

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
McCollum for Congress

ADDRESS (number and street) P.O. Box 14131
 Check if different than previously reported. (ACC) St. Paul MN 55114

2. **FEC IDENTIFICATION NUMBER** ▼ C C00354688 3. IS THIS REPORT NEW (N) **OR** AMENDED (A) CITY ▲ MN STATE ▲ MN ZIP CODE ▲ STATE ▼ DISTRICT MN 04

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 07 / 24 / 2014 through M M / D D / Y Y Y Y 09 / 30 / 2014

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

Type or Print Name of Treasurer Mary Pat Lee

Signature of Treasurer Mary Pat Lee *[Electronically Filed]* Date M M / D D / Y Y Y Y 10 / 14 / 2014

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

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 90

Write or Type Committee Name

McCollum for Congress

Report Covering the Period: From:

M M	/	D D	/	Y Y Y Y
07		24		2014

To:

M M	/	D D	/	Y Y Y Y
09		30		2014

	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))....	134664.84	756077.46
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	134664.84	756077.46
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	77130.30	513657.96
(b) Total Offsets to Operating Expenditures (from Line 14).....	133.00	885.91
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	76997.30	512772.05
8. Cash on Hand at Close of Reporting Period (from Line 27).....	262528.15	
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

McCollum 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).....	47027.84	269232.46
(ii) Unitemized	7387.00	62370.00
(iii) TOTAL of contributions from individuals	54414.84	331602.46
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	80250.00	424475.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	134664.84	756077.46
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.)	133.00	885.91
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	5.09
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	134797.84	756968.46

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	77130.30	513657.96
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	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	31374.20	61629.20
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	108504.50	575287.16

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	236234.81
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	134797.84
25. SUBTOTAL (add Line 23 and Line 24).....	371032.65
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	108504.50
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	262528.15

**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 90
	<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)
McCollum for Congress

A. Full Name (Last, First, Middle Initial)
John P. Abraham PhD

Mailing Address 4232 29th Ave

City State Zip Code
Minneapolis MN 55406

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

Name of Employer Occupation
University of St. Thomas Professor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : C9819334

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Susan Solterman Audette

Mailing Address 1463 Portland Ave

City State Zip Code
Saint Paul MN 55104-6815

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

Name of Employer Occupation
Self-Employed Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 23 / 2014

Transaction ID : C9861760

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Kathleen N. Baradaran

Mailing Address 8 W Bay Ln

City State Zip Code
North Oaks MN 55127-2601

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

Name of Employer Occupation
Self-Employed Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 28 / 2014

Transaction ID : C9873564

Amount of Each Receipt this Period
1000.00

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

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

1350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 90
	<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	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

A. Full Name (Last, First, Middle Initial)
Barona Band of Mission Indians

Mailing Address 1095 Barona Road

City Lakeside State CA Zip Code 92040

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : C9923537

Amount of Each Receipt this Period
 2000.00

3500.00

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

Mailing Address 4629 13th Ave S

City Minneapolis State MN Zip Code 55407

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

Name of Employer Occupation
Ameriprise Financial Marketing

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 12 / 2014

Transaction ID : C9743554

Amount of Each Receipt this Period
 250.00

250.00

C. Full Name (Last, First, Middle Initial)
David A. Bieging

Mailing Address 7613 Range Rd

City Alexandria State VA Zip Code 22306-2425

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

Name of Employer Occupation
Self-employed Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : C9923505

Amount of Each Receipt this Period
 1000.00

3000.00

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

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

3250.00

**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 90
	<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	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

A. Full Name (Last, First, Middle Initial)
Walter A. Blue

Mailing Address 1397 Blair Ave

City Saint Paul State MN Zip Code 55104-1920

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

Name of Employer Hamline University Occupation Professor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
235.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : C9923371

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
David A. Bradley

Mailing Address 1 Rosecroft Drive

City Fredericksburg State VA Zip Code 22407

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

Name of Employer National Community Action Foundation Occupation Executive Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : C9923520

Amount of Each Receipt this Period
500.00

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

Mailing Address P.O. Box 1548

City Ada State OK Zip Code 74820

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 08 / 2014

Transaction ID : C9920751

Amount of Each Receipt this Period
1000.00

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

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

1550.00

**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 90
	<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	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

A. Full Name (Last, First, Middle Initial)
Bruce Henry Coppock

Mailing Address 1898 Dodd Rd

City State Zip Code
Mendota Heights MN 55118

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

Name of Employer Occupation
St. Paul Chamber Orchestra President and Managing Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 29 / 2014

Transaction ID : C9914971

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
John Cowles III

Mailing Address 475 Grand HI

City State Zip Code
Saint Paul MN 55102-2612

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

Name of Employer Occupation
Unity Avenue Associates President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 28 / 2014

Transaction ID : C9873568

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Page Knudsen Cowles

Mailing Address 475 Grand HI

City State Zip Code
Saint Paul MN 55102-2612

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

Name of Employer Occupation
Unity Avenue Associates Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 28 / 2014

Transaction ID : C9873569

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 9 OF 90
	<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	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

A. Full Name (Last, First, Middle Initial)
John S. Dahler

Mailing Address 1602 Mississippi River Blvd S

City Saint Paul State MN Zip Code 55116-1825

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 07 / 2014

Transaction ID : C9712846

Amount of Each Receipt this Period
150.00

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

Mailing Address 340 Summit Ave

City Saint Paul State MN Zip Code 55102-2124

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

Name of Employer Wilderness Inquiry Occupation Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 17 / 2014

Transaction ID : C9843649

Amount of Each Receipt this Period
1000.00

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

Mailing Address 340 Summit Ave

City Saint Paul State MN Zip Code 55102-2124

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

Name of Employer Wilderness Inquiry Occupation Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 23 / 2014

Transaction ID : C9861620

Amount of Each Receipt this Period
1000.00

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

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

2150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 90
	<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	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

A. Full Name (Last, First, Middle Initial)
James Deal

Mailing Address P.O. Box 159

City Anoka State MN Zip Code 55303-0159

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

Name of Employer NAU Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 28 / 2014

Transaction ID : C9873570

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 110 Bank St SE Apt 202

City Minneapolis State MN Zip Code 55414-3902

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

Name of Employer Guthrie Theater Occupation Artistic Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 26 / 2014

Transaction ID : C9872135

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Dorothy A Drake

Mailing Address 250 Selby Ave #24

City Saint Paul State MN Zip Code 55102

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 25 / 2014

Transaction ID : C9773254

Amount of Each Receipt this Period
 50.00

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

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

1550.00

**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 90
	<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	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

A. Full Name (Last, First, Middle Initial)
Vernon Eidman

Mailing Address 90 Mid Oaks Ln

City Roseville State MN Zip Code 55113-5647

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : C9923414

Amount of Each Receipt this Period
150.00

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

Mailing Address 27930 Smithtown Rd

City Excelsior State MN Zip Code 55331-7911

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 29 / 2014

Transaction ID : C9696702

Amount of Each Receipt this Period
500.00

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

Mailing Address 1160 Hwy 9 NE

City Murdock State MN Zip Code 56271

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

Name of Employer Gillette Children's Specialty Healthca Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : C9923390

Amount of Each Receipt this Period
250.00

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

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

900.00

**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 90
	<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	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

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

Mailing Address 1021 Larpenteur Ave W

City Saint Paul State MN Zip Code 55113-6574

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **375.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 12 / 2014

Transaction ID : C9829304

Amount of Each Receipt this Period
125.00

B. Full Name (Last, First, Middle Initial)
James D. Foley

Mailing Address 1258 Birch Ct

City Mendota Heights State MN Zip Code 55118-1752

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : C9819527

Amount of Each Receipt this Period
125.00

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

Mailing Address 350 Saint Peter St Unit 404

City Saint Paul State MN Zip Code 55102-1502

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

Name of Employer PACE/Minnesota LLC Occupation Government Relations

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : C9819251

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 13 OF 90
	<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	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

A. Full Name (Last, First, Middle Initial)
Henry Dutton Foster

Mailing Address 1882 Goodrich Ave

City Saint Paul State MN Zip Code 55105-1542

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **280.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 12 / 2014

Transaction ID : C9829305

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Henry Dutton Foster

Mailing Address 1882 Goodrich Ave

City Saint Paul State MN Zip Code 55105-1542

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **280.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : C9914969

Amount of Each Receipt this Period
65.00

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

Mailing Address 312 Ferndale Rd W

City Wayzata State MN Zip Code 55391-1511

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

Name of Employer R & B Properties Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 28 / 2014

Transaction ID : C9873607

Amount of Each Receipt this Period
1000.00

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

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

1165.00

**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 90
	<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	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

A. Full Name (Last, First, Middle Initial)
Anne Flaxman Geisser

Mailing Address 1770 Summit Ave

City Saint Paul State MN Zip Code 55105-1834

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 29 / 2014

Transaction ID : C9696701

Amount of Each Receipt this Period
125.00

B. Full Name (Last, First, Middle Initial)
Robert E. Haselow

Mailing Address 6408 Interlachen Blvd

City Edina State MN Zip Code 55436-1002

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

Name of Employer Minneapolis Radiation Oncology Occupation President, physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1200.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 28 / 2014

Transaction ID : C9873575

Amount of Each Receipt this Period
1000.00

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

Mailing Address 126 Dellwood Ave

City Dellwood State MN Zip Code 55110

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : C9819335

Amount of Each Receipt this Period
250.00

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

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

1375.00

**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 90
	<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	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

