

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 REPORT

NEW (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

through

M M /

D D /

Y Y Y Y

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

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 / 144

Write or Type Committee Name

Ellison for Congress

Report Covering the Period: From:

M M	/	D D	/	Y Y Y Y
01		01		2015

To:

M M	/	D D	/	Y Y Y Y
03		31		2015

	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))....	217785.73	243090.59
(b) Total Contribution Refunds (from Line 20(d))	92.68	115.68
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	217693.05	242974.91
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	202838.07	314410.52
(b) Total Offsets to Operating Expenditures (from Line 14).....	2545.00	2627.64
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	200293.07	311782.88
8. Cash on Hand at Close of Reporting Period (from Line 27).....	167302.65	
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)

Write or Type Committee Name

Ellison for Congress

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

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).....	85882.00	93532.00
(ii) Unitemized.....	102903.73	120558.59
(iii) TOTAL of contributions from individuals ▶	188785.73	214090.59
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	29000.00	29000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	217785.73	243090.59
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.).....		
	2545.00	2627.64
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	3.89	6.68
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	220334.62	245724.91

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	202838.07	314410.52
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	92.68	115.68
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	92.68	115.68
21. OTHER DISBURSEMENTS	12849.00	13849.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	215779.75	328375.20

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	162747.78
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	220334.62
25. SUBTOTAL (add Line 23 and Line 24).....	383082.40
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	215779.75
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	167302.65

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Bilquis Abbasi

Mailing Address 181 Grayson Dr

City Belle Mead State NJ Zip Code 08502-4932

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

Name of Employer Not employed Occupation Not employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2015

Transaction ID : VN8A3DBS4M4

Amount of Each Receipt this Period
2000.00

* Earmarked Contribution: See Below

B. 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
48664.18

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 01 / 2015

Transaction ID : VN8A3DBS4M4E

Amount of Each Receipt this Period
2000.00

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

C. Full Name (Last, First, Middle Initial)
Kamran Abbasi

Mailing Address 9910 S 87th East Ave

City Tulsa State OK Zip Code 74133-5597

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

Name of Employer Claremore Regional Hospital Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 17 / 2015

Transaction ID : VN8A3DB9TB2

Amount of Each Receipt this Period
500.00

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

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

2500.00

**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 144
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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)
Saad Abbasi

Mailing Address 15 Rosewood Ct

City West Windsor State NJ Zip Code 08550-1839

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

Name of Employer Self Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 02 / 2015

Transaction ID : VN8A3DBRV98

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Feisal Abdul Rauf

Mailing Address 475 Riverside Dr Ste 248

City New York State NY Zip Code 10115-0010

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

Name of Employer The Cordoba Initiative Occupation Chairman

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 04 / 2015

Transaction ID : VN8A3DBSYG6

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Abdulkader Abdulrazzak

Mailing Address 2725 Timber Lane Dr

City Flushing State MI Zip Code 48433-3513

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

Name of Employer Self-Employed Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2015

Transaction ID : VN8A3DATVJ4

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: (check only one)	PAGE 7 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Irfan Ahmad

Mailing Address 23051 Poplar

City Mission Viejo State CA Zip Code 92692-1682

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

Name of Employer CHOC Childrens Hospital Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2015

Transaction ID : VN8A3DCDFA4

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mahmood Alam

Mailing Address 5 East Dr

City Edison State NJ Zip Code 08820-1706

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

Name of Employer Self-Employed Occupation Medical Doctor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 02 / 2015

Transaction ID : VN8A3DBRV15

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Shaik Ali

Mailing Address 37 Clifton St

City Farmingdale State NY Zip Code 11735-5500

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

Name of Employer Associated Cardiology Consultants Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2015

Transaction ID : VN8A3DDEE61

Amount of Each Receipt this Period
1000.00

* Earmarked Contribution: See Below

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: (check only one)	PAGE 8 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
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: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **48664.18**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2015

Transaction ID : VN8A3DDEE61E

Amount of Each Receipt this Period
 _____ **1000.00** _____

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

B. Full Name (Last, First, Middle Initial)
Shoukat Hussain Ali

Mailing Address **2141 Stratford Cir**

City **Los Angeles** State **CA** Zip Code **90077-1319**

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

Name of Employer **Sharmeen's Enterprises, Inc.** Occupation **President/CEO**

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 24 / 2015

Transaction ID : VN8A3DCDFJ8

Amount of Each Receipt this Period
 _____ **1000.00** _____

C. Full Name (Last, First, Middle Initial)
Radwan Alkiek

Mailing Address **6239 Canter Creek Trl**

City **Grand Blanc** State **MI** Zip Code **48439-7440**

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

Name of Employer **Regional Cardiology Association** Occupation **Physician**

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 27 / 2015

Transaction ID : VN8A3DATZ01

Amount of Each Receipt this Period
 _____ **250.00** _____

* Earmarked Contribution: See Below

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: (check only one)	PAGE 9 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) ActBlue		Date of Receipt MM / DD / YYYY 02 / 01 / 2015
Mailing Address PO Box 382110		Transaction ID : VN8A3DATZ01E
City Cambridge	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer	Occupation Conduit total listed in Agg. field	[MEMO ITEM] Note: Above Contribution earmarked through this organization.
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 48664.18	

Full Name (Last, First, Middle Initial) Gulraiz Amjad		Date of Receipt MM / DD / YYYY 02 / 25 / 2015
Mailing Address 26 Christopher Ln		Transaction ID : VN8A3DBS4Z0
City Colonia	State NJ	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer H & A Contracting	Occupation Contractor	* Earmarked Contribution: See Below
Receipt For: 2016 <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) ActBlue		Date of Receipt MM / DD / YYYY 03 / 01 / 2015
Mailing Address PO Box 382110		Transaction ID : VN8A3DBS4Z0E
City Cambridge	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer	Occupation Conduit total listed in Agg. field	[MEMO ITEM] Note: Above Contribution earmarked through this organization.
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 48664.18	

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Richard T Anglim

Mailing Address 5015 35th Ave S
Apt 217

City Minneapolis State MN Zip Code 55417-1563

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

Name of Employer N/A Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 27 / 2015

Transaction ID : VN8A3DBP4F8

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Abuzafar Arif

Mailing Address 51207 Wheaton Ct

City Granger State IN Zip Code 46530-4245

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

Name of Employer elkhart clinic Occupation md

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 16 / 2015

Transaction ID : VN8A3DC5DZ3

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Moumen Asbahi

Mailing Address 6755 Vachon Dr

City Bloomfield Hills State MI Zip Code 48301-2940

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

Name of Employer Self Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2015

Transaction ID : VN8A3DATTD1

Amount of Each Receipt this Period
 250.00

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: (check only one)	PAGE 11 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Hatem Ataya

Mailing Address 971 Baldwin Rd

City Lapeer State MI Zip Code 48446-3007

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

Name of Employer Hurley Medical Center Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 27 / 2015

Transaction ID : VN8A3DATYY5

Amount of Each Receipt this Period
500.00

* Earmarked Contribution: See Below

B. 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
48664.18

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 01 / 2015

Transaction ID : VN8A3DATYY5E

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 305 Rustic Dr

City Morganville State NJ Zip Code 07751-4447

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

Name of Employer Siemens Medical Occupation Field CT Scan Engineer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2015

Transaction ID : VN8A3DBS4X5

Amount of Each Receipt this Period
250.00

* Earmarked Contribution: See Below

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: (check only one)	PAGE 12 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
ActBlue

Mailing Address PO Box 382110

City State Zip Code
Cambridge MA 02238-2110

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
48664.18

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 01 / 2015

Transaction ID : VN8A3DBS4X5E

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Sumeera Baig

Mailing Address 4 Howell Ct

City State Zip Code
Princeton Junction NJ 08550-3213

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

Name of Employer Occupation
Self Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 02 / 2015

Transaction ID : VN8A3DBQWX9

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Elsaid Balboul

Mailing Address 508 Hamburg Tpke
Ste 201

City State Zip Code
Wayne NJ 07470-8482

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

Name of Employer Occupation
Self Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 02 / 2015

Transaction ID : VN8A3DBRVF6

Amount of Each Receipt this Period
450.00

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: (check only one)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 13 OF 144

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)
Esther Beynon

Mailing Address 2560 Hill Cir

City Colorado Springs State CO Zip Code 80904-1111

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

Name of Employer Self-Employed Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 23 / 2015

Transaction ID : VN8A3DBE1D4

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Imtiaz Chaudhry

Mailing Address 1208 Crespo Ln

City Bensalem State PA Zip Code 19020-4734

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

Name of Employer Laser Eye Care Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 02 / 2015

Transaction ID : VN8A3DBQXX1

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Neil Clark

Mailing Address 6711 Lake Shore Dr S Apt 1204

City Minneapolis State MN Zip Code 55423-5307

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

Name of Employer Not employed Occupation Not employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 26 / 2015

Transaction ID : VN8A3DATYW9

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).....

1050.00

**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 14 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
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: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **48664.18**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 01 / 2015

Transaction ID : VN8A3DATYW9E

Amount of Each Receipt this Period
 _____ **50.00**

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

B. Full Name (Last, First, Middle Initial)
Neil Clark

Mailing Address **6711 Lake Shore Dr S
Apt 1204**

City **Minneapolis** State **MN** Zip Code **55423-5307**

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

Name of Employer **Not employed** Occupation **Not employed**

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **110.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 12 / 2015

Transaction ID : VN8A3DB62Y1

Amount of Each Receipt this Period
 _____ **60.00**

C. Full Name (Last, First, Middle Initial)
Neil Clark

Mailing Address **6711 Lake Shore Dr S
Apt 1204**

City **Minneapolis** State **MN** Zip Code **55423-5307**

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

Name of Employer **Not employed** Occupation **Not employed**

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **160.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 26 / 2015

Transaction ID : VN8A3DBS572

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).....

_____ **110.00**

**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 15 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
48664.18

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 01 / 2015

Transaction ID : VN8A3DBS572E

Amount of Each Receipt this Period
50.00

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

B. Full Name (Last, First, Middle Initial)
Neil Clark

Mailing Address 6711 Lake Shore Dr S
Apt 1204

City Minneapolis State MN Zip Code 55423-5307

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

Name of Employer Occupation
Not employed Not employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
210.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 26 / 2015

Transaction ID : VN8A3DDBMV6

Amount of Each Receipt this Period
50.00

* Earmarked Contribution: See Below

C. 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
48664.18

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 29 / 2015

Transaction ID : VN8A3DDBMV6E

Amount of Each Receipt this Period
50.00

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

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

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

50.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Neil Clark

Mailing Address 6711 Lake Shore Dr S
Apt 1204

City Minneapolis State MN Zip Code 55423-5307

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

Name of Employer Not employed Occupation Not employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **257.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2015

Transaction ID : VN8A3DDQG98

Amount of Each Receipt this Period
47.00

B. Full Name (Last, First, Middle Initial)
Clarissa B Cole

Mailing Address 949 Sibley Memorial Hwy
Unit 332

City Saint Paul State MN Zip Code 55118-3778

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **100.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 23 / 2015

Transaction ID : VN8A3DB8VJ0

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Clarissa B Cole

Mailing Address 949 Sibley Memorial Hwy
Unit 332

City Saint Paul State MN Zip Code 55118-3778

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 01 / 2015

Transaction ID : VN8A3DDQVC5

Amount of Each Receipt this Period
100.00

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

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

247.00

**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 17 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Clarissa B Cole

Mailing Address 949 Sibley Memorial Hwy
Unit 332

City Saint Paul State MN Zip Code 55118-3778

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 27 / 2015

Transaction ID : VN8A3DDQVD3

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Richard Givens Copeland

Mailing Address 9506 Oxborough Curv

City Minneapolis State MN Zip Code 55411

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

Name of Employer Thor Construction Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 30 / 2015

Transaction ID : VN8A3DATZP2

Amount of Each Receipt this Period
100.00

* Earmarked Contribution: See Below

C. 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
48664.18

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 01 / 2015

Transaction ID : VN8A3DATZP2E

Amount of Each Receipt this Period
100.00

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

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: (check only one)	PAGE 18 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Richard Givens Copeland

Mailing Address 9506 Oxborough Curv

City Minneapolis State MN Zip Code 55411

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

Name of Employer Thor Construction Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 28 / 2015

Transaction ID : VN8A3DBS5R6

Amount of Each Receipt this Period
100.00

* Earmarked Contribution: See Below

B. 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **48664.18**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 01 / 2015

Transaction ID : VN8A3DBS5R6E

Amount of Each Receipt this Period
100.00

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

C. Full Name (Last, First, Middle Initial)
Richard Givens Copeland

Mailing Address 9506 Oxborough Curv

City Minneapolis State MN Zip Code 55411

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

Name of Employer Thor Construction Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 30 / 2015

Transaction ID : VN8A3DDEE03

Amount of Each Receipt this Period
100.00

* Earmarked Contribution: See Below

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 19 OF 144
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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)
ActBlue

Mailing Address PO Box 382110

City State Zip Code
Cambridge MA 02238-2110

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
48664.18

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2015

Transaction ID : VN8A3DDEE03E

Amount of Each Receipt this Period
100.00

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

B. Full Name (Last, First, Middle Initial)
Catherine Coult

Mailing Address 4300 W River Pkwy
Apt 602

City State Zip Code
Minneapolis MN 55406-3682

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

Name of Employer Occupation
Retired Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 12 / 2015

Transaction ID : VN8A3DB65K0

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Angela Craig

Mailing Address 1580 Blackhawk Lake Dr

City State Zip Code
Eagan MN 55122-1245

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

Name of Employer Occupation
St. Jude Medical Vice President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 04 / 2015

Transaction ID : VN8A3DA7Z75

Amount of Each Receipt this Period
100.00

* Earmarked Contribution: See Below

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 20 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
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: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **48664.18**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 04 / 2015

Transaction ID : VN8A3DA7Z75E

Amount of Each Receipt this Period
 _____ **100.00**

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

B. Full Name (Last, First, Middle Initial)
Angela Craig

Mailing Address **1580 Blackhawk Lake Dr**

City **Eagan** State **MN** Zip Code **55122-1245**

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

Name of Employer **St. Jude Medical** Occupation **Vice President**

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **200.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 04 / 2015

Transaction ID : VN8A3DB0GZ0

Amount of Each Receipt this Period
 _____ **100.00**

* Earmarked Contribution: See Below

C. 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: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **48664.18**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 08 / 2015

Transaction ID : VN8A3DB0GZ0E

Amount of Each Receipt this Period
 _____ **100.00**

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

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: (check only one)	PAGE 21 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Angela Craig

Mailing Address 1580 Blackhawk Lake Dr

City State Zip Code
Eagan MN 55122-1245

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

Name of Employer Occupation
St. Jude Medical Vice President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 04 / 2015

Transaction ID : VN8A3DBZGR6

Amount of Each Receipt this Period
100.00

* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City State Zip Code
Cambridge MA 02238-2110

