Code
New York	NY	10019-3013

Purpose of Disbursement
Travel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		28		2014

Amount of Each Disbursement this Period

110.22

Transaction ID : VN7AV9R1KH9

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

2595.36

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 194 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Hudson Bay Co. of Illinois

Mailing Address 11032 Vera Cruz Ave N

City	State	Zip Code
Champlin	MN	55316-3549

Purpose of Disbursement
Fundraising Services

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		17		2014

Amount of Each Disbursement this Period

9804.82

Transaction ID : VN7AV9RR9D0

B. Hudson Bay Co. of Illinois

Mailing Address 11032 Vera Cruz Ave N

City	State	Zip Code
Champlin	MN	55316-3549

Purpose of Disbursement
Fundraising Services

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		02		2014

Amount of Each Disbursement this Period

4614.10

Transaction ID : VN7AV9RVQA5

c. Hyatt Hotels - Cambridge

Mailing Address 575 Memorial Dr

City	State	Zip Code
Cambridge	MA	02139-4814

Purpose of Disbursement
Travel

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

1150.00

Transaction ID : VN7AV9RR9F5

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

15568.92

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Hyatt Hotels - Cambridge

Mailing Address 575 Memorial Dr

City	State	Zip Code
Cambridge	MA	02139-4814

Purpose of Disbursement
Travel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		18		2014

Amount of Each Disbursement this Period

1150.00

Transaction ID : VN7AV9RR9G3

B. Integram

Mailing Address 22695 Commerce Center Ct

City	State	Zip Code
Dulles	VA	20166-2037

Purpose of Disbursement
Direct Mailing

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		21		2014

Amount of Each Disbursement this Period

3238.74

Transaction ID : VN7AV9RVQC1

C. Intuit

Mailing Address 2632 Marine Way

City	State	Zip Code
Mountain View	CA	94043-1126

Purpose of Disbursement
Computer Software

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		09		2014

Amount of Each Disbursement this Period

23.97

Transaction ID : VN7AV9R1KJ7

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

4412.71

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

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

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Intuit

Mailing Address 2632 Marine Way

City State Zip Code
 Mountain View CA 94043-1126

Purpose of Disbursement
 Computer Software

Candidate Name

Office Sought: ☐ House ☒ Senate ☐ President
 Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

23.97

Transaction ID : VN7AV9RR9H1

B. Intuit

Mailing Address 2632 Marine Way

City State Zip Code
 Mountain View CA 94043-1126

Purpose of Disbursement
 Computer Software

Candidate Name

Office Sought: ☐ House ☒ Senate ☐ President
 Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
 03 10 2014

Amount of Each Disbursement this Period

23.97

Transaction ID : VN7AV9RVQG2

c. ipHouse

Mailing Address 331 2nd Ave S
 Ste 540

City State Zip Code
 Minneapolis MN 55401-2243

Purpose of Disbursement
 Web Site

Candidate Name

Office Sought: ☐ House ☒ Senate ☐ President
 Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
 01 17 2014

Amount of Each Disbursement this Period

85.00

Transaction ID : VN7AV9R1KK5

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

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

132.94

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. ipHouseMailing Address 331 2nd Ave S
Ste 540City State Zip Code
Minneapolis MN 55401-2243Purpose of Disbursement
Web Site

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		20		2014

Amount of Each Disbursement this Period

85.00

Transaction ID : VN7AV9RR9J9

B. ipHouseMailing Address 331 2nd Ave S
Ste 540City State Zip Code
Minneapolis MN 55401-2243Purpose of Disbursement
Web Site

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		20		2014

Amount of Each Disbursement this Period

85.00

Transaction ID : VN7AV9RVQH0

C. David A LeonardMailing Address 7425 Oak Park Village Dr
Apt 3City State Zip Code
Saint Louis Park MN 55426-4142Purpose of Disbursement
Reimbursement/Mileage

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		13		2014

Amount of Each Disbursement this Period

267.16

Transaction ID : VN7AV9RR931

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

437.16

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Verizon Wireless

Mailing Address PO Box 25505

City	State	Zip Code
Lehigh Valley	PA	18002-5505

Purpose of Disbursement
Telephone

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		13		2014

Amount of Each Disbursement this Period

120.00

Transaction ID : VN7AV9RRAE7

[MEMO ITEM]