A. Full Name (Last, First, Middle Initial)
Elayne R. Hengler

Mailing Address **PO Box 97**

City **Hanover** State **MN** Zip Code **55341-0097**

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
265.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : C9923424

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Cory J. Hoepfner

Mailing Address **4836 Harriet Ave**

City **Minneapolis** State **MN** Zip Code **55419-5436**

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

Name of Employer **RBC CAPITAL MARKETS** Occupation **Director**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 10 / 2014

Transaction ID : C9819575

Amount of Each Receipt this Period
250.00

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

Mailing Address **2512 Ryan Ave E**

City **North St Paul** State **MN** Zip Code **55109-4036**

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

Name of Employer **Hoover Consulting, LLC** Occupation **Healthcare IT consultant**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 11 / 2014

Transaction ID : C9715961

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 16 OF 90
	<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	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

A. Full Name (Last, First, Middle Initial)
Christopher Jackson

Mailing Address 549 Hawthorne Woods Dr

City State Zip Code
Eagan MN 55123-3060

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

Name of Employer Occupation
St. Paul Radiology, PA Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

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

Transaction ID : C9812207

Amount of Each Receipt this Period
1000.00

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

Mailing Address 152 Avon St S

City State Zip Code
Saint Paul MN 55105-3338

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

Name of Employer Occupation
Gillette Children's Specialty Healthca President & CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1737.79

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 22 / 2014

Transaction ID : C9920728

Amount of Each Receipt this Period
237.79

* In-Kind: Food and beverage

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

Mailing Address 152 Avon St S

City State Zip Code
Saint Paul MN 55105-3338

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

Name of Employer Occupation
Gillette Children's Specialty Healthca President & CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1737.79

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 28 / 2014

Transaction ID : C9873550

Amount of Each Receipt this Period
1500.00

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

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

2737.79

**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 90
	<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	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

A. Full Name (Last, First, Middle Initial)
Hubert Joly

Mailing Address 2368 W Lake Of The Isles Pkwy

City Minneapolis State MN Zip Code 55405

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

Name of Employer Best Buy Co. Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 28 / 2014

Transaction ID : C9873523

Amount of Each Receipt this Period
 1500.00

B. Full Name (Last, First, Middle Initial)
John Steven Judge

Mailing Address 4109 Sleepy Hollow Rd

City Annandale State VA Zip Code 22003-2044

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

Name of Employer PEGCC Occupation President and CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : C9884526

Amount of Each Receipt this Period
 250.00

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

Mailing Address 2605 Poplar Ave

City North St Paul State MN Zip Code 55109-1638

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

Name of Employer Regions Hospital Occupation Pathologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 28 / 2014

Transaction ID : C9873601

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 18 OF 90
	<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	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

A. Full Name (Last, First, Middle Initial)
Wael Khouli

Mailing Address 10556 Hawthorn Trl

City Woodbury State MN Zip Code 55129

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

Name of Employer HealthEast Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
375.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 28 / 2014

Transaction ID : C9873603

Amount of Each Receipt this Period
250.00

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

Mailing Address 1605 Northrop Ln

City Minneapolis State MN Zip Code 55403-1000

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

Name of Employer UnitedHealth Group Occupation Physician Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 11 / 2014

Transaction ID : C9715873

Amount of Each Receipt this Period
2600.00

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

Mailing Address 5417 Malibu Dr

City Edina State MN Zip Code 55436

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 28 / 2014

Transaction ID : C9873572

Amount of Each Receipt this Period
250.00

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

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

3100.00

**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 19 OF 90
	<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	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

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

Mailing Address 1382 Iowa Ave W

City Falcon Heights State MN Zip Code 55108-2121

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

Name of Employer Mounds View Public Schools Occupation Private Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
235.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 28 / 2014

Transaction ID : C9873562

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Katherine Austin Mahle

Mailing Address 1410 Spring Valley Rd

City Golden Valley State MN Zip Code 55422-4748

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
275.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 28 / 2014

Transaction ID : C9873604

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mapetsi Policy Group, LLC

Mailing Address 4600 Connecticut Ave NW #107

City Washington State DC Zip Code 20008

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 22 / 2014

Transaction ID : C9771406

Amount of Each Receipt this Period
2000.00

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

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

2275.00

**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 90
	<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	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

A. Full Name (Last, First, Middle Initial)
Kristine Maritz

Mailing Address 5360 1st Ave S

City Minneapolis State MN Zip Code 55419-2602

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

Name of Employer MCCD Occupation Business Advisor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

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

Transaction ID : C9812214

Amount of Each Receipt this Period
1000.00

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

Mailing Address 2149 Goodrich Ave

City Saint Paul State MN Zip Code 55105-1021

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
605.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 10 / 2014

Transaction ID : C9819521

Amount of Each Receipt this Period
50.00

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

Mailing Address 2149 Goodrich Ave

City Saint Paul State MN Zip Code 55105-1021

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
605.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 10 / 2014

Transaction ID : C9819522

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)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 21 OF 90

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NAME OF COMMITTEE (In Full)
McCollum for Congress

A. Full Name (Last, First, Middle Initial)
Edward Martell

Mailing Address 2149 Goodrich Ave

City Saint Paul State MN Zip Code 55105-1021

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **605.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 10 / 2014

Transaction ID : C9819830

Amount of Each Receipt this Period
75.00

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

Mailing Address 2149 Goodrich Ave

City Saint Paul State MN Zip Code 55105-1021

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **605.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 17 / 2014

Transaction ID : C9843775

Amount of Each Receipt this Period
25.00

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

Mailing Address 2149 Goodrich Ave

City Saint Paul State MN Zip Code 55105-1021

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **605.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 28 / 2014

Transaction ID : C9873589

Amount of Each Receipt this Period
25.00

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

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

125.00

**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 90
	<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	

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NAME OF COMMITTEE (In Full)
McColum for Congress

A. Full Name (Last, First, Middle Initial)
Mescalero Apache Tribe

Mailing Address 101 Central Mescalero Ave

City Mescalero State NM Zip Code 88340

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 22 / 2014

Transaction ID : C9771408

Amount of Each Receipt this Period
 2000.00

B. Full Name (Last, First, Middle Initial)
Miccosukee Tribe of Indians of Florida

Mailing Address P.O. Box 440021
Tamiami Station

City Miami State FL Zip Code 33144

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 03 / 2014

Transaction ID : C9920736

Amount of Each Receipt this Period
 2000.00

C. Full Name (Last, First, Middle Initial)
Patricia A. Mitchell

Mailing Address 762 Osceola Ave

City Saint Paul State MN Zip Code 55105-3326

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

Name of Employer Occupation
Ordway Center President and CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 28 / 2014

Transaction ID : C9873606

Amount of Each Receipt this Period
 500.00

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: (check only one)	PAGE 23 OF 90
	<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	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

A. Full Name (Last, First, Middle Initial)
Mark W. Murray

Mailing Address 6511 Princeton Dr

City State Zip Code
Alexandria VA 22307-1350

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

Name of Employer Occupation
Cornerstone Government Affairs Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : C9923506

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Howard R. Orenstein

Mailing Address 1724 Hampshire Ave

City State Zip Code
Saint Paul MN 55116-2456

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

Name of Employer Occupation
Hennepin County Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : C9819565

Amount of Each Receipt this Period
250.00

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

Mailing Address 766 Maryland Ave W

City State Zip Code
Saint Paul MN 55117-4026

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1150.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 21 / 2014

Transaction ID : C9767781

Amount of Each Receipt this Period
50.00

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

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

550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 90
	<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	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

A. Full Name (Last, First, Middle Initial)
Thomas Osthoff

Mailing Address 766 Maryland Ave W

City Saint Paul State MN Zip Code 55117-4026

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1150.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 21 / 2014

Transaction ID : C9852322

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Anita M. Pampusch

Mailing Address 161 Stonebridge Rd

City Saint Paul State MN Zip Code 55118-4481

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

Name of Employer Bush Foundation Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 28 / 2014

Transaction ID : C9873565

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Steven W. Pospisil

Mailing Address 3511 Vincent Ave N

City Minneapolis State MN Zip Code 55412-2219

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

Name of Employer First Data Occupation Account Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 13 / 2014

Transaction ID : C9744090

Amount of Each Receipt this Period
500.00

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 25 OF 90
	<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	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

A. Full Name (Last, First, Middle Initial)
Leila Poullada

Mailing Address 854 Linwood Ave
Apt. 2

City Saint Paul State MN Zip Code 55105

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
390.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : C9819823

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Redding Rancheria Tribe

Mailing Address 2000 Redding Rancheria Road

City Redding State CA Zip Code 96001

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : C9923459

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Lawrence M. Redmond

Mailing Address 1920 S 1st St
Apt 2203

City Minneapolis State MN Zip Code 55454-1277

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

Name of Employer Redmond Associates Inc Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : C9814654

Amount of Each Receipt this Period
1000.00

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

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

2050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 90
	<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	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

A. Full Name (Last, First, Middle Initial)
Misba Ur Rehman

Mailing Address 13738 Crossmoor Ave

City Rosemount State MN Zip Code 55068-6172

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

Name of Employer United Health Group Occupation Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : C9819829