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
48664.18

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 08 / 2015

Transaction ID : VN8A3DBZGR6E

Amount of Each Receipt this Period
100.00

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

C. Full Name (Last, First, Middle Initial)
Mohammed Yusef Dadani

Mailing Address 11 Parkwood Dr
Apt H

City State Zip Code
South Amboy NJ 08879-2327

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

Name of Employer Occupation
Oracle Software Engineer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 02 / 2015

Transaction ID : VN8A3DBRMK2

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	FOR LINE NUMBER: (check only one)	PAGE 22 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Sofia Dasti

Mailing Address 218 Drakes Corner Rd

City State Zip Code
Princeton NJ 08540-7518

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

Name of Employer Occupation
RWJ Emergency Medical Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 02 / 2015

Transaction ID : VN8A3DBQWZ4

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
Umer Dasti

Mailing Address 5330 Promenade Blvd

City State Zip Code
Fair Lawn NJ 07410-2773

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

Name of Employer Occupation
Ridgewood Orthopedic Group Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 24 / 2015

Transaction ID : VN8A3DBS4R5

Amount of Each Receipt this Period
1000.00

* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City State Zip Code
Cambridge MA 02238-2110

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
48664.18

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 01 / 2015

Transaction ID : VN8A3DBS4R5E

Amount of Each Receipt this Period
1000.00

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

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

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

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 23 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
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 **N/A** Occupation **Retired**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 16 / 2015

Transaction ID : VN8A3DC5PR6

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Attiazaz Din

Mailing Address **100 Sepi;Veda Blvd 19Th Floor**

City **El Segundo** State **CA** Zip Code **90245**

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

Name of Employer **Enpoint Technology** Occupation **Executive**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 24 / 2015

Transaction ID : VN8A3DCDER5

Amount of Each Receipt this Period
2000.00

C. 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 30 / 2015

Transaction ID : VN8A3DAS7M8

Amount of Each Receipt this Period
100.00

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

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

2350.00

**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 24 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Edward Farnilant

Mailing Address 2350 E Elm St

City Tucson State AZ Zip Code 85719-4333

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

Name of Employer N/A Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **150.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 28 / 2015

Transaction ID : VN8A3DATZB7

Amount of Each Receipt this Period
50.00

* Earmarked Contribution: See Below

B. 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **48664.18**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 01 / 2015

Transaction ID : VN8A3DATZB7E

Amount of Each Receipt this Period
50.00

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

C. Full Name (Last, First, Middle Initial)
Edward Farnilant

Mailing Address 2350 E Elm St

City Tucson State AZ Zip Code 85719-4333

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

Name of Employer N/A Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 28 / 2015

Transaction ID : VN8A3DBS5N2

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: (check only one)	PAGE 25 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
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: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **48664.18**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 01 / 2015

Transaction ID : VN8A3DBS5N2E

Amount of Each Receipt this Period
 _____ **50.00**

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

B. Full Name (Last, First, Middle Initial)
Edward Farmilant

Mailing Address **2350 E Elm St**

City **Tucson** State **AZ** Zip Code **85719-4333**

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

Name of Employer **N/A** Occupation **Retired**

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 28 / 2015

Transaction ID : VN8A3DDBN96

Amount of Each Receipt this Period
 _____ **50.00**

*** Earmarked Contribution: See Below**

C. 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: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **48664.18**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 29 / 2015

Transaction ID : VN8A3DDBN96E

Amount of Each Receipt this Period
 _____ **50.00**

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

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

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

_____ **50.00**

**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 26 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Umar Farooq

Mailing Address 1204 Crespo Ln

City Bensalem State PA Zip Code 19020-4734

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

Name of Employer Knights Medical Association Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 02 / 2015

Transaction ID : VN8A3DBQXV6

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Imran Fayyaz

Mailing Address 36 Covenhoven Rd

City Skillman State NJ Zip Code 08558-2126

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

Name of Employer Gastroenterology Group Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 02 / 2015

Transaction ID : VN8A3DBQXW4

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Shari Gore

Mailing Address PO Box 489

City Ingram State TX Zip Code 78025-0489

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

Name of Employer N/A Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2015

Transaction ID : VN8A3DBK1A0

Amount of Each Receipt this Period
 500.00

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

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

1500.00

**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 27 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Richard Griffith

Mailing Address 5201 W 56th St

City Edina State MN Zip Code 55436-2446

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

Name of Employer MTS Systems Corp Occupation Engineer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 16 / 2015

Transaction ID : VN8A3DC55P3

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Mohammed Hammond

Mailing Address 3235 Bending Brook Dr

City Flushing State MI Zip Code 48433-3013

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

Name of Employer N/A Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2015

Transaction ID : VN8A3DATV43

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Mehnaz U Haq

Mailing Address 10 Beekman Rd

City Franklin Park State NJ Zip Code 08823-1424

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

Name of Employer Self-Employed Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 02 / 2015

Transaction ID : VN8A3DBQX28

Amount of Each Receipt this Period
 1000.00

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: (check only one)	PAGE 28 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Kamal Hasan M.D.

Mailing Address 8235 Pine Hollow Trl

City State Zip Code
Grand Blanc MI 48439-7434

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

Name of Employer Occupation
Self-Employed Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
MM / DD / YYYY
02 / 02 / 2015

Transaction ID : VN8A3DATV27

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mustal Hassanali

Mailing Address 15 Prospect Pl

City State Zip Code
Plainfield NJ 07060-4615

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

Name of Employer Occupation
Self CPA

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
MM / DD / YYYY
02 / 25 / 2015

Transaction ID : VN8A3DBS4V9

Amount of Each Receipt this Period
250.00

* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City State Zip Code
Cambridge MA 02238-2110

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
48664.18

Date of Receipt
MM / DD / YYYY
03 / 01 / 2015

Transaction ID : VN8A3DBS4V9E

Amount of Each Receipt this Period
250.00

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

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: (check only one)	PAGE 29 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Alejandro Hilton

Mailing Address 129 N Orange Ave

City Monterey Park State CA Zip Code 91755-2031

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

Name of Employer N/A Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 17 / 2015

Transaction ID : VN8A3DC6RK8

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Alice Ann Hopper

Mailing Address 31525 Schwartz Rd

City Westlake State OH Zip Code 44145-3768

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

Name of Employer N/A Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 15 / 2015

Transaction ID : VN8A3DADSN9

Amount of Each Receipt this Period
 50.00

C. Full Name (Last, First, Middle Initial)
Alice Ann Hopper

Mailing Address 31525 Schwartz Rd

City Westlake State OH Zip Code 44145-3768

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

Name of Employer N/A Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 15 / 2015

Transaction ID : VN8A3DB8833

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: (check only one)	PAGE 30 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Alice Ann Hopper

Mailing Address 31525 Schwartz Rd

City State Zip Code
Westlake OH 44145-3768

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

Name of Employer Occupation
N/A Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 15 / 2015

Transaction ID : VN8A3DC4B81

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Razi Hussaini

Mailing Address 21 Clifton St

City State Zip Code
Farmingdale NY 11735-5500

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

Name of Employer Occupation
Winthrop University Hospital Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 02 / 2015

Transaction ID : VN8A3DBQWM8

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Syed Jafer

Mailing Address 3128 Harrison St

City State Zip Code
Glenview IL 60025-4554

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

Name of Employer Occupation
N/A Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
75.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 13 / 2015

Transaction ID : VN8A3DACV91

Amount of Each Receipt this Period
25.00

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

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

1075.00

**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 31 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
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: N/A Occupation: Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 100.00

Date of Receipt: 01 / 26 / 2015

Transaction ID : VN8A3DAM675

Amount of Each Receipt this Period: 25.00

B. Full Name (Last, First, Middle Initial)
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: N/A Occupation: Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 125.00

Date of Receipt: 02 / 09 / 2015

Transaction ID : VN8A3DB0GJ7

Amount of Each Receipt this Period: 25.00

C. Full Name (Last, First, Middle Initial)
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: N/A Occupation: Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 150.00

Date of Receipt: 02 / 23 / 2015

Transaction ID : VN8A3DBE0D3

Amount of Each Receipt this Period: 25.00

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

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

75.00

**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 32 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
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: N/A Occupation: Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 175.00

Date of Receipt: 03 / 02 / 2015

Transaction ID : VN8A3DBRVH2

Amount of Each Receipt this Period: 25.00

B. Full Name (Last, First, Middle Initial)
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: N/A Occupation: Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 200.00

Date of Receipt: 03 / 19 / 2015

Transaction ID : VN8A3DC8PF8

Amount of Each Receipt this Period: 25.00

C. Full Name (Last, First, Middle Initial)
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: N/A Occupation: Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 225.00

Date of Receipt: 03 / 31 / 2015

Transaction ID : VN8A3DDJ6X6

Amount of Each Receipt this Period: 25.00

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

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

75.00

**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 33 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Iqbal Jafri

Mailing Address 85 Ellmyer Rd

City Edison State NJ Zip Code 08820-2331

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

Name of Employer Occupation
JFK Rehab Institute Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 02 / 2015

Transaction ID : VN8A3DBVR5

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Nasir Javed

Mailing Address 6135 E Edgemont Dr

City Orange State CA Zip Code 92867-2452

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

Name of Employer Occupation
Princeton Technology Inc CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2015

Transaction ID : VN8A3DCDF24

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Abdelmajid Jondy

Mailing Address 2553 S Shore Dr

City Flushing State MI Zip Code 48433-3505

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

Name of Employer Occupation
Self-Employed Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2015

Transaction ID : VN8A3DATTP2

Amount of Each Receipt this Period
1000.00

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

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

1500.00

**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 34 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)
Muaz Jondy

Mailing Address 1272 Springborrow Dr

City Flint State MI Zip Code 48532-2171

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

Name of Employer Complete Health System Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2015

Transaction ID : VN8A3DATTK9

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Ahmad K Kaddurah

Mailing Address 6326 Knob Bend Dr

City Grand Blanc State MI Zip Code 48439-7461

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

Name of Employer Self-Employed Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2015

Transaction ID : VN8A3DATVK1

Amount of Each Receipt this Period
 500.00

C. 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 Evercore Occupation Finance

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 06 / 2015

Transaction ID : VN8A3DA8CG4

Amount of Each Receipt this Period
 50.00

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: (check only one)	PAGE 35 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
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 Evercore Occupation Finance

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 08 / 2015

Transaction ID : VN8A3DA9YQ6

Amount of Each Receipt this Period
50.00

B. 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 Evercore Occupation Finance

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 24 / 2015

Transaction ID : VN8A3DAJH81

Amount of Each Receipt this Period
100.00

C. 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 Evercore Occupation Finance

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
650.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 06 / 2015

Transaction ID : VN8A3DAYSM4

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 RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
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 Evercore Occupation Finance

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 08 / 2015

Transaction ID : VN8A3DAZYX4

Amount of Each Receipt this Period
50.00

B. 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 Evercore Occupation Finance

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **800.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2015

Transaction ID : VN8A3DBH9H7

Amount of Each Receipt this Period
100.00

C. 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 Evercore Occupation Finance

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **850.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 06 / 2015

Transaction ID : VN8A3DBV7P1

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 RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
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 Evercore Occupation Finance

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **900.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
03 / 08 / 2015

Transaction ID : VN8A3DBWNE6

Amount of Each Receipt this Period
50.00

B. 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 Evercore Occupation Finance

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
03 / 24 / 2015

Transaction ID : VN8A3DCDNC3

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Abdalmajid Katranji

Mailing Address 7860 Ashbrook Dr

City Haslett State MI Zip Code 48840-8854

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

Name of Employer Self-Employed Occupation Surgeon

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
02 / 02 / 2015

Transaction ID : VN8A3DATTC3

Amount of Each Receipt this Period
500.00

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: (check only one)	PAGE 38 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Abdalahman Katranji

Mailing Address 430 N Telegraph Rd

City	State	Zip Code
Dearborn	MI	48128-1619

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

Name of Employer	Occupation
Troy Surgery Center	Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2015

Transaction ID : VN8A3DATTG5

Amount of Each Receipt this Period

500.00

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

Mailing Address 1533 Peck Rd

City	State	Zip Code
South El Monte	CA	91733-4529

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

Name of Employer	Occupation
Self-Employed	Business Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2015

Transaction ID : VN8A3DCDF08

Amount of Each Receipt this Period

2700.00

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

Mailing Address 1533 Peck Rd

City	State	Zip Code
South El Monte	CA	91733-4529

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

Name of Employer	Occupation
Self-Employed	Business Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2015

Transaction ID : VN8A3DCDF16

Amount of Each Receipt this Period

2300.00

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

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

5500.00

**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 39 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)
Shahnaz Khan

Mailing Address 1880 Peaceful Hills Rd

City Walnut	State CA	Zip Code 91789-4027
----------------	-------------	------------------------

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

Name of Employer N/A	Occupation Homemaker
-------------------------	-------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2015

Transaction ID : VN8A3DCDF63

Amount of Each Receipt this Period
500.00

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

Mailing Address 11 Hop Brook Ln

City Holmdel	State NJ	Zip Code 07733-2143
-----------------	-------------	------------------------

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 02 / 2015

Transaction ID : VN8A3DBRMS9

Amount of Each Receipt this Period
250.00

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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
150.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 18 / 2015

Transaction ID : VN8A3DAFZA1

Amount of Each Receipt this Period
50.00

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: (check only one)	PAGE 40 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)
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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2015

Transaction ID : VN8A3DBA5F7

Amount of Each Receipt this Period
50.00

B. 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 18 / 2015

Transaction ID : VN8A3DC7HT8

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Fayez Kotob

Mailing Address PO Box 430

City Grand Blanc State MI Zip Code 48480-0430

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

Name of Employer Insight Institute of Neurosurgery Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2015

Transaction ID : VN8A3DATVD4

Amount of Each Receipt this Period
500.00

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: (check only one)	PAGE 41 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)
Ann Lamb

Mailing Address 8713 Dunaire Dr

City	State	Zip Code
Knoxville	TN	37923-6836

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

Name of Employer	Occupation
Lamb Enterprises, LLC	Technical Editor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 02 / 2015

Transaction ID : VN8A3DA80D6

Amount of Each Receipt this Period
100.00

* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City	State	Zip Code
Cambridge	MA	02238-2110

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

Name of Employer	Occupation
	Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
48664.18

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 04 / 2015

Transaction ID : VN8A3DA80D6E

Amount of Each Receipt this Period
100.00

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

C. Full Name (Last, First, Middle Initial)
Ann Lamb

Mailing Address 8713 Dunaire Dr

City	State	Zip Code
Knoxville	TN	37923-6836

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

Name of Employer	Occupation
Lamb Enterprises, LLC	Technical Editor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2015

Transaction ID : VN8A3DB0H32

Amount of Each Receipt this Period
100.00

* Earmarked Contribution: See Below

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: (check only one)	PAGE 42 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
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: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **48664.18**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 08 / 2015