*

B. Linemark Printing

Mailing Address 501 Prince Georges Blvd

City	State	Zip Code
Upper Marlboro	MD	20774-7415

Purpose of Disbursement
Printing

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		21		2014

Amount of Each Disbursement this Period

17727.36

Transaction ID : VN7AV9RVQN2

C. Marriott Teaneck

Mailing Address 100 Frank W Burr Blvd

City	State	Zip Code
Teaneck	NJ	07666-6702

Purpose of Disbursement
Travel

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		23		2014

Amount of Each Disbursement this Period

159.85

Transaction ID : VN7AV9R1KP9

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

17887.21

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 199 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Marriott Teaneck

Mailing Address 100 Frank W Burr Blvd

City	State	Zip Code
Teaneck	NJ	07666-6702

Purpose of Disbursement
Travel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		24		2014

Amount of Each Disbursement this Period

159.85

Transaction ID : VN7AV9R1KQ7

B. Marriott Teaneck

Mailing Address 100 Frank W Burr Blvd

City	State	Zip Code
Teaneck	NJ	07666-6702

Purpose of Disbursement
Travel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		28		2014

Amount of Each Disbursement this Period

22.51

Transaction ID : VN7AV9R1KR5

C. Merchant BankcardMailing Address 1700 N Dixie Hwy
Ste 125

City	State	Zip Code
Boca Raton	FL	33432-1808

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		03		2014

Amount of Each Disbursement this Period

181.23

Transaction ID : VN7AV9R1KS3

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

363.59

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 200 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Merchant BankcardMailing Address 1700 N Dixie Hwy
Ste 125City State Zip Code
Boca Raton FL 33432-1808Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
01	06	2014

Amount of Each Disbursement this Period

55.85

Transaction ID : VN7AV9R1KT1

B. Merchant BankcardMailing Address 1700 N Dixie Hwy
Ste 125City State Zip Code
Boca Raton FL 33432-1808Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
01	06	2014

Amount of Each Disbursement this Period

154.63

Transaction ID : VN7AV9R1KV8

C. Merchant BankcardMailing Address 1700 N Dixie Hwy
Ste 125City State Zip Code
Boca Raton FL 33432-1808Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
02	04	2014

Amount of Each Disbursement this Period

47.77

Transaction ID : VN7AV9RR9P8

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

258.25

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 201 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Merchant BankcardMailing Address 1700 N Dixie Hwy
Ste 125City State Zip Code
Boca Raton FL 33432-1808Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		04		2014

Amount of Each Disbursement this Period

202.79

Transaction ID : VN7AV9RR9Q6

B. Merchant BankcardMailing Address 1700 N Dixie Hwy
Ste 125City State Zip Code
Boca Raton FL 33432-1808Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		04		2014

Amount of Each Disbursement this Period

61.35

Transaction ID : VN7AV9RR9R4

C. Merchant BankcardMailing Address 1700 N Dixie Hwy
Ste 125City State Zip Code
Boca Raton FL 33432-1808Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		04		2014

Amount of Each Disbursement this Period

83.60

Transaction ID : VN7AV9RVQR6

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

347.74

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 202 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Merchant BankcardMailing Address 1700 N Dixie Hwy
Ste 125City State Zip Code
Boca Raton FL 33432-1808Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		04		2014

Amount of Each Disbursement this Period

46.50

Transaction ID : VN7AV9RVQS3

B. Merchant BankcardMailing Address 1700 N Dixie Hwy
Ste 125City State Zip Code
Boca Raton FL 33432-1808Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		04		2014

Amount of Each Disbursement this Period

197.37

Transaction ID : VN7AV9RVQT1

C. Names in the NewsMailing Address 180 Grand Ave
Ste 1545City State Zip Code
Oakland CA 94612-3799Purpose of Disbursement
Direct Mail

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		13		2014

Amount of Each Disbursement this Period

1300.00

Transaction ID : VN7AV9RVR17

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

1543.87

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 203 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. National Democratic Club

Mailing Address 30 Ivy St SE

City	State	Zip Code
Washington	DC	20003-4071

Purpose of Disbursement
Event Expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		02		2014