Amount of Each Receipt this Period
250.00

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

Mailing Address 4724 Chantrey Pl

City Minnetonka State MN Zip Code 55345-3547

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

Name of Employer Marsden Holding Occupation CFO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1350.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 11 / 2014

Transaction ID : C9715971

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Lawrence J. Romans

Mailing Address 5422 Seminary Rd

City Alexandria State VA Zip Code 22311-1299

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

Name of Employer Lawrence J. Romans & Associates Occupation Government Relations

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : C9923511

Amount of Each Receipt this Period
500.00

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 27 OF 90
	<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	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

A. Full Name (Last, First, Middle Initial)
Nina H. Rothchild

Mailing Address 14 Hickory St

City Mahtomedi State MN Zip Code 55115-1759

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : C9914972

Amount of Each Receipt this Period
500.00

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

Mailing Address 168 6th St E, Unit 4303

City Saint Paul State MN Zip Code 55101-2908

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
375.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 28 / 2014

Transaction ID : C9873590

Amount of Each Receipt this Period
250.00

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

Mailing Address 1886 Gluek Ln

City Roseville State MN Zip Code 55113-3851

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

Name of Employer Ever-Green Energy Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
325.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 28 / 2014

Transaction ID : C9873567

Amount of Each Receipt this Period
100.00

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

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

850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 90
	<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	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

Full Name (Last, First, Middle Initial) A. Leland J Salisbury		Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2014	
Mailing Address 2690 Northridge Ln N		Transaction ID : C9873582	
City Stillwater	State MN	Zip Code 55082-1500	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.05	
Name of Employer N/A	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 275.05		

Full Name (Last, First, Middle Initial) B. Samish Tye		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2014	
Mailing Address P.O. Box 161		Transaction ID : C9920750	
City Anacortes	State WA	Zip Code 98221	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00	
Name of Employer		Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		

Full Name (Last, First, Middle Initial) C. Santa Ynez Band of Chumash Indians		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address P.O. Box 517		Transaction ID : C9923527	
City Santa Ynez	State CA	Zip Code 93460	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer		Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00		

SUBTOTAL of Receipts This Page (optional).....	3150.05
TOTAL This Period (last page this line number only).....	[Empty Box]

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

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

FOR LINE NUMBER: PAGE 29 OF 90
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
McCollum for Congress

A. Full Name (Last, First, Middle Initial)
Mary Therese Schertler

Mailing Address 2800 Hamline Ave N
#226

City State Zip Code
Roseville MN 55113

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

Name of Employer Occupation
N/A Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
425.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : C9819327

Amount of Each Receipt this Period
125.00

B. Full Name (Last, First, Middle Initial)
Sarah Schmitz-Burns

Mailing Address 1411 Summit Ave

City State Zip Code
Saint Paul MN 55105

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

Name of Employer Occupation
John Haugen OBGYN Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : C9883120

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Gerald L. Seck

Mailing Address 2225 Riverwood Place

City State Zip Code
Saint Paul MN 55104

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

Name of Employer Occupation
Larkin, Hoffman, Daly & Lindgren Government Affairs

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 28 / 2014

Transaction ID : C9873574

Amount of Each Receipt this Period
250.00

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

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

875.00

**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 90
	<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	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

A. Full Name (Last, First, Middle Initial)
Sarah Stoesz

Mailing Address 1901 E River Pkwy

City Minneapolis State MN Zip Code 55414-3675

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

Name of Employer Planned Parenthood Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : C9819583

Amount of Each Receipt this Period
250.00

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

Mailing Address 2380 Oakridge Dr E

City Saint Paul State MN Zip Code 55119-5521

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

Name of Employer 3M Occupation Chemical Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1375.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : C9923399

Amount of Each Receipt this Period
250.00

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

Mailing Address 807 Summit Avenue

City Saint Paul State MN Zip Code 55105

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

Name of Employer Saint Paul Radiology Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 28 / 2014

Transaction ID : C9873581

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 31 OF 90
	<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	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

A. Full Name (Last, First, Middle Initial)
Mark Thomas M.D.

Mailing Address 402 Hall Avenue

City St Paul State MN Zip Code 55107

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

Name of Employer West Side Community Health Services Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 28 / 2014

Transaction ID : C9873586

Amount of Each Receipt this Period
250.00

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

Mailing Address 5 Rosecrest Ave

City Alexandria State VA Zip Code 22301

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

Name of Employer Cornerstone Government Affairs Occupation Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
964.62

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : C9923509

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Jodie R. Torkelson

Mailing Address 1420 Birch Lane Dr

City Thief Rvr Fls State MN Zip Code 56701-2409

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

Name of Employer Children's Defense Fund Occupation Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : C9923513

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 32 OF 90
	<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	

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NAME OF COMMITTEE (In Full)
McColum for Congress

A. Full Name (Last, First, Middle Initial)
Susan Truman

Mailing Address 767 Linwood Ave

City Saint Paul State MN Zip Code 55105-3323

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

Name of Employer St. Paul Radiology Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 28 / 2014

Transaction ID : C9873563

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
James E. Turnure

Mailing Address 114 Mackubin St
Apt 3

City Saint Paul State MN Zip Code 55102-2971

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
235.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : C9819574

Amount of Each Receipt this Period
50.00

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

Mailing Address 5151 17th Ave S

City Minneapolis State MN Zip Code 55417

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

Name of Employer United Health Group Occupation Director of Compliance

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 13 / 2014

Transaction ID : C9744094

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 33 OF 90
	<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	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

A. Full Name (Last, First, Middle Initial)
Kathryn Wardrop

Mailing Address 17328 Judicial Rd

City	State	Zip Code
Lakeville	MN	55044-9374

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

Name of Employer	Occupation
Gillette Children's Specialty Healthca	VP of Strategy & Operations

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 28 / 2014

Transaction ID : C9873536

Amount of Each Receipt this Period
 _____ 250.00

B. Full Name (Last, First, Middle Initial)
Mary Ann Barrows Wark

Mailing Address 1588 Northrop St

City	State	Zip Code
Falcon Heights	MN	55108-1322

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

Name of Employer	Occupation
Jean Lyle Children's Center	Teacher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 23 / 2014

Transaction ID : C9861630

Amount of Each Receipt this Period
 _____ 1000.00

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

Mailing Address Innovative Federal Strategies
511 C Street, NE

City	State	Zip Code
Washington	DC	20002

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

Name of Employer	Occupation
Innovative Federal Strategies, LLC	Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 29 / 2014

Transaction ID : C9696687

Amount of Each Receipt this Period
 _____ 1000.00

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

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

_____ 2250.00

**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 90
	<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	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

A. Full Name (Last, First, Middle Initial)
David K. Wickstrom

Mailing Address 533 Otis Ave

City Saint Paul State MN Zip Code 55104-4931

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : C9818857

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Margaret V.B. Wurtele

Mailing Address 2970 Gale Rd

City Wayzata State MN Zip Code 55391-2626

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

Name of Employer N/A Occupation Writer/Community Volunteer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 28 / 2014

Transaction ID : C9873566

Amount of Each Receipt this Period
250.00

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

Mailing Address 1550 Branston St

City Saint Paul State MN Zip Code 55108-1436

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 28 / 2014

Transaction ID : C9873605

Amount of Each Receipt this Period
250.00

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 35 OF 90
	<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	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

A. Full Name (Last, First, Middle Initial)
Mary Beth Yarrow

Mailing Address 1420 Grace Ave SW

City Willmar State MN Zip Code 56201-2975

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

Name of Employer Self-employed Occupation Filmmaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **625.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 28 / 2014

Transaction ID : C9873587

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Nancy H. Zingale

Mailing Address 436 Holly Ave Apt 3

City Saint Paul State MN Zip Code 55102-2242

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

Name of Employer University of St. Thomas Occupation Professor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 10 / 2014

Transaction ID : C9819608

Amount of Each Receipt this Period
200.00

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

Amount of Each Receipt this Period

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

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

450.00

47027.84

**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 90
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

A. Full Name (Last, First, Middle Initial)
3M COMPANY PAC

Mailing Address 3M CENTER BUILDING 224-6S-03

City	State	Zip Code
ST. PAUL	MN	55144

FEC ID number of contributing federal political committee. **C** C00084475

Name of Employer	Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 31 / 2014

Transaction ID : C9712843

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
3M COMPANY PAC

Mailing Address 3M CENTER BUILDING 224-6S-03

City	State	Zip Code
ST. PAUL	MN	55144

FEC ID number of contributing federal political committee. **C** C00084475

Name of Employer	Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : C9923364

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
AFSCME P.E.O.P.L.E.

Mailing Address 1625 L Street, NW

City	State	Zip Code
Washington	DC	20036

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

Name of Employer	Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : C9819832

Amount of Each Receipt this Period
3000.00

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

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

6000.00

**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 90
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

A. Full Name (Last, First, Middle Initial)
Air Line Pilots Association PAC

Mailing Address 1625 Massachusetts Avenue, N.W.