Transaction ID : VN8A3DB0H32E

Amount of Each Receipt this Period

100.00

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

B. Full Name (Last, First, Middle Initial)
Ann Lamb

Mailing Address **8713 Dunaire Dr**

City **Knoxville** State **TN** Zip Code **37923-6836**

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

Name of Employer **Lamb Enterprises, LLC** Occupation **Technical Editor**

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 02 / 2015

Transaction ID : VN8A3DBZGE7

Amount of Each Receipt this Period

100.00

* Earmarked Contribution: See Below

C. 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: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **48664.18**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 08 / 2015

Transaction ID : VN8A3DBZGE7E

Amount of Each Receipt this Period

100.00

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

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	FOR LINE NUMBER: (check only one)	PAGE 43 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Dinah W Larsen

Mailing Address **PO Box 623**

City **Tualatin** State **OR** Zip Code **97062-0623**

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 05 / 2015

Transaction ID : VN8A3DBTRY3

Amount of Each Receipt this Period
750.00

B. Full Name (Last, First, Middle Initial)
Dinah W Larsen

Mailing Address **PO Box 623**

City **Tualatin** State **OR** Zip Code **97062-0623**

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2015

Transaction ID : VN8A3DDPAK7

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Dennis Levendowski

Mailing Address **3936 12th Ave S**

City **Minneapolis** State **MN** Zip Code **55407-2733**

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

Name of Employer **N/A** Occupation **Retired**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 23 / 2015

Transaction ID : VN8A3DCBPC1

Amount of Each Receipt this Period
250.00

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: (check only one)	PAGE 44 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)
Jason Locke

Mailing Address 303 Richard Pl

City Ithaca State NY Zip Code 14850-3128

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

Name of Employer Cornell University Occupation Administration

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 19 / 2015

Transaction ID : VN8A3DC8NM7

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Atif Malik

Mailing Address 22913 Davis Mill Rd

City Germantown State MD Zip Code 20876-4505

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

Name of Employer American Spine Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 02 / 2015

Transaction ID : VN8A3DBRV57

Amount of Each Receipt this Period
 2600.00

C. Full Name (Last, First, Middle Initial)
Zak Maniya

Mailing Address 102 S Longfellow Dr

City Princeton Junction State NJ Zip Code 08550-2234

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

Name of Employer Self Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 02 / 2015

Transaction ID : VN8A3DBQX78

Amount of Each Receipt this Period
 500.00

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

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

3350.00

**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 45 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
James Marshall Jr.

Mailing Address 9103 Danby Ct

City State Zip Code
Louisville KY 40291-1370

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

Name of Employer Occupation
Retired Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 12 / 2015

Transaction ID : VN8A3DB64D0

Amount of Each Receipt this Period
250.00

B. 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 26 / 2015

Transaction ID : VN8A3DBN5X3

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mary B. McMillan

Mailing Address 2925 Lincoln Dr
Apt 713

City State Zip Code
Roseville MN 55113-1351

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

Name of Employer Occupation
N/A Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 23 / 2015

Transaction ID : VN8A3DBE0H5

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: (check only one)	PAGE 46 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Ahmed Abdel Megrid

Mailing Address 89 Buckley Rd

City Marlboro State NJ Zip Code 07746-2168

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

Name of Employer Rheumatology Center of NJ Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2015

Transaction ID : VN8A3DBS4W7

Amount of Each Receipt this Period
500.00

* Earmarked Contribution: See Below

B. 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
48664.18

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 01 / 2015

Transaction ID : VN8A3DBS4W7E

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Alfred P Moore

Mailing Address 101 Main St NE Ste 1

City Minneapolis State MN Zip Code 55413

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

Name of Employer N/A Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 15 / 2015

Transaction ID : VN8A3DAGJ37

Amount of Each Receipt this Period
100.00

* Earmarked Contribution: See Below

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: (check only one)	PAGE 47 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
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: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **48664.18**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 18 / 2015

Transaction ID : VN8A3DAGJ37E

Amount of Each Receipt this Period
 _____ **100.00**

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

B. Full Name (Last, First, Middle Initial)
Alfred P Moore

Mailing Address **101 Main St NE**
Ste 1

City **Minneapolis** State **MN** Zip Code **55413**

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

Name of Employer **N/A** Occupation **Retired**

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **450.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 15 / 2015

Transaction ID : VN8A3DB8QR0

Amount of Each Receipt this Period
 _____ **100.00**

*** Earmarked Contribution: See Below**

C. 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: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **48664.18**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 15 / 2015

Transaction ID : VN8A3DB8QR0E

Amount of Each Receipt this Period
 _____ **100.00**

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

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: (check only one)	PAGE 48 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Alfred P Moore

Mailing Address 101 Main St NE
Ste 1

City State Zip Code
Minneapolis MN 55413

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

Name of Employer Occupation
N/A Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 09 / 2015

Transaction ID : VN8A3DB8R69

Amount of Each Receipt this Period
250.00

* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City State Zip Code
Cambridge MA 02238-2110

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
48664.18

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 15 / 2015

Transaction ID : VN8A3DB8R69E

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
David J Mulla

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
University on Minnesota Professor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2015

Transaction ID : VN8A3DDF6D6

Amount of Each Receipt this Period
250.00

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

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

500.00

**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 49 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
William Newman

Mailing Address 6712 W River Rd

City State Zip Code
Brooklyn Center MN 55430-1324

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

Name of Employer Occupation
Rnas Environmental Remediation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 03 / 2015

Transaction ID : VN8A3DBSHD7

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Vuyisile Nkomo

Mailing Address 3012 Thaddeus Rd SW

City State Zip Code
Rochester MN 55902-1695

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

Name of Employer Occupation
Mayo Clinic Cardiologist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 04 / 2015

Transaction ID : VN8A3DBT7E1

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
William O'Brien

Mailing Address 1937 Irving Ave S

City State Zip Code
Minneapolis MN 55403-2824

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

Name of Employer Occupation
Miller O'Brien Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 25 / 2015

Transaction ID : VN8A3DD77R3

Amount of Each Receipt this Period
250.00

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: (check only one)	PAGE 50 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)
Carl D Offner

Mailing Address 46 Sunset Path

City State Zip Code
Sudbury MA 01776-1369

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

Name of Employer Occupation
Ab Initio Software Corp. Software Engineer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 31 / 2015

Transaction ID : VN8A3DATZY6

Amount of Each Receipt this Period
100.00

* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City State Zip Code
Cambridge MA 02238-2110

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
48664.18

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 01 / 2015

Transaction ID : VN8A3DATZY6E

Amount of Each Receipt this Period
100.00

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

C. Full Name (Last, First, Middle Initial)
Carl D Offner

Mailing Address 46 Sunset Path

City State Zip Code
Sudbury MA 01776-1369

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

Name of Employer Occupation
Ab Initio Software Corp. Software Engineer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2015

Transaction ID : VN8A3DBS617

Amount of Each Receipt this Period
100.00

* Earmarked Contribution: See Below

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: (check only one)	PAGE 51 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
ActBlue

Mailing Address PO Box 382110

City State Zip Code
Cambridge MA 02238-2110

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
48664.18

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 01 / 2015

Transaction ID : VN8A3DBS617E

Amount of Each Receipt this Period
100.00

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

B. Full Name (Last, First, Middle Initial)
Esam Omeish

Mailing Address 3133 Barkley Dr

City State Zip Code
Fairfax VA 22031-2720

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

Name of Employer Occupation
Self-Employed Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 23 / 2015

Transaction ID : VN8A3DBE127

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Johanna Osman

Mailing Address 574 Prairie Center Dr
Ste 135-276

City State Zip Code
Eden Prairie MN 55344-7930

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

Name of Employer Occupation
Self-Employed Mediator

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 18 / 2015

Transaction ID : VN8A3DAGK14

Amount of Each Receipt this Period
1000.00

* Earmarked Contribution: See Below

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: (check only one)	PAGE 52 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
ActBlue

Mailing Address PO Box 382110

City State Zip Code
Cambridge MA 02238-2110

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
48664.18

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 18 / 2015

Transaction ID : VN8A3DAGK14E

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Robert J Owens

Mailing Address 71320 W Thunderbird Ter

City State Zip Code
Rancho Mirage CA 92270-3567

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

Name of Employer Occupation
Retired Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 11 / 2015

Transaction ID : VN8A3DDQY32

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Richard C. Paulson

Mailing Address 11651 Vista Dr

City State Zip Code
Minnetonka MN 55343-8979

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

Name of Employer Occupation
N/A Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 23 / 2015

Transaction ID : VN8A3DBDZG4

Amount of Each Receipt this Period
250.00

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

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

500.00

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

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

FOR LINE NUMBER: PAGE 53 OF 144
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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)
Lenin Pellegrino

Mailing Address 2550 N Halsted St

City Chicago State IL Zip Code 60614-2348

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

Name of Employer N/A Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2015

Transaction ID : VN8A3DDPEE7

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Joseph D Policano

Mailing Address PO Box 584

City East Hampton State NY Zip Code 11937-0401

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

Name of Employer N/A Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 17 / 2015

Transaction ID : VN8A3DC72P4

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Habeebur Rahman

Mailing Address 118 E Allendale Rd

City Saddle River State NJ Zip Code 07458-3010

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

Name of Employer Self-Employed Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 02 / 2015

Transaction ID : VN8A3DBQWN5

Amount of Each Receipt this Period
 1000.00

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: (check only one)	PAGE 54 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Iftekhar Rahman

Mailing Address 72 Crimson Rd

City State Zip Code
Billerica MA 01821-5420

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

Name of Employer Occupation
Verizon Wireless Engineer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 23 / 2015

Transaction ID : VN8A3DBDYE6

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Sheikh Rahman

Mailing Address 276 Bielby Rd
Ste 2

City State Zip Code
Lawrenceburg IN 47025-2750

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

Name of Employer Occupation
Self-Employed Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2015

Transaction ID : VN8A3DDPE30

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Willa Rao Zuberi

Mailing Address 10166 Rush St

City State Zip Code
El Monte CA 91733-3224

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

Name of Employer Occupation
CAI Industrie Business

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 22 / 2015

Transaction ID : VN8A3DCCQP9

Amount of Each Receipt this Period
2700.00

* Earmarked Contribution: See Below

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

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

3200.00

**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 55 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
ActBlue

Mailing Address PO Box 382110

City State Zip Code
Cambridge MA 02238-2110

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
48664.18

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 22 / 2015

Transaction ID : VN8A3DCCQP9E

Amount of Each Receipt this Period
2700.00

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

B. Full Name (Last, First, Middle Initial)
Willa Rao Zuberi

Mailing Address 10166 Rush St

City State Zip Code
El Monte CA 91733-3224

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

Name of Employer Occupation
CAI Industrie Business

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 22 / 2015

Transaction ID : VN8A3DD79G4

Amount of Each Receipt this Period
2700.00

* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City State Zip Code
Cambridge MA 02238-2110

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
48664.18

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 22 / 2015

Transaction ID : VN8A3DD79G4E

Amount of Each Receipt this Period
2700.00

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

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

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

2700.00

**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 56 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Nasreen Rashid

Mailing Address 14 Tamaron Ct

City State Zip Code
Monmouth Junction NJ 08852-2967

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 02 / 2015

Transaction ID : VN8A3DBQXP6

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Mohammad Nasser Sabbagh

Mailing Address 8220 Pine Hollow Trl

City State Zip Code
Grand Blanc MI 48439-7433

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2015

Transaction ID : VN8A3DATVA0

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
GM Sadat

Mailing Address 1038 Swift Rd
Unit 1D

City State Zip Code
Glen Ellyn IL 60137-2405

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

Name of Employer Information Requested Occupation Information Requested
Concordia Wireless, Inc. Civil Engineer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 18 / 2015

Transaction ID : VN8A3DCC949

Amount of Each Receipt this Period
 2700.00

* Earmarked Contribution: See Below

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

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

3700.00

**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 57 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
ActBlue

Mailing Address PO Box 382110

City State Zip Code
Cambridge MA 02238-2110

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
48664.18

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 22 / 2015

Transaction ID : VN8A3DCC949E

Amount of Each Receipt this Period
2700.00

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

B. Full Name (Last, First, Middle Initial)
Mohammed Saleem

Mailing Address 2578 Lakeside Ct

City State Zip Code
Flushing MI 48433-3508

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

Name of Employer Occupation
Genesys Integrated Group Practice Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2015

Transaction ID : VN8A3DATV77

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Ahmad Sbei

Mailing Address 6061 Covered Wagons Trl

City State Zip Code
Flint MI 48532-2100

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

Name of Employer Occupation
Flint Neurological Center Neurologist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2015

Transaction ID : VN8A3DATV35

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: (check only one)	PAGE 58 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Jawad Shah

Mailing Address 3166 Bending Brook Dr

City State Zip Code
Flushing MI 48433-3005

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

Name of Employer Occupation
Insight Institute of Neurosurgery Neurosurgeon

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 27 / 2015

Transaction ID : VN8A3DATYZ3

Amount of Each Receipt this Period
500.00

* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City State Zip Code
Cambridge MA 02238-2110

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
48664.18

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 01 / 2015

Transaction ID : VN8A3DATYZ3E

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Jawad Shah

Mailing Address 4800 S Saginaw St

City State Zip Code
Flint MI 48507-2677

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

Name of Employer Occupation
Insight Institute of Neurosurgery and Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 02 / 2015

Transaction ID : VN8A3DATV85

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: (check only one)	PAGE 59 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Mansoor Shah

Mailing Address 35 Sage Crk

City Irvine State CA Zip Code 92603-0413

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

Name of Employer: Prottealh Partner Occupation: Medical Doctor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 2000.00

Date of Receipt: 03 / 24 / 2015

Transaction ID : VN8A3DCDEY3

Amount of Each Receipt this Period: 2000.00

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

Mailing Address 127 Canal View Dr

City Lawrenceville State NJ Zip Code 08648-1322

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

Name of Employer: Mercer Surgical Group Occupation: Surgeon

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 03 / 02 / 2015

Transaction ID : VN8A3DBQXB9

Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Faisal Shamshad

Mailing Address 359 Mount Lucas Rd

City Princeton State NJ Zip Code 08540-2701

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

Name of Employer: Self Occupation: Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 02 / 24 / 2015

Transaction ID : VN8A3DBS4Q7

Amount of Each Receipt this Period: 1000.00

* Earmarked Contribution: See Below

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

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

3500.00

**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 60 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
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: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **48664.18**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 01 / 2015

Transaction ID : VN8A3DBS4Q7E

Amount of Each Receipt this Period
 _____ **1000.00** _____

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

B. Full Name (Last, First, Middle Initial)
Walied Shater

Mailing Address **PO Box 4704**

City **Houston** State **TX** Zip Code **77210-4704**

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

Name of Employer **Shell** Occupation **Manager**

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 13 / 2015

Transaction ID : VN8A3DC5VY3

Amount of Each Receipt this Period
 _____ **500.00** _____

* Earmarked Contribution: See Below

C. 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: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **48664.18**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 15 / 2015