Amount of Each Disbursement this Period

768.40

Transaction ID : VN7AV9RVR74

B. New Partners ConsultingMailing Address 1250 I St NW
Ste 200

City	State	Zip Code
Washington	DC	20005-5977

Purpose of Disbursement
Consulting - Fundraising

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		24		2014

Amount of Each Disbursement this Period

18177.45

Transaction ID : VN7AV9R1KX4

C. NGP VAN, Inc.Mailing Address 1101 15th St NW
Ste 500

City	State	Zip Code
Washington	DC	20005-5006

Purpose of Disbursement
Database Services

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		02		2014

Amount of Each Disbursement this Period

3000.00

Transaction ID : VN7AV9RVR90

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

21945.85

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 204 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. NGP VAN, Inc.Mailing Address 1101 15th St NW
Ste 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement
Database Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		27		2014

Amount of Each Disbursement this Period

1750.00

Transaction ID : VN7AV9RW8H7

B. Office Max

Mailing Address 1490 University Ave W

City Saint Paul State MN Zip Code 55104-3901

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		13		2014

Amount of Each Disbursement this Period

90.09

Transaction ID : VN7AV9R1KZ0

c. Office Max

Mailing Address 1490 University Ave W

City Saint Paul State MN Zip Code 55104-3901

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		14		2014

Amount of Each Disbursement this Period

3.75

Transaction ID : VN7AV9R1M08

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

1843.84

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 205 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Office Max

Mailing Address 1490 University Ave W

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		18		2014

City	State	Zip Code
Saint Paul	MN	55104-3901

Purpose of Disbursement
Office Supplies

Amount of Each Disbursement this Period

41.76

Transaction ID : VN7AV9RR9V7

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. Office Max

Mailing Address 1490 University Ave W

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		18		2014

City	State	Zip Code
Saint Paul	MN	55104-3901

Purpose of Disbursement
Office Supplies

Amount of Each Disbursement this Period

49.33

Transaction ID : VN7AV9RR9W5

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. Office Max

Mailing Address 1490 University Ave W

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		17		2014

City	State	Zip Code
Saint Paul	MN	55104-3901

Purpose of Disbursement
Office Supplies

Amount of Each Disbursement this Period

28.18

Transaction ID : VN7AV9RVRC4

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

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

119.27

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

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

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Perkins Coie

Mailing Address 1201 3rd Ave
Ste 4900

City State Zip Code
Seattle WA 98101-3099

Purpose of Disbursement
Legal Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 02 / 2014

Amount of Each Disbursement this Period

755.00

Transaction ID : VN7AV9RVRF7

B. Postmaster

Mailing Address 3033 27th Ave S

City State Zip Code
Minneapolis MN 55406-5100

Purpose of Disbursement
Postage

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 13 / 2014

Amount of Each Disbursement this Period

198.00

Transaction ID : VN7AV9R1M99

C. Postmaster

Mailing Address 3033 27th Ave S

City State Zip Code
Minneapolis MN 55406-5100

Purpose of Disbursement
Postage

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 14 / 2014

Amount of Each Disbursement this Period

92.00

Transaction ID : VN7AV9R1MA7

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

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

1045.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 207 OF 222

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Postmaster

Mailing Address 3033 27th Ave S

City State Zip Code
 Minneapolis MN 55406-5100

Purpose of Disbursement
 Postage

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
 02 04 2014

Amount of Each Disbursement this Period

102.45

Transaction ID : VN7AV9RRA64

B. Postmaster

Mailing Address 3033 27th Ave S

City State Zip Code
 Minneapolis MN 55406-5100

Purpose of Disbursement
 Postage

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
 02 17 2014

Amount of Each Disbursement this Period

62.00

Transaction ID : VN7AV9RRA56

C. Postmaster

Mailing Address 3033 27th Ave S

City State Zip Code
 Minneapolis MN 55406-5100

Purpose of Disbursement
 Postage

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
 02 27 2014

Amount of Each Disbursement this Period

113.37

Transaction ID : VN7AV9RRA72

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

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

277.82

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Redpath Consulting Group, LLCMailing Address 9220 Bass Lake Rd
Ste 350City State Zip Code
Minneapolis MN 55428-3095Purpose of Disbursement
Consulting - IT