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00035451

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2014

Transaction ID : C9696690

Amount of Each Receipt this Period
 4000.00

B. Full Name (Last, First, Middle Initial)
AIRCRAFT OWNERS AND PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 421 AVIATION WAY

City FREDERICK State MD Zip Code 21701

FEC ID number of contributing federal political committee. **C** C00131185

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2014

Transaction ID : C9696688

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
ALLIANT TECHSYSTEMS INC. EMPLOYEE CITIZENSHIP FUND

Mailing Address 1300 WILSON BLVD SUITE 400

City ROSSLYN State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00250209

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2014

Transaction ID : C9743881

Amount of Each Receipt this Period
 1000.00

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: (check only one)	PAGE 38 OF 90
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

A. Full Name (Last, First, Middle Initial)
Amalgamated Transit Union COPE Account

Mailing Address 5025 Wisconsin Ave. NW

City Washington	State DC	Zip Code 20016
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FEC ID number of contributing federal political committee. **C** C00032995

Name of Employer	Occupation
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Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : C9819256

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
American Bankers Assoc. PAC

Mailing Address 1120 Connecticut Ave., NW
Suite 851

City Washington	State DC	Zip Code 20036
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00004275

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 11 / 2014

Transaction ID : C9743887

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
American College of Radiology Assn RADPAC

Mailing Address 1891 Preston White Drive

City Reston	State VA	Zip Code 20191
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00343459

Name of Employer	Occupation
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Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 28 / 2014

Transaction ID : C9873594

Amount of Each Receipt this Period
3500.00

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 90
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

A. Full Name (Last, First, Middle Initial)
American Dental Association PAC

Mailing Address 1111 - 14th Street NW., Suite 1100

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00000729**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 13 / 2014

Transaction ID : C9743882

Amount of Each Receipt this Period
2000.00

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

Mailing Address 325 Seventh St NW

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00106146**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 28 / 2014

Transaction ID : C9873552

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 25 MASSACHUSETTS AVE, NW
SUITE 600

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00000422**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 11 / 2014

Transaction ID : C9743888

Amount of Each Receipt this Period
5000.00

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

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

8000.00

**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 90
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

A. Full Name (Last, First, Middle Initial)
AMERICAN PODIATRIC MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 9312 OLD GEORGETOWN ROAD

City State Zip Code
BETHESDA MD 20814

FEC ID number of contributing federal political committee. **C C00008839**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 29 2014

Transaction ID : C9696689

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
American Society of Anesthesiologists PAC

Mailing Address 520 N. Northwest Hwy.

City State Zip Code
Park Ridge IL 60068

FEC ID number of contributing federal political committee. **C C00255752**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 11 2014

Transaction ID : C9743884

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Ameriprise Financial Inc. PAC

Mailing Address 101 Constitution Ave NW
Suite 816 West

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C C00414474**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 30 2014

Transaction ID : C9923464

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: (check only one)	PAGE 41 OF 90
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

A. Full Name (Last, First, Middle Initial)
AMGEN INC. POLITICAL ACTION COMMITTEE

Mailing Address 601 13th Street, NW
12th Floor

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00251876

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 28 / 2014

Transaction ID : C9873525

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
ANNA ESHOO FOR CONGRESS

Mailing Address 555 CAPITOL MALL, SUITE 1425

City SACRAMENTO State CA Zip Code 95814

FEC ID number of contributing federal political committee. **C** C00258475

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : C9923350

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
BROTHERHOOD OF LOCOMOTIVE ENGINEERS AND TRAINMEN PAC FUND

Mailing Address 1370 ONTARIO ST

City CLEVELAND State OH Zip Code 44113

FEC ID number of contributing federal political committee. **C** C00099234

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 07 / 2014

Transaction ID : C9712837

Amount of Each Receipt this Period
500.00

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 42 OF 90
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

Full Name (Last, First, Middle Initial)
DEALERS ELECTION ACTION COMMITTEE OF THE NATIONAL AUTOMOTIVE DEALERS ASSOCIATION

A. Mailing Address 8400 WESTPARK DRIVE

City State Zip Code
MCLEAN VA 22102

FEC ID number of contributing federal political committee. **C** C00040998

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 08 / 2014

Transaction ID : C9713320

Amount of Each Receipt this Period
2000.00

Full Name (Last, First, Middle Initial)
DELTA AIR LINES POLITICAL ACTION COMMITTEE

B. Mailing Address 1212 New York Avenue NW
Suite 200

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00104802

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : C9923553

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
DORSEY NATIONAL FUND

C. Mailing Address 50 SOUTH SIXTH STREET

City State Zip Code
MINNEAPOLIS MN 55402

FEC ID number of contributing federal political committee. **C** C00018945

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 10 / 2014

Transaction ID : C9819843

Amount of Each Receipt this Period
500.00

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: PAGE 43 OF 90
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
McCollum for Congress

A. Full Name (Last, First, Middle Initial)
ECOLAB INC. POLITICAL ACTION COMMITTEE

Mailing Address 370 WABASH STREET N.

City State Zip Code
ST. PAUL MN 55102

FEC ID number of contributing federal political committee. **C** C00101485

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : C9923355

Amount of Each Receipt this Period
3000.00

B. Full Name (Last, First, Middle Initial)
GENERAL DYNAMICS CORPORATION POLITICAL ACTION COMMITTEE (GDC PAC)

Mailing Address 2941 FAIRVIEW PARK DR.
SUITE 100

City State Zip Code
FALLS CHURCH VA 22042

FEC ID number of contributing federal political committee. **C** C00078451

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 07 / 2014

Transaction ID : C9712839

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
General Electric PAC

Mailing Address 1299 PENNSYLVANIA AVE NW
SUITE 900

City State Zip Code
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : C9923545

Amount of Each Receipt this Period
1000.00

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

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

5000.00

**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 90
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

A. Full Name (Last, First, Middle Initial)
HILL-ROM HOLDINGS, INC. POLITICAL ACTION COMMITTEE

Mailing Address 1069 State Road 46 East

City	State	Zip Code
Batesville	IN	47006

FEC ID number of contributing federal political committee. **C** C00448993

Name of Employer	Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : C9923541

Amount of Each Receipt this Period
 _____ 1000.00

B. Full Name (Last, First, Middle Initial)
INTERNATIONAL ASSOCIATION OF HEAT & FROST INSULATORS AND ASBESTOS WORKERS P A C

Mailing Address 9602 MARTIN LUTHER KING HIGHWAY

City	State	Zip Code
LANHAM	MD	20706

FEC ID number of contributing federal political committee. **C** C00115527

Name of Employer	Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 10 / 2014

Transaction ID : C9819262

Amount of Each Receipt this Period
 _____ 1000.00

C. Full Name (Last, First, Middle Initial)
INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS POLITICAL ACTION COMMITTEE

Mailing Address 900 SEVENTH ST, NW

City	State	Zip Code
WASHINGTON	DC	20001

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

Name of Employer	Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : C9924673

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: (check only one)	PAGE 45 OF 90
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

A. Full Name (Last, First, Middle Initial)
Intl Assn of Fire Fighters -- FIREPAC

Mailing Address 1750 New York Avenue, NW

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

FEC ID number of contributing federal political committee. **C** C00029447

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 30 / 2014

Transaction ID : C9923928

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Intl Union of Operating Engineers COPE

Mailing Address 1125 Seventeenth Street, NW

City Washington	State DC	Zip Code 20036
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00029504

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 07 / 2014

Transaction ID : C9712838

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
Intl Union Painters & Allied Trades IBPATogether

Mailing Address 1750 New York Ave., NW

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

FEC ID number of contributing federal political committee. **C** C00000885

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 28 / 2014

Transaction ID : C9873514

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: (check only one)	PAGE 46 OF 90
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
McColum for Congress

A. Full Name (Last, First, Middle Initial)
Land O'Lakes, Inc. PAC

Mailing Address Land O'Lakes, Inc
P.O. Box 64101

City Saint Paul State MN Zip Code 55164

FEC ID number of contributing federal political committee. **C** C00009423

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : C9923466

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
LEECH LAKE - PAC

Mailing Address 190 SAILSTAR DRIVE NW

City CASS LAKE State MN Zip Code 56633

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 28 / 2014

Transaction ID : C9873534

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Lockheed Martin Employees' PAC

Mailing Address 1725 Jefferson Davis Highway
Suite 300

City Arlington State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 30 / 2014

Transaction ID : C9923927

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: (check only one)	PAGE 47 OF 90
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

A. Full Name (Last, First, Middle Initial)
Lockridge Grindal Nauen Political Fund

Mailing Address 100 Washington Ave. S. #2200

City	State	Zip Code
Minneapolis	MN	55401

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

Name of Employer	Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 28 / 2014

Transaction ID : C9873551

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Lockridge Grindal Nauen Political Fund

Mailing Address 100 Washington Ave. S. #2200

City	State	Zip Code
Minneapolis	MN	55401

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

Name of Employer	Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : C9923547

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC

Mailing Address 1325 MASSACHUSETTS AVE., NW

City	State	Zip Code
WASHINGTON	DC	20005

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer	Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 22 / 2014

Transaction ID : C9771405

Amount of Each Receipt this Period
1000.00

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

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

4000.00

**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 90
	<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)
McCollum for Congress

A. NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

Mailing Address 1212 NEW YORK AVE NW
SUITE 1100

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00283135

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : C9923549

Amount of Each Receipt this Period
2000.00

B. National Beer Wholesalers PAC

Full Name (Last, First, Middle Initial)
National Beer Wholesalers PAC

Mailing Address 1101 King Street
Suite 600

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 28 / 2014

Transaction ID : C9873593

Amount of Each Receipt this Period
2500.00

C. NEA Fund for Children and Public Education

Full Name (Last, First, Middle Initial)
NEA Fund for Children and Public Education