Transaction ID : VN8A3DC5VY3E

Amount of Each Receipt this Period
 _____ **500.00** _____

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

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

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

_____ **500.00** _____

**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 61 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Adnan Sheikh

Mailing Address 300 Constitution Ave

City Bayonne State NJ Zip Code 07002-5074

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

Name of Employer Self Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 26 / 2015

Transaction ID : VN8A3DBS580

Amount of Each Receipt this Period
 1000.00

* Earmarked Contribution: See Below

B. 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 01 / 2015

Transaction ID : VN8A3DBS580E

Amount of Each Receipt this Period
 1000.00

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

C. Full Name (Last, First, Middle Initial)
Niman Shukairy

Mailing Address 5415 Sycamore Ln

City Flint State MI Zip Code 48532-2263

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

Name of Employer Self-Employed Occupation Dentist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2015

Transaction ID : VN8A3DATV01

Amount of Each Receipt this Period
 250.00

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: (check only one)	PAGE 62 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
William L Shuman

Mailing Address 217 N Oklahoma Way

City Fayetteville State AR Zip Code 72701-4448

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

Name of Employer Arkansas Tech University Occupation Professor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2015

Transaction ID : VN8A3DATTR8

Amount of Each Receipt this Period
 150.00

B. Full Name (Last, First, Middle Initial)
William L Shuman

Mailing Address 217 N Oklahoma Way

City Fayetteville State AR Zip Code 72701-4448

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

Name of Employer Arkansas Tech University Occupation Professor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 02 / 2015

Transaction ID : VN8A3DBRVG4

Amount of Each Receipt this Period
 150.00

C. Full Name (Last, First, Middle Initial)
Muhammad Siddique

Mailing Address 8 Hansen Dr

City Edison State NJ Zip Code 08820-1676

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

Name of Employer Bayonne Medical Care, LLC Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 02 / 2015

Transaction ID : VN8A3DBRMP6

Amount of Each Receipt this Period
 250.00

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: (check only one)	PAGE 63 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)
Kyle Smith

Mailing Address 4627 W 27th Pl

City Yuma State AZ Zip Code 85364-7550

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

Name of Employer JV Farms Occupation Farmer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 30 / 2015

Transaction ID : VN8A3DATZR8

Amount of Each Receipt this Period
100.00

* Earmarked Contribution: See Below

B. 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **48664.18**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 01 / 2015

Transaction ID : VN8A3DATZR8E

Amount of Each Receipt this Period
100.00

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

C. Full Name (Last, First, Middle Initial)
Waleed Soufi

Mailing Address 2 Fieldwood Ct

City Princeton State NJ Zip Code 08540-7090

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

Name of Employer Novopath, Inc. Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 24 / 2015

Transaction ID : VN8A3DBS4N1

Amount of Each Receipt this Period
2500.00

* Earmarked Contribution: See Below

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

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

2600.00

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

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

FOR LINE NUMBER: PAGE 64 OF 144
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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)
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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
48664.18

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 01 / 2015

Transaction ID : VN8A3DBS4N1E

Amount of Each Receipt this Period
2500.00

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

B. Full Name (Last, First, Middle Initial)
Imran Ali Syed

Mailing Address **926 47th St
Apt B5**

City **Brooklyn** State **NY** Zip Code **11219-2802**

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

Name of Employer Occupation
Self Doctor

Receipt For: 2016
 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 / 02 / 2015

Transaction ID : VN8A3DBQWS7

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Mubtagha Syed

Mailing Address **89 Clifford Avenue**

City **Jersey City** State **NJ** Zip Code **07304**

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

Name of Employer Occupation
Self Health Administrator

Receipt For: 2016
 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 / 25 / 2015

Transaction ID : VN8A3DBS4Y3

Amount of Each Receipt this Period
500.00

* Earmarked Contribution: See Below

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

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

1500.00

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

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

FOR LINE NUMBER: PAGE 65 OF 144
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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)
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: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **48664.18**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 01 / 2015

Transaction ID : VN8A3DBS4Y3E

Amount of Each Receipt this Period
 _____ **500.00** _____

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

B. Full Name (Last, First, Middle Initial)
Simin Syed

Mailing Address **8 Revere Ct**

City **Princeton Jct** State **NJ** Zip Code **08550-2160**

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

Name of Employer **Self** Occupation **Attorney**

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 24 / 2015

Transaction ID : VN8A3DBS4P9

Amount of Each Receipt this Period
 _____ **1000.00** _____

* Earmarked Contribution: See Below

C. 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: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **48664.18**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 01 / 2015

Transaction ID : VN8A3DBS4P9E

Amount of Each Receipt this Period
 _____ **1000.00** _____

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

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

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

_____ **1000.00** _____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Mohammad Tabbah

Mailing Address 673 Bending Brk

City Flushing	State MI	Zip Code 48433-3020
------------------	-------------	------------------------

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

Name of Employer Hurley Medical Center	Occupation Physician
---	-------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2015

Transaction ID : VN8A3DATTM7

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Shahid Tahir

Mailing Address 3840 Manchester Ct

City Bloomfield Hills	State MI	Zip Code 48302-1239
--------------------------	-------------	------------------------

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

Name of Employer Home Healthcare	Occupation CEO
-------------------------------------	-------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2015

Transaction ID : VN8A3DATVE2

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Nael Tarakji

Mailing Address 6192 River Rd

City Flushing	State MI	Zip Code 48433-2508
------------------	-------------	------------------------

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

Name of Employer McLaren Regional Medical Center	Occupation Physician
---	-------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2015

Transaction ID : VN8A3DATTX8

Amount of Each Receipt this Period
1000.00

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: (check only one)	PAGE 67 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Leonard Thigpen

Mailing Address 380 Adams Ave

City State Zip Code
Glencoe IL 60022-1818

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

Name of Employer Occupation
N/A Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 09 / 2015

Transaction ID : VN8A3DC07S4

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
William Tilton

Mailing Address 195 Chatsworth St S
1

City State Zip Code
Saint Paul MN 55105-3224

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

Name of Employer Occupation
Tilton & Dunn PLLP Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
150.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 13 / 2015

Transaction ID : VN8A3DACPC5

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
William Tilton

Mailing Address 195 Chatsworth St S
1

City State Zip Code
Saint Paul MN 55105-3224

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

Name of Employer Occupation
Tilton & Dunn PLLP Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 13 / 2015

Transaction ID : VN8A3DB7683

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: (check only one)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 68 OF 144

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)
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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 13 / 2015

Transaction ID : VN8A3DC39F4

Amount of Each Receipt this Period
 50.00

B. Full Name (Last, First, Middle Initial)
Jonathan P Tolins

Mailing Address 1935 Emerson Ave S

City Minneapolis State MN Zip Code 55403-2917

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

Name of Employer Fairview Health Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 05 / 2015

Transaction ID : VN8A3DBTR22

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Salaheddine Tomeh

Mailing Address 5600 E Doubletree Ranch Rd

City Paradise Valley State AZ Zip Code 85253-1704

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

Name of Employer St. Joseph's Hospital Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 08 / 2015

Transaction ID : VN8A3DACVW1

Amount of Each Receipt this Period
 100.00

* Earmarked Contribution: See Below

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: (check only one)	PAGE 69 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
ActBlue

Mailing Address PO Box 382110

City State Zip Code
Cambridge MA 02238-2110

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
48664.18

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 11 / 2015

Transaction ID : VN8A3DACVW1E

Amount of Each Receipt this Period
100.00

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

B. Full Name (Last, First, Middle Initial)
Salaheddine Tomeh

Mailing Address 5600 E Doubletree Ranch Rd

City State Zip Code
Paradise Valley AZ 85253-1704

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

Name of Employer Occupation
St. Joseph's Hospital Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 08 / 2015

Transaction ID : VN8A3DB0GY2

Amount of Each Receipt this Period
100.00

* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City State Zip Code
Cambridge MA 02238-2110

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
48664.18

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 08 / 2015

Transaction ID : VN8A3DB0GY2E

Amount of Each Receipt this Period
100.00

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

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 70 OF 144
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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)
Tariq Usmani

Mailing Address 33 Hasbrouck Dr

City State Zip Code
Franklin Park NJ 08823-1825

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

Name of Employer Self Occupation Business Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 20 / 2015

Transaction ID : VN8A3DD8WM4

Amount of Each Receipt this Period
 100.00

B. Full Name (Last, First, Middle Initial)
Tariq Usmani

Mailing Address 33 Hasbrouck Dr

City State Zip Code
Franklin Park NJ 08823-1825

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

Name of Employer Self Occupation Business Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 02 / 2015

Transaction ID : VN8A3DBQXZ7

Amount of Each Receipt this Period
 400.00

C. 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 Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 12 / 2015

Transaction ID : VN8A3DB62X3

Amount of Each Receipt this Period
 1000.00

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

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

1500.00

**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 71 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
John Dix Wayman

Mailing Address 917 Danby Rd

City Ithaca State NY Zip Code 14850-5719

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

Name of Employer Strong Health Audiology Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2015

Transaction ID : VN8A3DC0833

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Diane Wiley

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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 22 / 2015

Transaction ID : VN8A3DCCQJ7

Amount of Each Receipt this Period
250.00

* Earmarked Contribution: See Below

C. 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
48664.18

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 22 / 2015

Transaction ID : VN8A3DCCQJ7E

Amount of Each Receipt this Period
250.00

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

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 72 OF 144
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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)
Tahir Zafar

Mailing Address 29 Ludlow Ct

City State Zip Code
Princeton Junction NJ 08550-3271

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

Name of Employer Self Occupation Investor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 02 / 2015

Transaction ID : VN8A3DBQXQ4

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Farhat Zubair

Mailing Address 2061 S Middlecoff Ct

City State Zip Code
La Habra CA 90631-9532

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

Name of Employer Gardenia Memorial Hospital Occupation Anesthesiologist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2015

Transaction ID : VN8A3DCDF96

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Mohammad A. Zubair

Mailing Address 900 Woodbridge Center Dr

City State Zip Code
Woodbridge NJ 07095-1324

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

Name of Employer Self-Employed Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 02 / 2015

Transaction ID : VN8A3DBRV65

Amount of Each Receipt this Period
 250.00

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: PAGE 73 OF 144
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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)
Asifa Zuberi

Mailing Address 10166 Rush St

City State Zip Code
El Monte CA 91733-3224

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

Name of Employer Occupation
N/A Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 22 / 2015

Transaction ID : VN8A3DCCQN1

Amount of Each Receipt this Period
2700.00

* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City State Zip Code
Cambridge MA 02238-2110

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
48664.18

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 22 / 2015

Transaction ID : VN8A3DCCQN1E

Amount of Each Receipt this Period
2700.00

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

C. Full Name (Last, First, Middle Initial)
Asifa Zuberi

Mailing Address 10166 Rush St

City State Zip Code
El Monte CA 91733-3224

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

Name of Employer Occupation
N/A Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 22 / 2015

Transaction ID : VN8A3DD79Q9

Amount of Each Receipt this Period
2700.00

* Earmarked Contribution: See Below

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

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

5400.00

**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 74 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
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: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **48664.18**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 22 / 2015

Transaction ID : VN8A3DD79Q9E

Amount of Each Receipt this Period

2700.00

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

B. Full Name (Last, First, Middle Initial)
Imaad Zuberi

Mailing Address **10166 Rush St**

City **El Monte** State **CA** Zip Code **91733-3224**

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

Name of Employer **Avenue Ventures** Occupation **venture capital**

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **5400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 22 / 2015

Transaction ID : VN8A3DCCQM3

Amount of Each Receipt this Period

2700.00

* Earmarked Contribution: See Below

C. 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: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **48664.18**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 22 / 2015

Transaction ID : VN8A3DCCQM3E

Amount of Each Receipt this Period

2700.00

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

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	FOR LINE NUMBER: (check only one)	PAGE 75 OF 144
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Imaad Zuberi

Mailing Address 10166 Rush St

City El Monte State CA Zip Code 91733-3224

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

Name of Employer Avenue Ventures Occupation venture capital

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 22 / 2015

Transaction ID : VN8A3DD79S5

Amount of Each Receipt this Period
2700.00

* Earmarked Contribution: See Below

B. 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
48664.18

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 22 / 2015

Transaction ID : VN8A3DD79S5E

Amount of Each Receipt this Period
2700.00

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

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / 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).....

2700.00

85882.00

**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 76 OF 144
	<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	

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)
American Association for Justice PAC

Mailing Address **777 6th St NW**

City **Washington** State **DC** Zip Code **20001-3723**

FEC ID number of contributing federal political committee. **C C00024521**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 09 / 2015

Transaction ID : VN8A3DB0GP9

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
American Association for Justice PAC

Mailing Address **777 6th St NW**

City **Washington** State **DC** Zip Code **20001-3723**

FEC ID number of contributing federal political committee. **C C00024521**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 30 / 2015

Transaction ID : VN8A3DDP199

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
American Crystal Sugar Comany PAC

Mailing Address **101 3rd St N**

City **Moorhead** State **MN** Zip Code **56560-1990**

FEC ID number of contributing federal political committee. **C C00110338**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 30 / 2015

Transaction ID : VN8A3DDP1B5

Amount of Each Receipt this Period

5000.00

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

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

7000.00

**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 77 OF 144
	<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	

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)
American Federaton of State County and Municipal Employees PAC

Mailing Address 1625 L St NW

City Washington State DC Zip Code 20036-5665

FEC ID number of contributing federal political committee. **C C00011114**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 13 / 2015

Transaction ID : VN8A3DC3MM6

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
AMERICAN PHYSICAL THERAPY ASSOCIATION PHYSICAL THERAPY POLITICAL ACTION COMMITTEE (PT-PAC)

Mailing Address 1111 N Fairfax St

City Alexandria State VA Zip Code 22314-1484

FEC ID number of contributing federal political committee. **C C00012880**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2015

Transaction ID : VN8A3DDBFS0

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
American Postal Workers Union (APWU)

Mailing Address 1300 L St NW Ste 200

City Washington State DC Zip Code 20005-4128

FEC ID number of contributing federal political committee. **C C00010322**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 26 / 2015

Transaction ID : VN8A3DD8FV2

Amount of Each Receipt this Period
1000.00

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

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

3500.00

**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 78 OF 144
	<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	

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)
Communications Workers of America-COPE

Mailing Address 501 3rd St NW

City Washington State DC Zip Code 20001-2760

FEC ID number of contributing federal political committee. **C** C00002089

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2015

Transaction ID : VN8A3DDP1C3

Amount of Each Receipt this Period
 2500.00

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

Mailing Address 1050 K St NW Ste 400

City Washington State DC Zip Code 20001-4448

FEC ID number of contributing federal political committee. **C** C00386904

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 09 / 2015

Transaction ID : VN8A3DB0GQ7

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
International Brotherhood of Electrical Workers Council

Mailing Address 900 7th St NW Bsmt 1

City Washington State DC Zip Code 20001-4089

FEC ID number of contributing federal political committee. **C** C00027342

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 23 / 2015

Transaction ID : VN8A3DBE0B8

Amount of Each Receipt this Period
 2500.00

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

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

6000.00

**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 144
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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)
Lockridge Grindal Nauen Political Fund

Mailing Address 100 Washington Ave S

City State Zip Code
Minneapolis MN 55401-2110

FEC ID number of contributing federal political committee. **C** C00167916

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 09 / 2015

Transaction ID : VN8A3DB0GR5

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
National Association of Letter Carriers of United States of America Branch 9 P.A.L.