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		02		2014

Amount of Each Disbursement this Period

381.25

Transaction ID : VN7AV9RVRN5

B. Rye Delicatess

Mailing Address 1930 Hennepin Ave

City State Zip Code
Minneapolis MN 55403-3160Purpose of Disbursement
Meals

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		06		2014

Amount of Each Disbursement this Period

50.92

Transaction ID : VN7AV9RVRP3

c. Seven Corners Printing

Mailing Address 1099 Snelling Ave N

City State Zip Code
Saint Paul MN 55108-2705Purpose of Disbursement
Printing

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		02		2014

Amount of Each Disbursement this Period

267.99

Transaction ID : VN7AV9RT306

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

700.16

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 209 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. SFM Risk SolutionsMailing Address 3500 American Blvd W
Ste 700City State Zip Code
Minneapolis MN 55431-4439Purpose of Disbursement
Insurance

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		02		2014

Amount of Each Disbursement this Period

1134.00

Transaction ID : VN7AV9RVRQ0

B. St. Paul Development Company

Mailing Address 1818 Grand Ave

City State Zip Code
Saint Paul MN 55105-1818Purpose of Disbursement
Rent

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		22		2014

Amount of Each Disbursement this Period

1172.70

Transaction ID : VN7AV9R1M24

c. St. Paul Development Company

Mailing Address 1818 Grand Ave

City State Zip Code
Saint Paul MN 55105-1818Purpose of Disbursement
Rent

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2014

Amount of Each Disbursement this Period

1125.30

Transaction ID : VN7AV9RR9Z9

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

3432.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. St. Paul Development Company

Mailing Address 1818 Grand Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		05		2014

City	State	Zip Code
Saint Paul	MN	55105-1818

Amount of Each Disbursement this Period

1169.47

Purpose of Disbursement
RentCategory/
Type

Transaction ID : VN7AV9RX1X6

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

B. Target

Mailing Address 2500 E Lake St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		16		2014

City	State	Zip Code
Minneapolis	MN	55406-1976

Amount of Each Disbursement this Period

278.32

Purpose of Disbursement
Office SuppliesCategory/
Type

Transaction ID : VN7AV9R1M32

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

c. The Foundation

Mailing Address 311 7th Ave N

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		17		2014

City	State	Zip Code
Minneapolis	MN	55401-1237

Amount of Each Disbursement this Period

666.45

Purpose of Disbursement
Computer ExpenseCategory/
Type

Transaction ID : VN7AV9RRA15

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

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

2114.24

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 211 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. The Foundation

Mailing Address 311 7th Ave N

City	State	Zip Code
Minneapolis	MN	55401-1237

Purpose of Disbursement
Computer Expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		21		2014

Amount of Each Disbursement this Period

488.73

Transaction ID : VN7AV9RVRW0

B. The Lowry Minneapolis

Mailing Address 2112 Hennepin Ave

City	State	Zip Code
Minneapolis	MN	55405-2743

Purpose of Disbursement
Meals

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		06		2014

Amount of Each Disbursement this Period

18.90

Transaction ID : VN7AV9R1M57

c. The Lowry Minneapolis

Mailing Address 2112 Hennepin Ave

City	State	Zip Code
Minneapolis	MN	55405-2743

Purpose of Disbursement
Meals

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		24		2014

Amount of Each Disbursement this Period

6.39

Transaction ID : VN7AV9R1M65

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

514.02

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 212 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. The Lowry Minneapolis

Mailing Address 2112 Hennepin Ave

City	State	Zip Code
Minneapolis	MN	55405-2743

Purpose of Disbursement
Meals

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		24		2014

Amount of Each Disbursement this Period

53.50

Transaction ID : VN7AV9R1M73

B. The Lowry Minneapolis

Mailing Address 2112 Hennepin Ave

City	State	Zip Code
Minneapolis	MN	55405-2743

Purpose of Disbursement
Meals

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		18		2014

Amount of Each Disbursement this Period

52.38

Transaction ID : VN7AV9RRA23

c. The Mynett Group

Mailing Address 4616 15th St NW

City	State	Zip Code
Washington	DC	20011-4319

Purpose of Disbursement
Consulting - Fundraising

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		05		2014

Amount of Each Disbursement this Period

9282.20

Transaction ID : VN7AV9RT322

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

9388.08

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 213 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. United AirlinesMailing Address 77 W Wacker Dr
Ste MEZZ