Mailing Address 1201 16th Street, NW; Suite 421

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00003251

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 28 / 2014

Transaction ID : C9873524

Amount of Each Receipt this Period
1000.00

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 49 OF 90
	<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)
McCollum for Congress

A. Full Name (Last, First, Middle Initial)
Physical Therapy Political Action Committee

Mailing Address 1111 N. Fairfax Street

City State Zip Code
Alexandria VA 22314

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : C9819266

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Realtors Political Action Committee

Mailing Address 430 North Michigan Avenue

City State Zip Code
Chicago IL 60611

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
9000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 28 / 2014

Transaction ID : C9873592

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
SAINT PAUL PIPEFITTERS/STEAMFITTERS LOCAL 455

Mailing Address 1783 HOWARD ST N

City State Zip Code
MAPLEWOOD MN 55109

FEC ID number of contributing federal political committee. **C** C00350843

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 07 / 2014

Transaction ID : C9712840

Amount of Each Receipt this Period
1000.00

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 50 OF 90
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

A. Full Name (Last, First, Middle Initial)
Sheet Metal Workers' Intl Assn PAC

Mailing Address 1750 New York Avenue NW

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00007542

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 29 / 2014

Transaction ID : C9696700

Amount of Each Receipt this Period
 1750.00

3750.00

B. Full Name (Last, First, Middle Initial)
SIERRA CLUB POLITICAL COMMITTEE

Mailing Address 85 Second Street, 2nd Floor

City San Francisco State CA Zip Code 94105

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : C9819260

Amount of Each Receipt this Period
 1000.00

1000.00

C. Full Name (Last, First, Middle Initial)
THE BOEING COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1200 WILSON BLVD

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : C9923367

Amount of Each Receipt this Period
 2000.00

7000.00

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

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

4750.00

**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 90
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

A. Full Name (Last, First, Middle Initial)
TRANSPORT WORKERS UNION POLITICAL CONTRIBUTIONS COMMITTEE

Mailing Address **501 THIRD ST. NW 9TH FLOOR**

City **WASHINGTON** State **DC** Zip Code **20001**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 04 / 2014

Transaction ID : C9712841

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
UNITED FOOD AND COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

Mailing Address **1775 K STREET N.W.**

City **WASHINGTON** State **DC** Zip Code **20006**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 07 / 2014

Transaction ID : C9712842

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
UNITED STEELWORKERS POLITICAL ACTION FUND

Mailing Address **FIVE GATEWAY CENTER**

City **PITTSBURGH** State **PA** Zip Code **15222**

FEC ID number of contributing federal political committee. **C C00003590**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5250.00**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 29 / 2014

Transaction ID : C9696692

Amount of Each Receipt this Period
2250.00

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

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

5250.00

**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 90
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

A. Full Name (Last, First, Middle Initial)
UNITED STEELWORKERS POLITICAL ACTION FUND

Mailing Address **FIVE GATEWAY CENTER**

City **PITTSBURGH** State **PA** Zip Code **15222**

FEC ID number of contributing federal political committee. **C C00003590**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 29 / 2014

Transaction ID : C9696693

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Wells Fargo Employee PAC

Mailing Address **Sixth and Marquette**

City **Minneapolis** State **MN** Zip Code **55479**

FEC ID number of contributing federal political committee. **C C00034595**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : C9923522

Amount of Each Receipt this Period
1000.00

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).....

1250.00

80250.00

**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 53 OF 90		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
McCollum for Congress

Full Name (Last, First, Middle Initial) A. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2014
Mailing Address P.O. Box 619612		Amount of Each Disbursement this Period 202.60 Transaction ID : D450921
City Dallas	State TX	
Zip Code 75261	Purpose of Disbursement Travel Expenses	Category/ Type
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) B. American Express		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address P.O. Box 360001		Amount of Each Disbursement this Period 90.35 Transaction ID : D450918
City Fort Lauderdale	State FL	
Zip Code 33336	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: <input 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 08 / 20 / 2014
Mailing Address P.O. Box 360001		Amount of Each Disbursement this Period 113.32 Transaction ID : D444819
City Fort Lauderdale	State FL	
Zip Code 33336	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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	406.27
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 54 OF 90			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
McCullum for Congress

Full Name (Last, First, Middle Initial) A. AmericInn Hotel		Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2014
Mailing Address 1500 U.S. 71		Amount of Each Disbursement this Period 307.62 Transaction ID : D444812
City International Falls	State MN	
Zip Code 56649	Purpose of Disbursement Travel Expenses	Category/ Type
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) B. Better Beer Society		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address 415 6th St SE		Amount of Each Disbursement this Period 375.00 Transaction ID : D450930
City Minneapolis	State MN	
Zip Code 55414	Purpose of Disbursement Education	Category/ Type
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. Comcast		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014
Mailing Address 10 River Park Plz		Amount of Each Disbursement this Period 209.95 Transaction ID : D450858
City Saint Paul	State MN	
Zip Code 55107-1220	Purpose of Disbursement Internet, cable, phones	Category/ Type
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).....	892.57
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 55 OF 90			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

Full Name (Last, First, Middle Initial) A. Comcast		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014
Mailing Address 10 River Park Plz		Amount of Each Disbursement this Period 209.95 Transaction ID : D444204
City Saint Paul	State MN	
Zip Code 55107-1220	Purpose of Disbursement Internet, cable, phones	Category/ Type
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) B. Lizeht De La Torre		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 410 Van Dyke Street #310		Amount of Each Disbursement this Period 150.08 Transaction ID : D444206
City Saint Paul	State MN	
Zip Code 55119	Purpose of Disbursement Mileage reimbursement	Category/ Type
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. Lizeht De La Torre		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address 410 Van Dyke Street #310		Amount of Each Disbursement this Period 3063.36 Transaction ID : D444228
City Saint Paul	State MN	
Zip Code 55119	Purpose of Disbursement Payroll	Category/ Type
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).....	3423.39
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 56 OF 90			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
McCollum for Congress

Full Name (Last, First, Middle Initial) A. Lizeht De La Torre			Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014		
Mailing Address 410 Van Dyke Street #310			Amount of Each Disbursement this Period 3063.36		
City Saint Paul	State MN	Zip Code 55119	Transaction ID : D444234		
Purpose of Disbursement Payroll		Category/ Type			
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) B. Delta Airlines			Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014		
Mailing Address P.O. Box 20706			Amount of Each Disbursement this Period 463.60		
City Atlanta	State GA	Zip Code 30320	Transaction ID : D450920		
Purpose of Disbursement Travel Expenses		Category/ Type			
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. FedEx Office			Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2014		
Mailing Address 58 Snelling Ave S			Amount of Each Disbursement this Period 201.26		
City Saint Paul	State MN	Zip Code 55105-1901	Transaction ID : D444202		
Purpose of Disbursement Office supplies		Category/ Type			
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).....	3728.22
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 57 OF 90			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

A. First Data Corporation

Full Name (Last, First, Middle Initial)
Mailing Address 5565 Glenridge Connector NE

City Atlanta State GA Zip Code 30342

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
08 / 04 / 2014

Amount of Each Disbursement this Period
21.19

Transaction ID : D444804

B. First Data Corporation

Full Name (Last, First, Middle Initial)
Mailing Address 5565 Glenridge Connector NE

City Atlanta State GA Zip Code 30342

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
08 / 04 / 2014

Amount of Each Disbursement this Period
15.66

Transaction ID : D444805

c. First Data Corporation

Full Name (Last, First, Middle Initial)
Mailing Address 5565 Glenridge Connector NE

City Atlanta State GA Zip Code 30342

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
08 / 04 / 2014

Amount of Each Disbursement this Period
48.63

Transaction ID : D444806

SUBTOTAL of Disbursements This Page (optional) 85.48

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 58 OF 90		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
McCollum for Congress

Full Name (Last, First, Middle Initial)
A. First Data Corporation

Mailing Address 5565 Glenridge Connector NE

City Atlanta State GA Zip Code 30342

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
09 / 04 / 2014

Amount of Each Disbursement this Period
6.65

Transaction ID : D450905

Category/Type

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

Mailing Address 5565 Glenridge Connector NE

City Atlanta State GA Zip Code 30342

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
09 / 04 / 2014

Amount of Each Disbursement this Period
15.45

Transaction ID : D450906

Category/Type

Full Name (Last, First, Middle Initial)
c. First Data Corporation

Mailing Address 5565 Glenridge Connector NE

City Atlanta State GA Zip Code 30342

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
09 / 04 / 2014

Amount of Each Disbursement this Period
39.09

Transaction ID : D450907

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 61.19

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 59 OF 90			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
McCollum for Congress

Full Name (Last, First, Middle Initial) A. Fleur De Lis		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2014
Mailing Address 516 Selby Ave		Amount of Each Disbursement this Period 74.99
City Saint Paul	State MN	
Zip Code 55102-1729	Purpose of Disbursement Flowers	Transaction ID : D450919
Candidate Name	Category/ Type	
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) B. Fleur De Lis		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address 516 Selby Ave		Amount of Each Disbursement this Period 75.28
City Saint Paul	State MN	
Zip Code 55102-1729	Purpose of Disbursement Flowers	Transaction ID : D444372
Candidate Name	Category/ Type	
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. Fleur De Lis		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2014
Mailing Address 516 Selby Ave		Amount of Each Disbursement this Period 75.28
City Saint Paul	State MN	
Zip Code 55102-1729	Purpose of Disbursement Flowers	Transaction ID : D444820
Candidate Name	Category/ Type	
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).....	225.55
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 60 OF 90			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