Mailing Address 11581 Ilex St NW

City State Zip Code
Minneapolis MN 55448-2316

FEC ID number of contributing federal political committee. **C** C00114314

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 19 / 2015

Transaction ID : VN8A3DC8PN6

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
National Multi Housing Council PAC

Mailing Address 1850 M St NW
Ste 540

City State Zip Code
Washington DC 20036-5816

FEC ID number of contributing federal political committee. **C** C00130773

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 09 / 2015

Transaction ID : VN8A3DB0GN1

Amount of Each Receipt this Period
 1000.00

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

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

3000.00

**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 144
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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)
Progressives United PAC

Mailing Address PO Box 620062

City Middleton State WI Zip Code 53562-0062

FEC ID number of contributing federal political committee. **C** C00279901

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2015

Transaction ID : VN8A3DDJ6W9

Amount of Each Receipt this Period
 2500.00

B. Full Name (Last, First, Middle Initial)
Sierra Club Political Committee

Mailing Address 85 2nd St

City San Francisco State CA Zip Code 94105-3459

FEC ID number of contributing federal political committee. **C** C00135368

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2015

Transaction ID : VN8A3DDP173

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Transport Workers Union Political Contributions Committee

Mailing Address 501 3rd St NW

City Washington State DC Zip Code 20001-2760

FEC ID number of contributing federal political committee. **C** C00008268

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2015

Transaction ID : VN8A3DATTB5

Amount of Each Receipt this Period
 1000.00

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

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

4500.00

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

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

FOR LINE NUMBER: PAGE 81 OF 144
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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)
United Food & Commercial Workers International Union Active Ballot Club

Mailing Address **1775 K St NW**
Bsmt

City **Washington** State **DC** Zip Code **20006-1521**

FEC ID number of contributing federal political committee. **C C00002766**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 09 / 2015

Transaction ID : VN8A3DB0H73

Amount of Each Receipt this Period
5000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

5000.00

29000.00

**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 82 OF 144
	<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	

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)
Hoch and Hoch

Mailing Address 1313 Plymouth Ave N

City State Zip Code
Minneapolis MN 55411-4065

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2545.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 13 / 2015

Transaction ID : VN8A3DACVA9

Amount of Each Receipt this Period
2545.00

Refund

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

2545.00

2545.00

**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 83 OF 144			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) A. 1-800-Flowers.com		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2015
Mailing Address 1 Old Country Rd Ste 500		Amount of Each Disbursement this Period 54.98
City Carle Place	State NY	
Zip Code 11514-1847		Transaction ID : VN7AV9TTFM6
Purpose of Disbursement Event Expense	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. 1-800-Flowers.com		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2015
Mailing Address 1 Old Country Rd Ste 500		Amount of Each Disbursement this Period 54.98
City Carle Place	State NY	
Zip Code 11514-1847		Transaction ID : VN7AV9TTFN4
Purpose of Disbursement Event Expense	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. 1-800-Flowers.com		Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2015
Mailing Address 1 Old Country Rd Ste 500		Amount of Each Disbursement this Period 58.83
City Carle Place	State NY	
Zip Code 11514-1847		Transaction ID : VN7AV9TVR39
Purpose of Disbursement Event Expense	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	168.79
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 144			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) A. 1-800-Flowers.com		Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2015
Mailing Address 1 Old Country Rd Ste 500		Amount of Each Disbursement this Period 58.83
City Carle Place	State NY Zip Code 11514-1847	
Purpose of Disbursement Event Expense	Candidate Name	Transaction ID : VN7AV9TVR47
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. 1-800-Flowers.com		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2015
Mailing Address 1 Old Country Rd Ste 500		Amount of Each Disbursement this Period 65.30
City Carle Place	State NY Zip Code 11514-1847	
Purpose of Disbursement Event Expense	Candidate Name	Transaction ID : VN7AV9TVR70
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. 1-800-Flowers.com		Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2015
Mailing Address 1 Old Country Rd Ste 500		Amount of Each Disbursement this Period 64.98
City Carle Place	State NY Zip Code 11514-1847	
Purpose of Disbursement Event Expense	Candidate Name	Transaction ID : VN7AV9TVR63
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	189.11
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 144			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) A. 1-800-Flowers.com		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2015
Mailing Address 1 Old Country Rd Ste 500		Amount of Each Disbursement this Period 64.98
City Carle Place	State NY Zip Code 11514-1847	
Purpose of Disbursement Event Expense	Candidate Name	Transaction ID : VN7AV9TVR55
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. 1-800-Flowers.com		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2015
Mailing Address 1 Old Country Rd Ste 500		Amount of Each Disbursement this Period 120.41
City Carle Place	State NY Zip Code 11514-1847	
Purpose of Disbursement Event Expense	Candidate Name	Transaction ID : VN7AV9TVR88
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Acorn Mini Storage		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2015
Mailing Address 4652 Lyndale Ave N		Amount of Each Disbursement this Period 113.00
City Minneapolis	State MN Zip Code 55412-1441	
Purpose of Disbursement Storage Rent	Candidate Name	Transaction ID : VN7AV9TPJK2
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	298.39
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 144			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) A. Acorn Mini Storage		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2015
Mailing Address 4652 Lyndale Ave N		Amount of Each Disbursement this Period 92.05
City Minneapolis	State MN	
Zip Code 55412-1441	Purpose of Disbursement Storage Rent	Transaction ID : VN7AV9TTXE7
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Actblue Technical		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2015
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 18.83
City Somerville	State MA	
Zip Code 02144-3132	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : VN7AV9TTFQ0
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Actblue Technical		Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2015
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 19.41
City Somerville	State MA	
Zip Code 02144-3132	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : VN7AV9TTFR8
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	130.29
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 144			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) A. Actblue Technical		Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2015
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 78.73
City Somerville State MA Zip Code 02144-3132	Purpose of Disbursement Credit Card Processing Fees	
Candidate Name	Category/Type	Transaction ID : VN7AV9TTFS6
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B. Actblue Technical		Date of Disbursement M M / D D / Y Y Y Y 01 / 25 / 2015
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 8.84
City Somerville State MA Zip Code 02144-3132	Purpose of Disbursement Credit Card Processing Fees	
Candidate Name	Category/Type	Transaction ID : VN7AV9TTFP2
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) C. Actblue Technical		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2015
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 92.06
City Somerville State MA Zip Code 02144-3132	Purpose of Disbursement Credit Card Processing Fees	
Candidate Name	Category/Type	Transaction ID : VN7AV9TVRF4
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	179.63
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 144			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) A. Actblue Technical		Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2015
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 23.74
City Somerville State MA Zip Code 02144-3132	Purpose of Disbursement Credit Card Processing Fees	
Candidate Name	Category/Type	Transaction ID : VN7AV9TVR96
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B. Actblue Technical		Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2015
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 30.69
City Somerville State MA Zip Code 02144-3132	Purpose of Disbursement Credit Card Processing Fees	
Candidate Name	Category/Type	Transaction ID : VN7AV9TVRD8
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) C. Actblue Technical		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2015
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 15.78
City Somerville State MA Zip Code 02144-3132	Purpose of Disbursement Credit Card Processing Fees	
Candidate Name	Category/Type	Transaction ID : VN7AV9TVRA4
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	70.21
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 144			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) A. Actblue Technical		Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2015
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 465.87
City Somerville	State MA	
Zip Code 02144-3132	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : VN7AV9TVRB2
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Actblue Technical		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2015
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 24.84
City Somerville	State MA	
Zip Code 02144-3132	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : VN7AV9TVRC0
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Actblue Technical		Date of Disbursement M M / D D / Y Y Y Y 03 / 22 / 2015
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 98.27
City Somerville	State MA	
Zip Code 02144-3132	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : VN7AV9TVRG2
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	588.98
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 90 OF 144	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) A. Actblue Technical		Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2015
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 853.09
City Somerville State MA Zip Code 02144-3132	Purpose of Disbursement Credit Card Processing Fees	
Candidate Name	Category/Type	Transaction ID : VN7AV9TVRH9
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Actblue Technical		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2015
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 31.80
City Somerville State MA Zip Code 02144-3132	Purpose of Disbursement Credit Card Processing Fees	
Candidate Name	Category/Type	Transaction ID : VN7AV9TVRE6
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ADP, Inc.		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2015
Mailing Address 8100 Old Cedar Ave S		Amount of Each Disbursement this Period 7488.97
City Minneapolis State MN Zip Code 55425-1802	Purpose of Disbursement Payroll - See Memos	
Candidate Name	Category/Type	Transaction ID : VN7AV9TTEK6
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	8373.86
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 91 OF 144	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) A. ADP, Inc.		Date of Disbursement MM / DD / YYYY 01 / 05 / 2015
Mailing Address 8100 Old Cedar Ave S		Amount of Each Disbursement this Period 2643.31
City Minneapolis	State MN	
Zip Code 55425-1802	Purpose of Disbursement Payroll Taxes	Transaction ID : VN7AV9TTES3
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. Sarah S Helgen		Date of Disbursement MM / DD / YYYY 01 / 05 / 2015
Mailing Address 2700 Pillsbury Ave S Apt 3		Amount of Each Disbursement this Period 2089.32
City Minneapolis	State MN	
Zip Code 55408-1557	Purpose of Disbursement Payroll	Transaction ID : VN7AV9TTF08
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) C. David A Leonard		Date of Disbursement MM / DD / YYYY 01 / 05 / 2015
Mailing Address 7425 Oak Park Village Dr Apt 3		Amount of Each Disbursement this Period 1712.44
City Saint Louis Park	State MN	
Zip Code 55426-4142	Purpose of Disbursement Payroll	Transaction ID : VN7AV9TTF82
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 92 OF 144	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) A. Justin Young		Date of Disbursement MM / DD / YYYY 01 / 05 / 2015
Mailing Address 1799 Randolph Ave		Amount of Each Disbursement this Period 1043.90
City Saint Paul	State MN	
Zip Code 55105	Purpose of Disbursement Payroll	Transaction ID : VN7AV9TTFE9
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. ADP, Inc.		Date of Disbursement MM / DD / YYYY 01 / 16 / 2015
Mailing Address 8100 Old Cedar Ave S		Amount of Each Disbursement this Period 67.90
City Minneapolis	State MN	
Zip Code 55425-1802	Purpose of Disbursement Payroll Service Fees	Transaction ID : VN7AV9TTFT4
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ADP, Inc.		Date of Disbursement MM / DD / YYYY 01 / 20 / 2015
Mailing Address 8100 Old Cedar Ave S		Amount of Each Disbursement this Period 7584.13
City Minneapolis	State MN	
Zip Code 55425-1802	Purpose of Disbursement Payroll - See Memos	Transaction ID : VN7AV9TTEM4
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	7652.03
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 144			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) A. ADP, Inc.		Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2015
Mailing Address 8100 Old Cedar Ave S		Amount of Each Disbursement this Period 2688.22
City Minneapolis	State MN	
Zip Code 55425-1802	Purpose of Disbursement Payroll Taxes	Transaction ID : VN7AV9TTET1
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. Sarah S Helgen		Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2015
Mailing Address 2700 Pillsbury Ave S Apt 3		Amount of Each Disbursement this Period 2089.31
City Minneapolis	State MN	
Zip Code 55408-1557	Purpose of Disbursement Payroll	Transaction ID : VN7AV9TTF16
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) C. David A Leonard		Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2015
Mailing Address 7425 Oak Park Village Dr Apt 3		Amount of Each Disbursement this Period 1762.69
City Saint Louis Park	State MN	
Zip Code 55426-4142	Purpose of Disbursement Payroll	Transaction ID : VN7AV9TTF99
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 144			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) A. Justin Young		Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2015
Mailing Address 1799 Randolph Ave		Amount of Each Disbursement this Period 1043.91
City Saint Paul	State MN	
Zip Code 55105	Purpose of Disbursement Payroll	Transaction ID : VN7AV9TTF7
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. ADP, Inc.		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2015
Mailing Address 8100 Old Cedar Ave S		Amount of Each Disbursement this Period 133.90
City Minneapolis	State MN	
Zip Code 55425-1802	Purpose of Disbursement Payroll Service Fees	Transaction ID : VN7AV9TTFW0
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ADP, Inc.		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2015
Mailing Address 8100 Old Cedar Ave S		Amount of Each Disbursement this Period 67.90
City Minneapolis	State MN	
Zip Code 55425-1802	Purpose of Disbursement Payroll Service Fees	Transaction ID : VN7AV9TTFV2
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	201.80
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 144			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) A. ADP, Inc.			Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2015		
Mailing Address 8100 Old Cedar Ave S			Amount of Each Disbursement this Period 7573.38		
City Minneapolis	State MN	Zip Code 55425-1802	Transaction ID : VN7AV9TTEN1		
Purpose of Disbursement Payroll - See Memos		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. ADP, Inc.			Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2015		
Mailing Address 8100 Old Cedar Ave S			Amount of Each Disbursement this Period 2677.47		
City Minneapolis	State MN	Zip Code 55425-1802	Transaction ID : VN7AV9TTEV9		
Purpose of Disbursement Payroll Taxes		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		[MEMO ITEM]		
State: District:	*				

Full Name (Last, First, Middle Initial) c. Sarah S Helgen			Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2015		
Mailing Address 2700 Pillsbury Ave S Apt 3			Amount of Each Disbursement this Period 2089.31		
City Minneapolis	State MN	Zip Code 55408-1557	Transaction ID : VN7AV9TTF32		
Purpose of Disbursement Payroll		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		[MEMO ITEM]		
State: District:	*				