City Chicago State IL Zip Code 60601-1732

Purpose of Disbursement
Travel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		18		2014

Amount of Each Disbursement this Period

548.00

Transaction ID : VN7AV9RRA30

B. United AirlinesMailing Address 77 W Wacker Dr
Ste MEZZ

City Chicago State IL Zip Code 60601-1732

Purpose of Disbursement
Travel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

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

Amount of Each Disbursement this Period

416.00

Transaction ID : VN7AV9RRA48

C. United AirlinesMailing Address 77 W Wacker Dr
Ste MEZZ

City Chicago State IL Zip Code 60601-1732

Purpose of Disbursement
Travel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		10		2014

Amount of Each Disbursement this Period

600.00

Transaction ID : VN7AV9VRX8

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

1564.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. United AirlinesMailing Address 77 W Wacker Dr
Ste MEZZ

City Chicago State IL Zip Code 60601-1732

Purpose of Disbursement
Travel

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
03	26	2014

Amount of Each Disbursement this Period

425.00

Transaction ID : VN7AV9RW8N8

B. USG Insurance

Mailing Address 6 Hughes

City Irvine State CA Zip Code 92618-2059

Purpose of Disbursement
Insurance

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
03	02	2014

Amount of Each Disbursement this Period

1150.00

Transaction ID : VN7AV9RVRZ4

c. Venture BankMailing Address 5601 Green Valley Dr
Ste 120

City Minneapolis State MN Zip Code 55437-1175

Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
01	02	2014

Amount of Each Disbursement this Period

7.95

Transaction ID : VN7AV9R1MB5

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

1582.95

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 215 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Venture BankMailing Address 5601 Green Valley Dr
Ste 120

City Minneapolis State MN Zip Code 55437-1175

Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

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

Amount of Each Disbursement this Period

24.00

Transaction ID : VN7AV9RRA80

B. Venture BankMailing Address 5601 Green Valley Dr
Ste 120

City Minneapolis State MN Zip Code 55437-1175

Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		28		2014

Amount of Each Disbursement this Period

8.96

Transaction ID : VN7AV9RRA98

c. Venture BankMailing Address 5601 Green Valley Dr
Ste 120

City Minneapolis State MN Zip Code 55437-1175

Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2014

Amount of Each Disbursement this Period

6.08

Transaction ID : VN7AV9RW8P6

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

39.04

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Verizon Wireless

Mailing Address PO Box 25505

City	State	Zip Code
Lehigh Valley	PA	18002-5505

Purpose of Disbursement
Telephone

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		24		2014

Amount of Each Disbursement this Period

250.84

Transaction ID : VN7AV9R1MC3

B. Verizon Wireless

Mailing Address PO Box 25505

City	State	Zip Code
Lehigh Valley	PA	18002-5505

Purpose of Disbursement
Telephone

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		26		2014

Amount of Each Disbursement this Period

251.11

Transaction ID : VN7AV9RRAA6

C. Verizon Wireless

Mailing Address PO Box 25505

City	State	Zip Code
Lehigh Valley	PA	18002-5505

Purpose of Disbursement
Telephone

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		26		2014

Amount of Each Disbursement this Period

251.07

Transaction ID : VN7AV9RW8Q4

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

753.02

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 217 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Vonage

Mailing Address 23 Main St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		27		2014

City	State	Zip Code
Holmdel	NJ	07733-2136

Purpose of Disbursement
Telephone

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

90.84

Transaction ID : VN7AV9R1MD1

B. Vonage

Mailing Address 23 Main St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		26		2014

City	State	Zip Code
Holmdel	NJ	07733-2136

Purpose of Disbursement
Telephone

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

90.84

Transaction ID : VN7AV9RRAB4

c. Vonage

Mailing Address 23 Main St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		26		2014

City	State	Zip Code
Holmdel	NJ	07733-2136

Purpose of Disbursement
Telephone

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

90.84

Transaction ID : VN7AV9RW8R2

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

272.52

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 218 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Voter ActivationMailing Address 48 Grove St
Ste 202

City Somerville State MA Zip Code 02144-2500

Purpose of Disbursement
Database Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		15		2014