Full Name (Last, First, Middle Initial) A. Ms. Sally S. Gagne		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014
Mailing Address 202 Wheeler St S		Amount of Each Disbursement this Period 435.00 Transaction ID : D444227
City Saint Paul	State MN	
Zip Code 55105-1927	Purpose of Disbursement Graphic design	Category/ Type
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) B. Anna L Gedstad		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address 1380 Victoria St N		Amount of Each Disbursement this Period 2084.80 Transaction ID : D444229
City Saint Paul	State MN	
Zip Code 55117	Purpose of Disbursement Payroll	Category/ Type
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. Anna L Gedstad		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 1380 Victoria St N		Amount of Each Disbursement this Period 2084.80 Transaction ID : D444235
City Saint Paul	State MN	
Zip Code 55117	Purpose of Disbursement Payroll	Category/ Type
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).....	4604.60
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 61 OF 90		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
McCollum for Congress

Full Name (Last, First, Middle Initial) A. Google		Date of Disbursement MM / DD / YYYY 08 / 04 / 2014
Mailing Address 1600 Amphiteatre Parkway		Amount of Each Disbursement this Period 55.00
City Mountain View	State CA	
Zip Code 94043	Purpose of Disbursement Internet Utility	Transaction ID : D444808
Candidate Name	Category/ Type	
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) B. Google		Date of Disbursement MM / DD / YYYY 09 / 04 / 2014
Mailing Address 1600 Amphiteatre Parkway		Amount of Each Disbursement this Period 55.00
City Mountain View	State CA	
Zip Code 94043	Purpose of Disbursement Internet Utility	Transaction ID : D450908
Candidate Name	Category/ Type	
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. Mr. Charles Rand Hammond		Date of Disbursement MM / DD / YYYY 09 / 02 / 2014
Mailing Address 3620 17th Ave S		Amount of Each Disbursement this Period 3560.87
City Minneapolis	State MN	
Zip Code 55407	Purpose of Disbursement Payroll	Transaction ID : D444236
Candidate Name	Category/ Type	
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).....	3670.87
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 62 OF 90			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
McCollum for Congress

Full Name (Last, First, Middle Initial) A. Mr. Charles Rand Hammond		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address 3620 17th Ave S		Amount of Each Disbursement this Period 3560.87 Transaction ID : D444230
City Minneapolis	State MN	
Zip Code 55407	Purpose of Disbursement Payroll	Category/ Type
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) B. Hill Plaza, LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2014
Mailing Address 1700 West Highway 36 Suite 650		Amount of Each Disbursement this Period 904.17 Transaction ID : D444208
City Roseville	State MN	
Zip Code 55113	Purpose of Disbursement Office and storage rent	Category/ Type
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. Hill Plaza, LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 1700 West Highway 36 Suite 650		Amount of Each Disbursement this Period 904.17 Transaction ID : D450854
City Roseville	State MN	
Zip Code 55113	Purpose of Disbursement Office and storage rent	Category/ Type
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).....	5369.21
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 63 OF 90			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

Full Name (Last, First, Middle Initial) A. Honsa-Binder Printing Company			Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 320 Spruce St			Amount of Each Disbursement this Period 400.37 Transaction ID : D441554
City Saint Paul	State MN	Zip Code 55101-2445	
Purpose of Disbursement Printing		Category/ Type	
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) B. Honsa-Binder Printing Company			Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014
Mailing Address 320 Spruce St			Amount of Each Disbursement this Period 5828.89 Transaction ID : D444226
City Saint Paul	State MN	Zip Code 55101-2445	
Purpose of Disbursement Printing		Category/ Type	
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. Barbara Joers			Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 152 Avon St S			Amount of Each Disbursement this Period 237.79 Transaction ID : D450862
City Saint Paul	State MN	Zip Code 55105-3338	
Purpose of Disbursement Food and beverage		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		* In-Kind Received
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional)	6467.05
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 64 OF 90		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
McCullum for Congress

Full Name (Last, First, Middle Initial) A. Conor Patrick Kennedy		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address 2 Hill Farm Cir		Amount of Each Disbursement this Period 1515.97 Transaction ID : D444231
City Saint Paul	State MN	
Zip Code 55127	Purpose of Disbursement Payroll	Category/ Type
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) B. Conor Patrick Kennedy		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 2 Hill Farm Cir		Amount of Each Disbursement this Period 1515.97 Transaction ID : D444237
City Saint Paul	State MN	
Zip Code 55127	Purpose of Disbursement Payroll	Category/ Type
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. Key Strategies, LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address 213 Front Ave		Amount of Each Disbursement this Period 1200.00 Transaction ID : D444221
City Saint Paul	State MN	
Zip Code 55117-5376	Purpose of Disbursement Advertisement	Category/ Type
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).....	4231.94
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 65 OF 90			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
McCollum for Congress

Full Name (Last, First, Middle Initial) A. Kowalski's		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address 1261 Grand Ave		Amount of Each Disbursement this Period 303.23 Transaction ID : D450909
City Saint Paul	State MN	
Zip Code 55105-2603	Purpose of Disbursement Catering	Category/ Type
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) B. Lillie Suburban Newspapers		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address 2515 7th Ave E		Amount of Each Disbursement this Period 299.00 Transaction ID : D441769
City North Saint Paul	State MN	
Zip Code 55109-3004	Purpose of Disbursement Print advertisement	Category/ Type
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. Hon. Betty McCollum		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014
Mailing Address 468 Dayton Ave Apt 9		Amount of Each Disbursement this Period 360.91 Transaction ID : D444205
City Saint Paul	State MN	
Zip Code 55102-1758	Purpose of Disbursement Mileage reimbursement	Category/ Type
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).....	963.14
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 66 OF 90			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
McCullum for Congress

Full Name (Last, First, Middle Initial) A. Midway Chamber of Commerce		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014
Mailing Address 1600 University Ave Suite 301		Amount of Each Disbursement this Period 285.00 Transaction ID : D444224
City Saint Paul State MN Zip Code 55104	Purpose of Disbursement Membership dues	
Candidate Name	Category/Type	
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) B. Ms. Dotti Mavromatis		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address 411 South Columbus Street		Amount of Each Disbursement this Period 3000.00 Transaction ID : D441935
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Fundraising Consulting	
Candidate Name	Category/Type	
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. Ms. Dotti Mavromatis		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014
Mailing Address 411 South Columbus Street		Amount of Each Disbursement this Period 3000.00 Transaction ID : D442542
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Fundraising Consulting	
Candidate Name	Category/Type	
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).....	6285.00
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 67 OF 90			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
McCollum for Congress

Full Name (Last, First, Middle Initial) A. Ms. Dotti Mavromatis		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address 411 South Columbus Street		Amount of Each Disbursement this Period 3000.00 Transaction ID : D450829
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Fundraising Consulting	Category/ Type
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) B. National Democratic Club		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 30 Ivy St SE		Amount of Each Disbursement this Period 616.50 Transaction ID : D441567
City Washington	State DC	
Zip Code 20003-4006	Purpose of Disbursement Food and beverage, membership dues	Category/ Type
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. NGP VAN, Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 1101 15th Street, NW, Suite 500		Amount of Each Disbursement this Period 2040.00 Transaction ID : D441552
City Washington	State DC	
Zip Code 20005	Purpose of Disbursement Database Software	Category/ Type
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).....	5656.50
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 68 OF 90			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

Full Name (Last, First, Middle Initial) A. NGP VAN, Inc.		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2014
Mailing Address 1101 15th Street, NW, Suite 500		Amount of Each Disbursement this Period 75.00 Transaction ID : D444377
City Washington State DC Zip Code 20005	Purpose of Disbursement Email service	
Candidate Name	Category/Type	
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) B. NGP VAN, Inc.		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address 1101 15th Street, NW, Suite 500		Amount of Each Disbursement this Period 75.00 Transaction ID : D444807
City Washington State DC Zip Code 20005	Purpose of Disbursement Email Service	
Candidate Name	Category/Type	
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. Paychex		Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2014
Mailing Address 1210 Northland Dr Ste 100		Amount of Each Disbursement this Period 153.65 Transaction ID : D444373
City Mendota Heights State MN Zip Code 55120-1181	Purpose of Disbursement Payroll processing	
Candidate Name	Category/Type	
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).....	303.65
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 69 OF 90			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