SUBTOTAL of Disbursements This Page (optional).....	7573.38
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 96 OF 144	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) A. David A Leonard		Date of Disbursement MM / DD / YYYY 02 / 05 / 2015
Mailing Address 7425 Oak Park Village Dr Apt 3		Amount of Each Disbursement this Period 1762.70
City Saint Louis Park	State MN	
Zip Code 55426-4142	Purpose of Disbursement Payroll	Transaction ID : VN7AV9TTFA7
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. Justin Young		Date of Disbursement MM / DD / YYYY 02 / 05 / 2015
Mailing Address 1799 Randolph Ave		Amount of Each Disbursement this Period 1043.90
City Saint Paul	State MN	
Zip Code 55105	Purpose of Disbursement Payroll	Transaction ID : VN7AV9TTFG5
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) c. ADP, Inc.		Date of Disbursement MM / DD / YYYY 02 / 13 / 2015
Mailing Address 8100 Old Cedar Ave S		Amount of Each Disbursement this Period 67.90
City Minneapolis	State MN	
Zip Code 55425-1802	Purpose of Disbursement Payroll Service Fees	Transaction ID : VN7AV9TVRM3
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	67.90
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 144			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) A. ADP, Inc.			Date of Disbursement MM / DD / YYYY 02 / 20 / 2015		
Mailing Address 8100 Old Cedar Ave S			Amount of Each Disbursement this Period 7552.38		
City Minneapolis	State MN	Zip Code 55425-1802	Transaction ID : VN7AV9TTEP9		
Purpose of Disbursement Payroll - See Memos		Category/ Type			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) B. ADP, Inc.			Date of Disbursement MM / DD / YYYY 02 / 20 / 2015		
Mailing Address 8100 Old Cedar Ave S			Amount of Each Disbursement this Period 2656.46		
City Minneapolis	State MN	Zip Code 55425-1802	Transaction ID : VN7AV9TTEX5		
Purpose of Disbursement Payroll Taxes		Category/ Type			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]		
State:	District:	*			

Full Name (Last, First, Middle Initial) c. Sarah S Helgen			Date of Disbursement MM / DD / YYYY 02 / 20 / 2015		
Mailing Address 2700 Pillsbury Ave S Apt 3			Amount of Each Disbursement this Period 2089.32		
City Minneapolis	State MN	Zip Code 55408-1557	Transaction ID : VN7AV9TTF40		
Purpose of Disbursement Payroll		Category/ Type			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]		
State:	District:	*			

SUBTOTAL of Disbursements This Page (optional).....	7552.38
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 144			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) A. David A Leonard			Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2015	
Mailing Address 7425 Oak Park Village Dr Apt 3			Amount of Each Disbursement this Period 1762.69	
City Saint Louis Park	State MN	Zip Code 55426-4142	Transaction ID : VN7AV9TTFB5	
Purpose of Disbursement Payroll		Category/ Type	[MEMO ITEM] *	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Justin Young			Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2015	
Mailing Address 1799 Randolph Ave			Amount of Each Disbursement this Period 1043.91	
City Saint Paul	State MN	Zip Code 55105	Transaction ID : VN7AV9TTFH3	
Purpose of Disbursement Payroll		Category/ Type	[MEMO ITEM] *	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. ADP, Inc.			Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2015	
Mailing Address 8100 Old Cedar Ave S			Amount of Each Disbursement this Period 67.90	
City Minneapolis	State MN	Zip Code 55425-1802	Transaction ID : VN7AV9TVR21	
Purpose of Disbursement Payroll Service Fees		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	67.90
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 99 OF 144	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) A. ADP, Inc.		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2015
Mailing Address 8100 Old Cedar Ave S		Amount of Each Disbursement this Period 7552.38
City Minneapolis	State MN	
Zip Code 55425-1802	Purpose of Disbursement Payroll - See Memos	Transaction ID : VN7AV9TTEQ7
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ADP, Inc.		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2015
Mailing Address 8100 Old Cedar Ave S		Amount of Each Disbursement this Period 2656.48
City Minneapolis	State MN	
Zip Code 55425-1802	Purpose of Disbursement Payroll Taxes	Transaction ID : VN7AV9TTEY3
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) c. Sarah S Helgen		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2015
Mailing Address 2700 Pillsbury Ave S Apt 3		Amount of Each Disbursement this Period 2089.31
City Minneapolis	State MN	
Zip Code 55408-1557	Purpose of Disbursement Payroll	Transaction ID : VN7AV9TTF58
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	7552.38
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 100 OF 144	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) A. David A Leonard		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2015
Mailing Address 7425 Oak Park Village Dr Apt 3		Amount of Each Disbursement this Period 1762.69
City Saint Louis Park	State MN	
Zip Code 55426-4142	Purpose of Disbursement Payroll	Transaction ID : VN7AV9TTF3
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. Justin Young		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2015
Mailing Address 1799 Randolph Ave		Amount of Each Disbursement this Period 1043.90
City Saint Paul	State MN	
Zip Code 55105	Purpose of Disbursement Payroll	Transaction ID : VN7AV9TTFJ1
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) C. ADP, Inc.		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 8100 Old Cedar Ave S		Amount of Each Disbursement this Period 67.90
City Minneapolis	State MN	
Zip Code 55425-1802	Purpose of Disbursement Payroll Service Fees	Transaction ID : VN7AV9TVRK5
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	67.90
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 101 OF 144	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) A. ADP, Inc.		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2015
Mailing Address 8100 Old Cedar Ave S		Amount of Each Disbursement this Period 7687.77
City Minneapolis	State MN	
Zip Code 55425-1802	Purpose of Disbursement Payroll - See Memos	Transaction ID : VN7AV9TTER5
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ADP, Inc.		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2015
Mailing Address 8100 Old Cedar Ave S		Amount of Each Disbursement this Period 2703.97
City Minneapolis	State MN	
Zip Code 55425-1802	Purpose of Disbursement Payroll Taxes	Transaction ID : VN7AV9TTEZ0
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) c. Sarah S Helgen		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2015
Mailing Address 2700 Pillsbury Ave S Apt 3		Amount of Each Disbursement this Period 2089.32
City Minneapolis	State MN	
Zip Code 55408-1557	Purpose of Disbursement Payroll	Transaction ID : VN7AV9TTF74
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	7687.77
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 102 OF 144	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) A. David A Leonard		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2015
Mailing Address 7425 Oak Park Village Dr Apt 3		Amount of Each Disbursement this Period 1762.69
City Saint Louis Park	State MN	
Zip Code 55426-4142	Purpose of Disbursement Payroll	Transaction ID : VN7AV9TTFD1
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. Justin Young		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2015
Mailing Address 1799 Randolph Ave		Amount of Each Disbursement this Period 1131.79
City Saint Paul	State MN	
Zip Code 55105	Purpose of Disbursement Payroll	Transaction ID : VN7AV9TTFK8
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) c. ADP, Inc.		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2015
Mailing Address 8100 Old Cedar Ave S		Amount of Each Disbursement this Period 67.90
City Minneapolis	State MN	
Zip Code 55425-1802	Purpose of Disbursement Payroll Service Fees	Transaction ID : VN7AV9TVRJ7
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	67.90
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 103 OF 144	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) A. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2015
Mailing Address PO Box 619612 MD 2400		Amount of Each Disbursement this Period 249.10
City Dfw Airport	State TX Zip Code 75261-9612	
Purpose of Disbursement Travel	Candidate Name	Transaction ID : VN7AV9TVRN1
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2015
Mailing Address PO Box 619612 MD 2400		Amount of Each Disbursement this Period 249.10
City Dfw Airport	State TX Zip Code 75261-9612	
Purpose of Disbursement Travel	Candidate Name	Transaction ID : VN7AV9TVRQ7
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. American Express		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2015
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 7.95
City Phoenix	State AZ Zip Code 85072-3852	
Purpose of Disbursement Credit Card Processing Fees	Candidate Name	Transaction ID : VN7AV9TTFX7
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	506.15
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 144			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2015
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 7.95
City Phoenix	State AZ	
Zip Code 85072-3852	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : VN7AV9TTFY5
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. American Express		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2015
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 10.03
City Phoenix	State AZ	
Zip Code 85072-3852	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : VN7AV9TTFZ3
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. American Express		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2015
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 18.86
City Phoenix	State AZ	
Zip Code 85072-3852	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : VN7AV9TTG01
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	36.86
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 144			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2015
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 7.95
City Phoenix	State AZ	
Zip Code 85072-3852	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : VN7AV9TVRR5
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. American Express		Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2015
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 7.95
City Phoenix	State AZ	
Zip Code 85072-3852	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : VN7AV9TVRV8
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. American Express		Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2015
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 2.91
City Phoenix	State AZ	
Zip Code 85072-3852	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : VN7AV9TVRT1
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	18.81
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 106 OF 144	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2015
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 9.74
City Phoenix State AZ Zip Code 85072-3852	Category/Type	
Purpose of Disbursement Credit Card Processing Fees		Transaction ID : VN7AV9TVRX4
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B. American Express		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2015
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 7.95
City Phoenix State AZ Zip Code 85072-3852	Category/Type	
Purpose of Disbursement Credit Card Processing Fees		Transaction ID : VN7AV9TVRS3
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) C. American Express		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2015
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 7.95
City Phoenix State AZ Zip Code 85072-3852	Category/Type	
Purpose of Disbursement Credit Card Processing Fees		Transaction ID : VN7AV9TVRW6
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	25.64
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 107 OF 144	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2015
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 24.70
City Phoenix	State AZ	
Zip Code 85072-3852	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : VN7AV9TVRY2
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. American Express		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2015
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 26.54
City Phoenix	State AZ	
Zip Code 85072-3852	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : VN7AV9TVRZ0
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Bankcard Assoc		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2015
Mailing Address 2221 W Broadway St		Amount of Each Disbursement this Period 129.69
City Fort Worth	State TX	
Zip Code 76102-4311	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : VN7AV9TTG19
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	180.93
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 108 OF 144	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) A. Bankcard Assoc		Date of Disbursement MM / DD / YYYY 02 / 03 / 2015
Mailing Address 2221 W Broadway St		Amount of Each Disbursement this Period 160.34 Transaction ID : VN7AV9TVS14
City Fort Worth	State TX	
Zip Code 76102-4311	Purpose of Disbursement Credit Card Processing Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Bankcard Assoc		Date of Disbursement MM / DD / YYYY 03 / 02 / 2015
Mailing Address 2221 W Broadway St		Amount of Each Disbursement this Period 173.43 Transaction ID : VN7AV9TVS22
City Fort Worth	State TX	
Zip Code 76102-4311	Purpose of Disbursement Credit Card Processing Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Beth Foster Consultants LLC		Date of Disbursement MM / DD / YYYY 01 / 16 / 2015
Mailing Address 2102 W 49th St		Amount of Each Disbursement this Period 2000.00 Transaction ID : VN7AV9TPTT3
City Minneapolis	State MN	
Zip Code 55419-5230	Purpose of Disbursement Consulting - Direct Mail	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2333.77
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 109 OF 144	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) A. Beth Foster Consultants LLC		Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2015
Mailing Address 2102 W 49th St		Amount of Each Disbursement this Period 2000.00
City Minneapolis	State MN	
Zip Code 55419-5230	Purpose of Disbursement Consulting - Direct Mail	Transaction ID : VN7AV9TS4M3
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Big Sky Copywriting		Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2015
Mailing Address 6710 Linda Vista Blvd		Amount of Each Disbursement this Period 2000.00
City Missoula	State MT	
Zip Code 59803-2769	Purpose of Disbursement Consulting - Direct Mail	Transaction ID : VN7AV9TS4J9
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Big Sky Copywriting		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2015
Mailing Address 6710 Linda Vista Blvd		Amount of Each Disbursement this Period 2000.00
City Missoula	State MT	
Zip Code 59803-2769	Purpose of Disbursement Consulting - Direct Mail	Transaction ID : VN7AV9TTXK7
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 OF 144			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial)		Date of Disbursement										
A. CHS Mailing		<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>02</td> <td></td> <td>2015</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	02		02		2015
M M	/	D D	/	Y Y Y Y								
02		02		2015								
Mailing Address 12006 Old Baltimore Pike		Amount of Each Disbursement this Period										
City	State											
Beltsville	MD	<table border="1"> <tr> <td colspan="5">5023.82</td> </tr> </table>	5023.82									
5023.82												
Zip Code	20705-1412	Transaction ID : VN7AV9TVS89										
Purpose of Disbursement	Category/Type											
Direct Mailing												
Candidate Name												
Office Sought:	Disbursement For: 2016											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
B. CHS Mailing		<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>2015</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	02		24		2015
M M	/	D D	/	Y Y Y Y								
02		24		2015								
Mailing Address 12006 Old Baltimore Pike		Amount of Each Disbursement this Period										
City	State											
Beltsville	MD	<table border="1"> <tr> <td colspan="5">30062.38</td> </tr> </table>	30062.38									
30062.38												
Zip Code	20705-1412	Transaction ID : VN7AV9TVS97										
Purpose of Disbursement	Category/Type											
Direct Mailing												
Candidate Name												
Office Sought:	Disbursement For: 2016											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
C. CHS Mailing		<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>2015</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	03		19		2015
M M	/	D D	/	Y Y Y Y								
03		19		2015								
Mailing Address 12006 Old Baltimore Pike		Amount of Each Disbursement this Period										
City	State											
Beltsville	MD	<table border="1"> <tr> <td colspan="5">6023.49</td> </tr> </table>	6023.49									
6023.49												
Zip Code	20705-1412	Transaction ID : VN7AV9TVS71										
Purpose of Disbursement	Category/Type											
Direct Mailing												
Candidate Name												
Office Sought:	Disbursement For: 2016											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

SUBTOTAL of Disbursements This Page (optional).....	<table border="1"> <tr> <td colspan="5">41109.69</td> </tr> </table>	41109.69				
41109.69						
TOTAL This Period (last page this line number only).....	<table border="1"> <tr> <td colspan="5"></td> </tr> </table>					

**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 111 OF 144			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial)		Date of Disbursement										
A. CHS Mailing		<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>26</td> <td></td> <td>2015</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	03		26		2015
M M	/	D D	/	Y Y Y Y								
03		26		2015								
Mailing Address 12006 Old Baltimore Pike		Amount of Each Disbursement this Period										
City	State											
Beltsville	MD	5019.25										
Zip Code	20705-1412	Transaction ID : VN7AV9TTTH4										
Purpose of Disbursement	Category/Type											
Direct Mailing												
Candidate Name												
Office Sought:	Disbursement For: 2016											
<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:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
B. Comcast		<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>28</td> <td></td> <td>2015</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	01		28		2015
M M	/	D D	/	Y Y Y Y								
01		28		2015								
Mailing Address PO Box 34227		Amount of Each Disbursement this Period										
City	State											
Seattle	WA	147.88										
Zip Code	98124-1227	Transaction ID : VN7AV9TTG27										
Purpose of Disbursement	Category/Type											
Internet Service												
Candidate Name												
Office Sought:	Disbursement For: 2016											
<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:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
C. Comcast		<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>02</td> <td></td> <td>2015</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	03		02		2015
M M	/	D D	/	Y Y Y Y								
03		02		2015								
Mailing Address PO Box 34227		Amount of Each Disbursement this Period										
City	State											
Seattle	WA	123.90										
Zip Code	98124-1227	Transaction ID : VN7AV9TVSA5										
Purpose of Disbursement	Category/Type											
Internet Service												
Candidate Name												
Office Sought:	Disbursement For: 2016											
<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:												