Amount of Each Disbursement this Period

150.00

Transaction ID : VN7AV9R1ME9

B. Voter ActivationMailing Address 48 Grove St
Ste 202

City Somerville State MA Zip Code 02144-2500

Purpose of Disbursement
Database Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2014

Amount of Each Disbursement this Period

150.00

Transaction ID : VN7AV9RRAC2

C. Voter ActivationMailing Address 48 Grove St
Ste 202

City Somerville State MA Zip Code 02144-2500

Purpose of Disbursement
Database Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		03		2014

Amount of Each Disbursement this Period

150.00

Transaction ID : VN7AV9RVS02

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

450.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 219 OF 222

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Justin Young

Mailing Address 2131 Watson Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		22		2014

City	State	Zip Code
Saint Paul	MN	55116-1147

Purpose of Disbursement
Reimbursement

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

266.40

Transaction ID : VN7AV9R1KM3

B. Wellstone ActionMailing Address 2446 University Ave W
Ste 170

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		22		2014

City	State	Zip Code
Saint Paul	MN	55114-1580

Purpose of Disbursement
Training

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

150.00

Transaction ID : VN7AV9R1KN1

[MEMO ITEM]

*

C. Justin Young

Mailing Address 2131 Watson Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		05		2014

City	State	Zip Code
Saint Paul	MN	55116-1147

Purpose of Disbursement
Reimbursement

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

116.40

Transaction ID : VN7AV9RVQM4

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

266.40

201044.69

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. Democratic Congressional Campaign Committee

Date of Disbursement

M M	D D	Y Y Y Y
03	02	2014

Mailing Address 430 S Capitol St SE

City	State	Zip Code
Washington	DC	20003-4024

Purpose of Disbursement
Contribution

Amount of Each Disbursement this Period

3000.00

Transaction ID : VN7AV9RX1E7

Candidate Name

Democratic Congressional Campaign CommitteeCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. MIKE HONDA FOR CONGRESS

Date of Disbursement

M M	D D	Y Y Y Y
02	25	2014

Mailing Address 50 W San Fernando St

City	State	Zip Code
San Jose	CA	95113-2414

Purpose of Disbursement
Contribution

Amount of Each Disbursement this Period

1000.00

Transaction ID : VN7AV9RPZ64

Candidate Name

MIKE HONDA FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: CA

District: 15

Full Name (Last, First, Middle Initial)

C. MINNESOTA DEMOCRATIC-FARMER-LABOR PARTY

Date of Disbursement

M M	D D	Y Y Y Y
03	02	2014

Mailing Address 255 Plato Blvd E

City	State	Zip Code
Saint Paul	MN	55107-1623

Purpose of Disbursement
Contribution

Amount of Each Disbursement this Period

1250.00

Transaction ID : VN7AV9RX1G3

Candidate Name

MINNESOTA DEMOCRATIC-FARMER-LABOR PARTYCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

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

5250.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 222 OF 222

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ellison for Congress

Full Name (Last, First, Middle Initial)

A. MINNESOTA DEMOCRATIC-FARMER-LABOR PARTY

Mailing Address 255 Plato Blvd E

City	State	Zip Code
Saint Paul	MN	55107-1623

Purpose of Disbursement
Unlimited Transfer to State PartyCandidate Name
MINNESOTA DEMOCRATIC-FARMER-LABOR PARTY

Office Sought:	Disbursement For: 2014
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)
<input type="checkbox"/> President	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		05		2014

Amount of Each Disbursement this Period

4487.00

Transaction ID : VN7AV9RX1M5

B. MINNESOTA DEMOCRATIC-FARMER-LABOR PARTY

Mailing Address 255 Plato Blvd E

City	State	Zip Code
Saint Paul	MN	55107-1623

Purpose of Disbursement
Unlimited Transfer to State PartyCandidate Name
MINNESOTA DEMOCRATIC-FARMER-LABOR PARTY

Office Sought:	Disbursement For: 2014
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)
<input type="checkbox"/> President	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		21		2014

Amount of Each Disbursement this Period

10544.00

Transaction ID : VN7AV9RX1F5

C.

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought:	Disbursement For:
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)
<input type="checkbox"/> President	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
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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).....

15031.00

20281.00