Full Name (Last, First, Middle Initial) A. Paychex		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address 1210 Northland Dr Ste 100		Amount of Each Disbursement this Period 5610.36
City Mendota Heights	State MN Zip Code 55120-1181	
Purpose of Disbursement Payroll taxes	Candidate Name	Transaction ID : D444233
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. Paychex		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 1210 Northland Dr Ste 100		Amount of Each Disbursement this Period 5603.76
City Mendota Heights	State MN Zip Code 55120-1181	
Purpose of Disbursement Payroll taxes	Candidate Name	Transaction ID : D444239
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. Paychex		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014
Mailing Address 1210 Northland Dr Ste 100		Amount of Each Disbursement this Period 228.80
City Mendota Heights	State MN Zip Code 55120-1181	
Purpose of Disbursement Payroll processing	Candidate Name	Transaction ID : D444240
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	11442.92
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 70 OF 90			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Postmaster USPS		M M / D D / Y Y Y Y 08 / 20 / 2014
Mailing Address Minnesota Transfer Station 2334 University Ave W		Amount of Each Disbursement this Period
City Saint Paul	State MN	Zip Code 55114-1858
Purpose of Disbursement Postage	Category/Type	
Candidate Name	Transaction ID : D444207	
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)		Date of Disbursement
B. Postmaster USPS		M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address Minnesota Transfer Station 2334 University Ave W		Amount of Each Disbursement this Period
City Saint Paul	State MN	Zip Code 55114-1858
Purpose of Disbursement Postage	Category/Type	
Candidate Name	Transaction ID : D450834	
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)		Date of Disbursement
C. Seven Corners Printing		M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 1099 Snelling Ave N		Amount of Each Disbursement this Period
City Saint Paul	State MN	Zip Code 55108
Purpose of Disbursement Printing	Category/Type	
Candidate Name	Transaction ID : D441553	
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).....	3901.91
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 71 OF 90			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
McCullum for Congress

Full Name (Last, First, Middle Initial) A. St. Paul Regional Labor Federation, AFL-CIO		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014
Mailing Address 411 Main St Ste 202		Amount of Each Disbursement this Period 550.00 Transaction ID : D444253
City Saint Paul	State MN Zip Code 55102-1032	
Purpose of Disbursement Advertisement	Category/Type	
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) B. Streamworks		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 3770 Dunlap St N		Amount of Each Disbursement this Period 993.80 Transaction ID : D450838
City Arden Hills	State MN Zip Code 55112-6907	
Purpose of Disbursement Postage	Category/Type	
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. Surdyk's		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2014
Mailing Address 303 East Hennepin Ave.		Amount of Each Disbursement this Period 221.56 Transaction ID : D450917
City Minneapolis	State MN Zip Code 55414	
Purpose of Disbursement Beverages	Category/Type	
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).....	1765.36
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 72 OF 90	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
McCollum for Congress

Full Name (Last, First, Middle Initial) A. T-Mobile USA, Inc.		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address 12920 SE 38th Street		Amount of Each Disbursement this Period 82.06 Transaction ID : D450857
City Bellevue State WA Zip Code 98006	Purpose of Disbursement Mobile Phone	
Candidate Name	Category/Type	
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) B. T-Mobile USA, Inc.		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 12920 SE 38th Street		Amount of Each Disbursement this Period 114.73 Transaction ID : D450912
City Bellevue State WA Zip Code 98006	Purpose of Disbursement Mobile Phone	
Candidate Name	Category/Type	
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. T-Mobile USA, Inc.		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 12920 SE 38th Street		Amount of Each Disbursement this Period 114.73 Transaction ID : D450913
City Bellevue State WA Zip Code 98006	Purpose of Disbursement Mobile Phone	
Candidate Name	Category/Type	
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).....	311.52
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 73 OF 90			
	<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)
McCullum for Congress

Full Name (Last, First, Middle Initial) A. T-Mobile USA, Inc.		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 12920 SE 38th Street		Amount of Each Disbursement this Period 114.73
City Bellevue State WA Zip Code 98006	Purpose of Disbursement Mobile Phone	
Candidate Name	Category/Type	Transaction ID : D450914
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) B. T-Mobile USA, Inc.		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2014
Mailing Address 12920 SE 38th Street		Amount of Each Disbursement this Period 106.59
City Bellevue State WA Zip Code 98006	Purpose of Disbursement Mobile Phone	
Candidate Name	Category/Type	Transaction ID : D444816
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. T-Mobile USA, Inc.		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2014
Mailing Address 12920 SE 38th Street		Amount of Each Disbursement this Period 106.59
City Bellevue State WA Zip Code 98006	Purpose of Disbursement Mobile Phone	
Candidate Name	Category/Type	Transaction ID : D444817
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).....	327.91
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 74 OF 90			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
McCullum for Congress

Full Name (Last, First, Middle Initial) A. T-Mobile USA, Inc.		Date of Disbursement MM / DD / YYYY 08 / 19 / 2014
Mailing Address 12920 SE 38th Street		Amount of Each Disbursement this Period 665.56 Transaction ID : D444818
City Bellevue State WA Zip Code 98006	Purpose of Disbursement Mobile Phone	
Candidate Name	Category/Type	
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) B. T-Mobile USA, Inc.		Date of Disbursement MM / DD / YYYY 08 / 18 / 2014
Mailing Address 12920 SE 38th Street		Amount of Each Disbursement this Period 78.97 Transaction ID : D444203
City Bellevue State WA Zip Code 98006	Purpose of Disbursement Mobile phone	
Candidate Name	Category/Type	
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. Tall Grass Digital		Date of Disbursement MM / DD / YYYY 09 / 09 / 2014
Mailing Address 321 4th Ave S		Amount of Each Disbursement this Period 480.00 Transaction ID : D444225
City South Saint Paul State MN Zip Code 55075	Purpose of Disbursement Website hosting and maintenance	
Candidate Name	Category/Type	
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).....	665.56
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 75 OF 90			
	<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)
McCollum for Congress

Full Name (Last, First, Middle Initial) A. Mr. Tom W. Trotter			Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014		
Mailing Address 425 New Jersey Ave SE			Amount of Each Disbursement this Period 350.00		
City Washington	State DC	Zip Code 20003-4034	Transaction ID : D450833		
Purpose of Disbursement Event space		Category/ Type			
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) B. W. A. Frost			Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014		
Mailing Address 374 Selby Ave			Amount of Each Disbursement this Period 176.11		
City Saint Paul	State MN	Zip Code 55102-1825	Transaction ID : D444815		
Purpose of Disbursement Food and Beverage		Category/ Type			
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. Simon Wentzell			Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014		
Mailing Address 3533 E Lake St			Amount of Each Disbursement this Period 2084.80		
City Minneapolis	State MN	Zip Code 55406-2120	Transaction ID : D444232		
Purpose of Disbursement Payroll		Category/ Type			
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)	2610.91
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 76 OF 90			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
McCullum for Congress

Full Name (Last, First, Middle Initial) A. Simon Wentzell		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 3533 E Lake St		Amount of Each Disbursement this Period 2084.80
City Minneapolis	State MN	
Zip Code 55406-2120	Purpose of Disbursement Payroll	Transaction ID : D444238
Candidate Name	Category/ Type	
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) B. Ms. Dotti Mavromatis		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014
Mailing Address 411 South Columbus Street		Amount of Each Disbursement this Period 1482.51
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Food and beverages	Transaction ID : D444181
Candidate Name	Category/ Type	
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. The Sugar Experience		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014
Mailing Address 425 Massachusetts Ave NW Suite 714		Amount of Each Disbursement this Period 820.00
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement Food and beverage	Transaction ID : D445062
Candidate Name	Category/ Type	
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)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3567.31
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 77 OF 90			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

Full Name (Last, First, Middle Initial) A. Tortilla Coast			Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014
Mailing Address 400 1st St SE			Amount of Each Disbursement this Period 662.51
City Washington	State DC	Zip Code 20003-1826	
Purpose of Disbursement Food and beverage		Category/ Type	Transaction ID : D445053 [MEMO ITEM]
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) B. Anna L Gedstad			Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 1380 Victoria St N			Amount of Each Disbursement this Period 227.37
City Saint Paul	State MN	Zip Code 55117	
Purpose of Disbursement Office supplies and mileage		Category/ Type	Transaction ID : D444182
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. FedEx Office			Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 58 Snelling Ave S			Amount of Each Disbursement this Period 4.83
City Saint Paul	State MN	Zip Code 55105-1901	
Purpose of Disbursement Office supplies		Category/ Type	Transaction ID : D444185 [MEMO ITEM]
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)	227.37
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 78 OF 90			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
McCullum for Congress

Full Name (Last, First, Middle Initial) A. Target		Date of Disbursement MM / DD / YYYY 07 / 31 / 2014
Mailing Address 1300 University Ave W		Amount of Each Disbursement this Period 107.54
City Saint Paul	State MN	
Zip Code 55104-4103	Purpose of Disbursement Office supplies	Transaction ID : D444186
Candidate Name	Category/Type	
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Conor Patrick Kennedy		Date of Disbursement MM / DD / YYYY 08 / 01 / 2014
Mailing Address 2 Hill Farm Cir		Amount of Each Disbursement this Period 219.78
City Saint Paul	State MN	
Zip Code 55127	Purpose of Disbursement Parking, office supplies, mileage	Transaction ID : D444188
Candidate Name	Category/Type	
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. Simon Wentzell		Date of Disbursement MM / DD / YYYY 08 / 04 / 2014
Mailing Address 3533 E Lake St		Amount of Each Disbursement this Period 365.80
City Minneapolis	State MN	
Zip Code 55406-2120	Purpose of Disbursement Office supplies and mileage	Transaction ID : D444190
Candidate Name	Category/Type	
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).....	585.80
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 79 OF 90			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
McCollum for Congress