SUBTOTAL of Disbursements This Page (optional).....	5291.03
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 112 OF 144	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) A. Comcast		Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2015
Mailing Address PO Box 34227		Amount of Each Disbursement this Period 123.90
City Seattle	State WA	
Zip Code 98124-1227	Purpose of Disbursement Internet Service	Transaction ID : VN7AV9TVSB3
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Compliance Resource, Inc.		Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2015
Mailing Address 620 Wesley Commons Dr Ste 28		Amount of Each Disbursement this Period 1000.00
City Golden Valley	State MN	
Zip Code 55427-4079	Purpose of Disbursement Compliance Services	Transaction ID : VN7AV9TQD09
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Compliance Resource, Inc.		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2015
Mailing Address 620 Wesley Commons Dr Ste 28		Amount of Each Disbursement this Period 1000.00
City Golden Valley	State MN	
Zip Code 55427-4079	Purpose of Disbursement Compliance Consulting	Transaction ID : VN7AV9TVSE7
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2123.90
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 113 OF 144			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) A. Compliance Resource, Inc.		Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2015
Mailing Address 620 Wesley Commons Dr Ste 28		Amount of Each Disbursement this Period 1000.00
City Golden Valley	State MN Zip Code 55427-4079	
Purpose of Disbursement Compliance Consulting	Candidate Name	Transaction ID : VN7AV9TVSC1
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Delta Air		Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2015
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 711.10
City Atlanta	State GA Zip Code 30320-6001	
Purpose of Disbursement Travel	Candidate Name	Transaction ID : VN7AV9TVSH0
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Delta Air		Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2015
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 870.20
City Atlanta	State GA Zip Code 30320-6001	
Purpose of Disbursement Travel	Candidate Name	Transaction ID : VN7AV9TVRP9
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	2581.30
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 144			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) A. Delta Air		Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2015
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 870.20
City Atlanta	State GA	
Zip Code 30320-6001	Purpose of Disbursement Travel	Transaction ID : VN7AV9TVSQ8
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2015
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 713.10
City Atlanta	State GA	
Zip Code 30320-6001	Purpose of Disbursement Travel	Transaction ID : VN7AV9TVSJ8
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Delta Air		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2015
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 713.10
City Atlanta	State GA	
Zip Code 30320-6001	Purpose of Disbursement Travel	Transaction ID : VN7AV9TVSK6
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2296.40
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 OF 144			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) A. Delta Air		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2015
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 726.20
City Atlanta	State GA	
Zip Code 30320-6001	Purpose of Disbursement Travel	Transaction ID : VN7AV9TVSN2
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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		Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2015
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 696.20
City Atlanta	State GA	
Zip Code 30320-6001	Purpose of Disbursement Travel	Transaction ID : VN7AV9TVSG2
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. First National Bank of the Lakes		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2015
Mailing Address 3100 Hennepin Ave		Amount of Each Disbursement this Period 22.16
City Minneapolis	State MN	
Zip Code 55408-2619	Purpose of Disbursement Bank Fees	Transaction ID : VN7AV9TTG76
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1444.56
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 116 OF 144	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) A. First National Bank of the Lakes		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2015
Mailing Address 3100 Hennepin Ave		Amount of Each Disbursement this Period 65.80
City Minneapolis	State MN	
Zip Code 55408-2619	Purpose of Disbursement Bank Fees	Transaction ID : VN7AV9TVSY3
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. First National Bank of the Lakes		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2015
Mailing Address 3100 Hennepin Ave		Amount of Each Disbursement this Period 20.00
City Minneapolis	State MN	
Zip Code 55408-2619	Purpose of Disbursement Bank Fees	Transaction ID : VN7AV9TVSM4
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. First National Bank of the Lakes		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2015
Mailing Address 3100 Hennepin Ave		Amount of Each Disbursement this Period 40.00
City Minneapolis	State MN	
Zip Code 55408-2619	Purpose of Disbursement Bank Fees	Transaction ID : VN7AV9TVT17
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	125.80
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 117 OF 144	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) A. First National Bank of the Lakes		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2015
Mailing Address 3100 Hennepin Ave		Amount of Each Disbursement this Period 20.00
City Minneapolis	State MN	
Zip Code 55408-2619	Purpose of Disbursement Bank Fees	Transaction ID : VN7AV9TVT09
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. First National Bank of the Lakes		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2015
Mailing Address 3100 Hennepin Ave		Amount of Each Disbursement this Period 126.08
City Minneapolis	State MN	
Zip Code 55408-2619	Purpose of Disbursement Bank Fees	Transaction ID : VN7AV9TVSZ1
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address PO Box 1289		Amount of Each Disbursement this Period 347.93
City Minneapolis	State MN	
Zip Code 55440-1289	Purpose of Disbursement Health Insurance	Transaction ID : VN7AV9TPKS1
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	494.01
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 118 OF 144	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) A. Health Partners		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2015
Mailing Address PO Box 1289		Amount of Each Disbursement this Period 1515.85
City Minneapolis	State MN	
Zip Code 55440-1289	Purpose of Disbursement Health Insurance	Transaction ID : VN7AV9TRWF7
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Health Partners		Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2015
Mailing Address PO Box 1289		Amount of Each Disbursement this Period 819.99
City Minneapolis	State MN	
Zip Code 55440-1289	Purpose of Disbursement Health Insurance	Transaction ID : VN7AV9TTK31
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Sarah S Helgen		Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2015
Mailing Address 2700 Pillsbury Ave S Apt 3		Amount of Each Disbursement this Period 60.00
City Minneapolis	State MN	
Zip Code 55408-1557	Purpose of Disbursement Reimbursement - See Memo	Transaction ID : VN7AV9TTGT5
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2395.84
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 119 OF 144	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Date of Disbursement MM / DD / YYYY 01 / 09 / 2015
Mailing Address PO Box 25505		Amount of Each Disbursement this Period 51.11
City Lehigh Valley	State PA	
Zip Code 18002-5505	Purpose of Disbursement Telephone	Transaction ID : VN7AV9TTGS7
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. Sarah S Helgen		Date of Disbursement MM / DD / YYYY 01 / 29 / 2015
Mailing Address 2700 Pillsbury Ave S Apt 3		Amount of Each Disbursement this Period 51.11
City Minneapolis	State MN	
Zip Code 55408-1557	Purpose of Disbursement Reimbursement - See Memo	Transaction ID : VN7AV9TTGP3
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Verizon Wireless		Date of Disbursement MM / DD / YYYY 01 / 29 / 2015
Mailing Address PO Box 25505		Amount of Each Disbursement this Period 51.11
City Lehigh Valley	State PA	
Zip Code 18002-5505	Purpose of Disbursement Telephone	Transaction ID : VN7AV9TTGQ1
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	51.11
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 120 OF 144	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) A. Sarah S Helgen		Date of Disbursement MM / DD / YYYY 02 / 26 / 2015
Mailing Address 2700 Pillsbury Ave S Apt 3		Amount of Each Disbursement this Period 142.73 Transaction ID : VN7AV9TVWN8
City Minneapolis	State MN Zip Code 55408-1557	
Purpose of Disbursement Reimbursement/Mileage - See Memos		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. The Lowry Minneapolis		Date of Disbursement MM / DD / YYYY 02 / 26 / 2015
Mailing Address 2112 Hennepin Ave		Amount of Each Disbursement this Period 54.43 Transaction ID : VN7AV9TVWQ4
City Minneapolis	State MN Zip Code 55405-2743	
Purpose of Disbursement Meals & Meetings		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

[MEMO ITEM]
*

Full Name (Last, First, Middle Initial) c. Hudson Bay Co. of Illinois		Date of Disbursement MM / DD / YYYY 01 / 22 / 2015
Mailing Address 11032 Vera Cruz Ave N		Amount of Each Disbursement this Period 1515.41 Transaction ID : VN7AV9TQD82
City Champlin	State MN Zip Code 55316-3549	
Purpose of Disbursement Fundraising Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1658.14
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 121 OF 144	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) A. Hudson Bay Co. of Illinois		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2015
Mailing Address 11032 Vera Cruz Ave N		Amount of Each Disbursement this Period 5636.19 Transaction ID : VN7AV9TTXJ9
City Champlin	State MN	
Zip Code 55316-3549	Purpose of Disbursement Fundraising Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Impact Printing		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2015
Mailing Address 1067 Rice St		Amount of Each Disbursement this Period 752.30 Transaction ID : VN7AV9TTXN2
City Saint Paul	State MN	
Zip Code 55117-4920	Purpose of Disbursement Printing	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Infogroup		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2015
Mailing Address PO Box 3243		Amount of Each Disbursement this Period 750.00 Transaction ID : VN7AV9TTXG3
City Omaha	State NE	
Zip Code 68103-0243	Purpose of Disbursement Direct Mail	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	7138.49
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 122 OF 144			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) A. ipHouse		Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2015
Mailing Address 331 2nd Ave S Ste 540		Amount of Each Disbursement this Period 85.00
City Minneapolis	State MN Zip Code 55401-2243	
Purpose of Disbursement Web Site	Category/Type	Transaction ID : VN7AV9TTGB8
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ipHouse		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2015
Mailing Address 331 2nd Ave S Ste 540		Amount of Each Disbursement this Period 85.00
City Minneapolis	State MN Zip Code 55401-2243	
Purpose of Disbursement Web Site	Category/Type	Transaction ID : VN7AV9TVSP0
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ipHouse		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2015
Mailing Address 331 2nd Ave S Ste 540		Amount of Each Disbursement this Period 85.00
City Minneapolis	State MN Zip Code 55401-2243	
Purpose of Disbursement Web Site	Category/Type	Transaction ID : VN7AV9TVT66
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	255.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 123 OF 144	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) A. Ivance Company Inc		Date of Disbursement MM / DD / YYYY 02 / 05 / 2015
Mailing Address 55 5th St E Ste 1050		Amount of Each Disbursement this Period 1300.00 Transaction ID : VN7AV9TS4R5
City Saint Paul	State MN	
Zip Code 55101-6006	Purpose of Disbursement Insurance	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. David A Leonard		Date of Disbursement MM / DD / YYYY 03 / 02 / 2015
Mailing Address 7425 Oak Park Village Dr Apt 3		Amount of Each Disbursement this Period 519.13 Transaction ID : VN7AV9TVWJ5
City Saint Louis Park	State MN	
Zip Code 55426-4142	Purpose of Disbursement Reimbursement/Mileage - See Memos	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. St. Giles Hotel		Date of Disbursement MM / DD / YYYY 03 / 02 / 2015
Mailing Address 120 E 39th St		Amount of Each Disbursement this Period 396.00 Transaction ID : VN7AV9TVWK2
City New York	State NY	
Zip Code 10016-0906	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1819.13
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 124 OF 144	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2015
Mailing Address PO Box 25505		Amount of Each Disbursement this Period 60.00
City Lehigh Valley	State PA	
Zip Code 18002-5505	Purpose of Disbursement Telephone	Transaction ID : VN7AV9TVWM0
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. Linemark Printing		Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2015
Mailing Address 501 Prince Georges Blvd		Amount of Each Disbursement this Period 3347.48
City Upper Marlboro	State MD	
Zip Code 20774-7415	Purpose of Disbursement Printing	Transaction ID : VN7AV9TSCE4
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Linemark Printing		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2015
Mailing Address 501 Prince Georges Blvd		Amount of Each Disbursement this Period 12972.28
City Upper Marlboro	State MD	
Zip Code 20774-7415	Purpose of Disbursement Printing	Transaction ID : VN7AV9TSVP8
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	16319.76
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 125 OF 144	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) A. Marriott		Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2015
Mailing Address 102-05 Dittmars Blvd		Amount of Each Disbursement this Period 208.91 Transaction ID : VN7AV9TVTC4
City East Elmhurst	State NY	
Zip Code 11369	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Marriott		Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2015
Mailing Address 102-05 Dittmars Blvd		Amount of Each Disbursement this Period 208.91 Transaction ID : VN7AV9TVTF7
City East Elmhurst	State NY	
Zip Code 11369	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Marriott		Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2015
Mailing Address 102-05 Dittmars Blvd		Amount of Each Disbursement this Period 24.00 Transaction ID : VN7AV9TVTA8
City East Elmhurst	State NY	
Zip Code 11369	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	441.82
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 OF 144			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial)

A. Merchant Bankcard

Mailing Address 1700 N Dixie Hwy
Ste 125

City Boca Raton State FL Zip Code 33432-1808

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
01 / 05 / 2015

Amount of Each Disbursement this Period
32.93

Transaction ID : VN7AV9TTGJ1

Category/Type

Full Name (Last, First, Middle Initial)

B. Merchant Bankcard

Mailing Address 1700 N Dixie Hwy
Ste 125

City Boca Raton State FL Zip Code 33432-1808

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
01 / 06 / 2015

Amount of Each Disbursement this Period
4.97

Transaction ID : VN7AV9TTGF8

Category/Type

Full Name (Last, First, Middle Initial)

C. Merchant Bankcard

Mailing Address 1700 N Dixie Hwy
Ste 125

City Boca Raton State FL Zip Code 33432-1808

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
01 / 06 / 2015

Amount of Each Disbursement this Period
19.95

Transaction ID : VN7AV9TTGG6

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 57.85

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 127 OF 144	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial)

A. Merchant Bankcard

Mailing Address 1700 N Dixie Hwy
Ste 125

City Boca Raton State FL Zip Code 33432-1808

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
01 / 06 / 2015

Amount of Each Disbursement this Period
38.80

Transaction ID : VN7AV9TTGK9

Category/Type

Full Name (Last, First, Middle Initial)

B. Merchant Bankcard

Mailing Address 1700 N Dixie Hwy
Ste 125

City Boca Raton State FL Zip Code 33432-1808

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
02 / 04 / 2015

Amount of Each Disbursement this Period
14.66

Transaction ID : VN7AV9TVTG5

Category/Type

Full Name (Last, First, Middle Initial)

C. Merchant Bankcard

Mailing Address 1700 N Dixie Hwy
Ste 125

City Boca Raton State FL Zip Code 33432-1808

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
02 / 04 / 2015

Amount of Each Disbursement this Period
8.98

Transaction ID : VN7AV9TVTH3

Category/Type

SUBTOTAL of Disbursements This Page (optional) 62.44

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 128 OF 144	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial)

A. Merchant Bankcard

Mailing Address 1700 N Dixie Hwy
Ste 125

City Boca Raton State FL Zip Code 33432-1808

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
02 / 04 / 2015

Amount of Each Disbursement this Period
38.05

Transaction ID : VN7AV9TVTK9

Category/Type

Full Name (Last, First, Middle Initial)

B. Merchant Bankcard

Mailing Address 1700 N Dixie Hwy
Ste 125

City Boca Raton State FL Zip Code 33432-1808

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
02 / 04 / 2015

Amount of Each Disbursement this Period
20.20

Transaction ID : VN7AV9TVTM7

Category/Type

Full Name (Last, First, Middle Initial)

C. Merchant Bankcard

Mailing Address 1700 N Dixie Hwy
Ste 125

City Boca Raton State FL Zip Code 33432-1808

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
03 / 04 / 2015

Amount of Each Disbursement this Period
9.67

Transaction ID : VN7AV9TVTJ1

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 67.92

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 129 OF 144			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial)

A. Merchant Bankcard

Mailing Address 1700 N Dixie Hwy
Ste 125

City Boca Raton State FL Zip Code 33432-1808

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
03 / 04 / 2015

Amount of Each Disbursement this Period
51.05

Transaction ID : VN7AV9TVTN5

Category/Type

Full Name (Last, First, Middle Initial)

B. Merchant Bankcard

Mailing Address 1700 N Dixie Hwy
Ste 125

City Boca Raton State FL Zip Code 33432-1808

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
03 / 04 / 2015

Amount of Each Disbursement this Period
103.11

Transaction ID : VN7AV9TVTP3

Category/Type

Full Name (Last, First, Middle Initial)

C. Names in the News

Mailing Address 180 Grand Ave
Ste 1545

City Oakland State CA Zip Code 94612-3799

Purpose of Disbursement
Direct Mailing

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
01 / 16 / 2015

Amount of Each Disbursement this Period
1000.00

Transaction ID : VN7AV9TPTV1

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 1154.16

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)
 17 18 19a 19b
 20a 20b 20c 21

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

Full Name (Last, First, Middle Initial)

A. Names in the News

Mailing Address 180 Grand Ave
Ste 1545

City Oakland State CA Zip Code 94612-3799

Purpose of Disbursement Direct Mailing

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
03 / 03 / 2015

Amount of Each Disbursement this Period
5283.81

Transaction ID : VN7AV9TSVNO

Category/
Type

Full Name (Last, First, Middle Initial)

B. National Democratic Club

Mailing Address 30 Ivy St SE

City Washington State DC Zip Code 20003-4071

Purpose of Disbursement Meals

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
01 / 22 / 2015

Amount of Each Disbursement this Period
50.00

Transaction ID : VN7AV9TQD33

Category/
Type

Full Name (Last, First, Middle Initial)

C. National Democratic Club

Mailing Address 30 Ivy St SE

City Washington State DC Zip Code 20003-4071

Purpose of Disbursement Event Expense - Food & Beverage

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
03 / 23 / 2015

Amount of Each Disbursement this Period
689.80

Transaction ID : VN7AV9TTK49

Category/
Type

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

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

6023.61

**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 131 OF 144	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) A. Newport Partners LLC		Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2015
Mailing Address 9 Cushing Ste 200		Amount of Each Disbursement this Period 1050.00 Transaction ID : VN7AV9TQD58
City Irvine State CA Zip Code 92618-4227	Purpose of Disbursement Rent	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Newport Partners LLC		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2015
Mailing Address 9 Cushing Ste 200		Amount of Each Disbursement this Period 1050.00 Transaction ID : VN7AV9TSRK8
City Irvine State CA Zip Code 92618-4227	Purpose of Disbursement Rent	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Newport Partners LLC		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2015
Mailing Address 9 Cushing Ste 200		Amount of Each Disbursement this Period 1050.00 Transaction ID : VN7AV9TTXH1
City Irvine State CA Zip Code 92618-4227	Purpose of Disbursement Rent	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 132 OF 144	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) A. NGP VAN, Inc.		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2015
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 5100.00 Transaction ID : VN7AV9TVV19
City Washington	State DC Zip Code 20005-5006	
Purpose of Disbursement Database Services	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Postmaster		Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2015
Mailing Address 3033 27th Ave S		Amount of Each Disbursement this Period 62.00 Transaction ID : VN7AV9TSCD6
City Minneapolis	State MN Zip Code 55406-5100	
Purpose of Disbursement PO Box Rental	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. SFM Risk Solutions		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2015
Mailing Address 3500 American Blvd W Ste 700		Amount of Each Disbursement this Period 811.00 Transaction ID : VN7AV9TTXF5
City Minneapolis	State MN Zip Code 55431-4439	
Purpose of Disbursement Insurance	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5973.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 133 OF 144			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) A. Sheraton Hotel Philadelphia		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2015
Mailing Address 1 Dock St		Amount of Each Disbursement this Period 1150.00 Transaction ID : VN7AV9TTGV2
City Philadelphia	State PA Zip Code 19106-3939	
Purpose of Disbursement Travel	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Sheraton Hotel Philadelphia		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2015
Mailing Address 1 Dock St		Amount of Each Disbursement this Period 1150.00 Transaction ID : VN7AV9TTGW0
City Philadelphia	State PA Zip Code 19106-3939	
Purpose of Disbursement Travel	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Simon & Schuster		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2015
Mailing Address 100 Front St		Amount of Each Disbursement this Period 688.71 Transaction ID : VN7AV9TTGX8
City Delran	State NJ Zip Code 08075-1181	
Purpose of Disbursement Event Expense - Books	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2988.71
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 134 OF 144			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) A. Sinfully Wright Catering		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2015
Mailing Address 1901 Trenton Pl SE		Amount of Each Disbursement this Period 1730.00
City Washington State DC Zip Code 20020-7643	Purpose of Disbursement Event Expense - Food & Beverage	
Candidate Name	Category/Type	Transaction ID : VN7AV9TTQ37
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. St. Giles Hotel		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2015
Mailing Address 120 E 39th St		Amount of Each Disbursement this Period 391.77
City New York State NY Zip Code 10016-0906	Purpose of Disbursement Travel	
Candidate Name	Category/Type	Transaction ID : VN7AV9TVVF0
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Star Tribune		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2015
Mailing Address 425 Portland Ave		Amount of Each Disbursement this Period 892.50
City Minneapolis State MN Zip Code 55488-0002	Purpose of Disbursement Advertising	
Candidate Name	Category/Type	Transaction ID : VN7AV9TPJJ5
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3014.27
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 135 OF 144	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) A. Starfish Designs		Date of Disbursement MM / DD / YYYY 02 / 13 / 2015
Mailing Address 106 Kidwell Ave		Amount of Each Disbursement this Period 360.00 Transaction ID : VN7AV9TSCC8
City Centreville	State MD	
Zip Code 21617-1110	Purpose of Disbursement Consulting - Direct Mail	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Sun Country Airlines		Date of Disbursement MM / DD / YYYY 03 / 12 / 2015
Mailing Address 1300 Mendota Heights Rd		Amount of Each Disbursement this Period 460.10 Transaction ID : VN7AV9TVVM0
City Mendota Heights	State MN	
Zip Code 55120-1295	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. The Faith & Politics Institute		Date of Disbursement MM / DD / YYYY 03 / 03 / 2015
Mailing Address 110 Maryland Ave NE Ste 504		Amount of Each Disbursement this Period 1128.00 Transaction ID : VN7AV9TVVS9
City Washington	State DC	
Zip Code 20002-5620	Purpose of Disbursement Registration Fee/Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1948.10
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 136 OF 144	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) A. The Lowry Minneapolis		Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2015
Mailing Address 2112 Hennepin Ave		Amount of Each Disbursement this Period 38.68
City Minneapolis	State MN	
Zip Code 55405-2743	Purpose of Disbursement Meals & Meetings	Transaction ID : VN7AV9TVVW3
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. The Lowry Minneapolis		Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2015
Mailing Address 2112 Hennepin Ave		Amount of Each Disbursement this Period 41.99
City Minneapolis	State MN	
Zip Code 55405-2743	Purpose of Disbursement Meals & Meetings	Transaction ID : VN7AV9TVVX1
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. The Mynett Group		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2015
Mailing Address 4616 15th St NW		Amount of Each Disbursement this Period 9000.00
City Washington	State DC	
Zip Code 20011-4319	Purpose of Disbursement Consulting - Fundraising	Transaction ID : VN7AV9TPJM0
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	9080.67
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 137 OF 144	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) A. The Mynett Group		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2015
Mailing Address 4616 15th St NW		Amount of Each Disbursement this Period 9361.65 Transaction ID : VN7AV9TRX01
City Washington State DC Zip Code 20011-4319	Purpose of Disbursement Consulting - Fundraising	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. The Mynett Group		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2015
Mailing Address 4616 15th St NW		Amount of Each Disbursement this Period 9783.31 Transaction ID : VN7AV9TSVK4
City Washington State DC Zip Code 20011-4319	Purpose of Disbursement Consulting - Fundraising	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. US Airways		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2015
Mailing Address 4000 E Sky Harbor Blvd		Amount of Each Disbursement this Period 25.00 Transaction ID : VN7AV9TVVZ6
City Phoenix State AZ Zip Code 85034-0664	Purpose of Disbursement Travel	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	19169.96
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 138 OF 144	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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. US Airways

Full Name (Last, First, Middle Initial)

Mailing Address 4000 E Sky Harbor Blvd

City Phoenix State AZ Zip Code 85034-0664

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 12 / 2015

Amount of Each Disbursement this Period: 1548.10

Transaction ID : VN7AV9TVW04

B. Verizon Wireless

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 25505

City Lehigh Valley State PA Zip Code 18002-5505

Purpose of Disbursement Telephone

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 01 / 26 / 2015

Amount of Each Disbursement this Period: 251.04

Transaction ID : VN7AV9TTH36

C. Verizon Wireless

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 25505

City Lehigh Valley State PA Zip Code 18002-5505

Purpose of Disbursement Telephone

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 25 / 2015

Amount of Each Disbursement this Period: 251.41

Transaction ID : VN7AV9TVW52

SUBTOTAL of Disbursements This Page (optional) 2050.55

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 139 OF 144	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2015
Mailing Address PO Box 25505		Amount of Each Disbursement this Period 251.41 Transaction ID : VN7AV9TVW44
City Lehigh Valley	State PA	
Zip Code 18002-5505	Purpose of Disbursement Telephone	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Vonage		Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2015
Mailing Address 23 Main St		Amount of Each Disbursement this Period 91.97 Transaction ID : VN7AV9TTH44
City Holmdel	State NJ	
Zip Code 07733-2136	Purpose of Disbursement Telephone	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Vonage		Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2015
Mailing Address 23 Main St		Amount of Each Disbursement this Period 91.64 Transaction ID : VN7AV9TVW60
City Holmdel	State NJ	
Zip Code 07733-2136	Purpose of Disbursement Telephone	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	435.02
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 140 OF 144	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial)
A. Vonage

Mailing Address 23 Main St

City Holmdel State NJ Zip Code 07733-2136

Purpose of Disbursement Telephone

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: M M / D D / Y Y Y Y
03 / 26 / 2015

Amount of Each Disbursement this Period: 91.64

Transaction ID : VN7AV9TVW78

Category/Type:

Full Name (Last, First, Middle Initial)
B. Voter Activation

Mailing 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 President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: M M / D D / Y Y Y Y
01 / 05 / 2015

Amount of Each Disbursement this Period: 150.00

Transaction ID : VN7AV9TTH51

Category/Type:

Full Name (Last, First, Middle Initial)
C. Voter Activation

Mailing 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 President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: M M / D D / Y Y Y Y
02 / 04 / 2015

Amount of Each Disbursement this Period: 150.00

Transaction ID : VN7AV9TVW86

Category/Type:

SUBTOTAL of Disbursements This Page (optional)..... 391.64

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 141 OF 144	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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. Voter Activation

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

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 03 / 03 / 2015

Amount of Each Disbursement this Period: 150.00

Transaction ID : VN7AV9TVW93

B. Justin Young

Full Name (Last, First, Middle Initial)
Mailing Address 1799 Randolph Ave

City Saint Paul State MN Zip Code 55105

Purpose of Disbursement Reimbursement - See Memos

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 01 / 29 / 2015

Amount of Each Disbursement this Period: 1263.46

Transaction ID : VN7AV9TTGC4

C. Delta Air

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 20706

City Atlanta State GA Zip Code 30320-6001

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 01 / 29 / 2015

Amount of Each Disbursement this Period: 728.20

Transaction ID : VN7AV9TTGD2

[MEMO ITEM]
*

SUBTOTAL of Disbursements This Page (optional) 1413.46

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 142 OF 144			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) A. Delta Air		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2015
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 503.20
City Atlanta	State GA	Zip Code 30320-6001
Purpose of Disbursement Travel	Category/Type	
Candidate Name	Transaction ID : VN7AV9TTGE0	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. Justin Young		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2015
Mailing Address 1799 Randolph Ave		Amount of Each Disbursement this Period 83.22
City Saint Paul	State MN	Zip Code 55105
Purpose of Disbursement Reimbursement - See Memo	Category/Type	
Candidate Name	Transaction ID : VN7AV9TSVM2	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) C. Postmaster		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2015
Mailing Address 3033 27th Ave S		Amount of Each Disbursement this Period 83.22
City Minneapolis	State MN	Zip Code 55406-5100
Purpose of Disbursement Postage	Category/Type	
Candidate Name	Transaction ID : VN7AV9TW0E2	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	83.22
TOTAL This Period (last page this line number only).....	200203.30

**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 143 OF 144	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) A. CONGRESSIONAL BLACK CAUCUS FOUNDATION		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2015
Mailing Address 1720 Massachusetts Ave NW		Amount of Each Disbursement this Period 400.00 Transaction ID : VN7AV9TTG35
City Washington State DC Zip Code 20036-1903	Purpose of Disbursement Donation	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Democratic Congressional Campaign Committee		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2015
Mailing Address 430 S Capitol St SE		Amount of Each Disbursement this Period 10000.00 Transaction ID : VN7AV9TRWJ1
City Washington State DC Zip Code 20003-4024	Purpose of Disbursement Unlimited Transfer	
Candidate Name Democratic Congressional Campaign Committee	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Just Permanent Interest PAC		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2015
Mailing Address 7733 Forsyth Blvd Ste 500		Amount of Each Disbursement this Period 500.00 Transaction ID : VN7AV9TSVQ6
City Saint Louis State MO Zip Code 63105-1817	Purpose of Disbursement Contribution	
Candidate Name Just Permanent Interest PAC	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	10900.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 144 OF 144			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) A. MINNESOTA DEMOCRATIC-FARMER-LABOR PARTY		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2015
Mailing Address 255 Plato Blvd E		Amount of Each Disbursement this Period 1889.00
City Saint Paul State MN Zip Code 55107-1623	Category/Type	
Purpose of Disbursement Unlimited Transfer to State Party		Transaction ID : VN7AV9TSRM6
Candidate Name MINNESOTA DEMOCRATIC-FARMER-LABOR PARTY		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

SUBTOTAL of Disbursements This Page (optional).....	1889.00
TOTAL This Period (last page this line number only).....	12789.00