Full Name (Last, First, Middle Initial) A. Office Max		Date of Disbursement MM / DD / YYYY 08 / 04 / 2014
Mailing Address 1490 University Ave W		Amount of Each Disbursement this Period 36.57
City Saint Paul	State MN	
Zip Code 55104-3901	Purpose of Disbursement Office supplies	Transaction ID : D444194 [MEMO ITEM]
Candidate Name	Category/Type	
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) B. Target		Date of Disbursement MM / DD / YYYY 08 / 04 / 2014
Mailing Address 1300 University Ave W		Amount of Each Disbursement this Period 27.95
City Saint Paul	State MN	
Zip Code 55104-4103	Purpose of Disbursement Office supplies	Transaction ID : D444191 [MEMO ITEM]
Candidate Name	Category/Type	
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. Target		Date of Disbursement MM / DD / YYYY 08 / 04 / 2014
Mailing Address 1300 University Ave W		Amount of Each Disbursement this Period 12.91
City Saint Paul	State MN	
Zip Code 55104-4103	Purpose of Disbursement Office supplies	Transaction ID : D444193 [MEMO ITEM]
Candidate Name	Category/Type	
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).....	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 80 OF 90			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
McCullum for Congress

Full Name (Last, First, Middle Initial) A. Lizeht De La Torre		Date of Disbursement MM / DD / YYYY 08 / 08 / 2014
Mailing Address 410 Van Dyke Street #310		Amount of Each Disbursement this Period 470.24
City Saint Paul	State MN	
Zip Code 55119	Purpose of Disbursement Office supplies and mileage	Transaction ID : D444195
Candidate Name	Category/Type	
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) B. Target		Date of Disbursement MM / DD / YYYY 08 / 08 / 2014
Mailing Address 1300 University Ave W		Amount of Each Disbursement this Period 12.30
City Saint Paul	State MN	
Zip Code 55104-4103	Purpose of Disbursement Office supplies	Transaction ID : D444199
Candidate Name	Category/Type	
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Target		Date of Disbursement MM / DD / YYYY 08 / 08 / 2014
Mailing Address 1300 University Ave W		Amount of Each Disbursement this Period 65.41
City Saint Paul	State MN	
Zip Code 55104-4103	Purpose of Disbursement Field supplies	Transaction ID : D444200
Candidate Name	Category/Type	
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)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	470.24
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 81 OF 90			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
McCollum for Congress

Full Name (Last, First, Middle Initial) A. Union Depot		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014
Mailing Address 214 4th Street E.		Amount of Each Disbursement this Period 5.00
City Saint Paul	State MN	
Zip Code 55101	Purpose of Disbursement Parking	Transaction ID : D444196 [MEMO ITEM]
Candidate Name	Category/Type	
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) B. Lizeht De La Torre		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2014
Mailing Address 410 Van Dyke Street #310		Amount of Each Disbursement this Period 193.12
City Saint Paul	State MN	
Zip Code 55119	Purpose of Disbursement Office supplies and mileage	Transaction ID : D444210
Candidate Name	Category/Type	
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. Target		Date of Disbursement M M / D D / Y Y Y Y 08 / 24 / 2014
Mailing Address 1300 University Ave W		Amount of Each Disbursement this Period 26.61
City Saint Paul	State MN	
Zip Code 55104-4103	Purpose of Disbursement Field supplies	Transaction ID : D444211 [MEMO ITEM]
Candidate Name	Category/Type	
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).....	193.12
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 82 OF 90			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
McCollum for Congress

Full Name (Last, First, Middle Initial) A. Simon Wentzell		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address 3533 E Lake St		Amount of Each Disbursement this Period 246.28 Transaction ID : D444214
City Minneapolis	State MN	
Zip Code 55406-2120	Purpose of Disbursement Office supplies and mileage	Category/ Type
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) B. Anna L Gedstad		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address 1380 Victoria St N		Amount of Each Disbursement this Period 196.28 Transaction ID : D444218
City Saint Paul	State MN	
Zip Code 55117	Purpose of Disbursement Office supplies and mileage	Category/ Type
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. Conor Patrick Kennedy		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014
Mailing Address 2 Hill Farm Cir		Amount of Each Disbursement this Period 180.74 Transaction ID : D444264
City Saint Paul	State MN	
Zip Code 55127	Purpose of Disbursement Field supplies and mileage	Category/ Type
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).....	623.30
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 83 OF 90			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Target		<input type="text" value="09"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
Mailing Address 1300 University Ave W		Amount of Each Disbursement this Period
City Saint Paul State MN Zip Code 55104-4103		<input type="text" value="88.90"/>
Purpose of Disbursement Field supplies		Transaction ID : D444265
Candidate Name		[MEMO ITEM]
Office Sought:	Disbursement For:	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. Target		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
Mailing Address 1300 University Ave W		Amount of Each Disbursement this Period
City Saint Paul State MN Zip Code 55104-4103		<input type="text" value="16.25"/>
Purpose of Disbursement Beverages		Transaction ID : D450811
Candidate Name		[MEMO ITEM]
Office Sought:	Disbursement For:	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
c. Target		<input type="text" value="09"/> / <input type="text" value="09"/> / <input type="text" value="2014"/>
Mailing Address 1300 University Ave W		Amount of Each Disbursement this Period
City Saint Paul State MN Zip Code 55104-4103		<input type="text" value="40.32"/>
Purpose of Disbursement Office supplies		Transaction ID : D450814
Candidate Name		[MEMO ITEM]
Office Sought:	Disbursement For:	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

**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 90			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

Full Name (Last, First, Middle Initial) A. Lizeht De La Torre		Date of Disbursement <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>09</td> <td></td> <td>26</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	09		26		2014
M M	/	D D	/	Y Y Y Y								
09		26		2014								
Mailing Address 410 Van Dyke Street #310		Amount of Each Disbursement this Period <table border="1"> <tr> <td>180.05</td> </tr> </table>	180.05									
180.05												
City Saint Paul	State MN	Zip Code 55119										
Purpose of Disbursement Office supplies, food and beverage, mileage		Transaction ID : D450835										
Candidate Name												
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:										
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)										

Full Name (Last, First, Middle Initial) B. Bruegger's/Caribou Coffee		Date of Disbursement <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>09</td> <td></td> <td>13</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	09		13		2014
M M	/	D D	/	Y Y Y Y								
09		13		2014								
Mailing Address 2133 Hudson Rd Suite 3		Amount of Each Disbursement this Period <table border="1"> <tr> <td>12.90</td> </tr> </table>	12.90									
12.90												
City Saint Paul	State MN	Zip Code 55119										
Purpose of Disbursement Food and beverage		Transaction ID : D450837										
Candidate Name												
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:										
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)										

Full Name (Last, First, Middle Initial) c. Office Max		Date of Disbursement <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>09</td> <td></td> <td>04</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	09		04		2014
M M	/	D D	/	Y Y Y Y								
09		04		2014								
Mailing Address 1490 University Ave W		Amount of Each Disbursement this Period <table border="1"> <tr> <td>42.83</td> </tr> </table>	42.83									
42.83												
City Saint Paul	State MN	Zip Code 55104-3901										
Purpose of Disbursement Office supplies		Transaction ID : D450836										
Candidate Name												
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:										
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)										

SUBTOTAL of Disbursements This Page (optional).....	<table border="1"> <tr> <td>180.05</td> </tr> </table>	180.05
180.05		
TOTAL This Period (last page this line number only).....	<table border="1"> <tr> <td></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 85 OF 90			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
McCollum for Congress

Full Name (Last, First, Middle Initial) A. Mr. Charles Rand Hammond			Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014		
Mailing Address 3620 17th Ave S			Amount of Each Disbursement this Period 683.41		
City Minneapolis	State MN	Zip Code 55407	Transaction ID : D450839		
Purpose of Disbursement Food and beverage, postage, parking, event supplies, office supplies		Category/ Type			
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) B. Elevated Beer, Wine & Spirits			Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014		
Mailing Address 4135 Hiwawatha Ave			Amount of Each Disbursement this Period 69.68		
City Minneapolis	State MN	Zip Code 55406	Transaction ID : D450849		
Purpose of Disbursement Beverages		Category/ Type			
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. FedEx Office			Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014		
Mailing Address 58 Snelling Ave S			Amount of Each Disbursement this Period 21.51		
City Saint Paul	State MN	Zip Code 55105-1901	Transaction ID : D450842		
Purpose of Disbursement Office supplies		Category/ Type			
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).....	683.41
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 90			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
McCullum for Congress

Full Name (Last, First, Middle Initial) A. Postmaster USPS		Date of Disbursement MM / DD / YYYY 08 / 04 / 2014
Mailing Address Minnesota Transfer Station 2334 University Ave W		Amount of Each Disbursement this Period 5.80
City Saint Paul	State MN	
Zip Code 55114-1858	Purpose of Disbursement Shipping	Transaction ID : D450843
Candidate Name	Category/Type	
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. St. Paul Hotel		Date of Disbursement MM / DD / YYYY 08 / 05 / 2014
Mailing Address 350 Market Street		Amount of Each Disbursement this Period 405.28
City Saint Paul	State MN	
Zip Code 55102	Purpose of Disbursement Food and beverage	Transaction ID : D450844
Candidate Name	Category/Type	
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Hon. Betty McCollum		Date of Disbursement MM / DD / YYYY 09 / 28 / 2014
Mailing Address 468 Dayton Ave Apt 9		Amount of Each Disbursement this Period 2026.08
City Saint Paul	State MN	
Zip Code 55102-1758	Purpose of Disbursement Travel expenses	Transaction ID : D450864
Candidate Name	Category/Type	
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).....	2026.08
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 90			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
McCullum for Congress

Full Name (Last, First, Middle Initial) A. Expedia		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address NE 1st Street & 120th Ave		Amount of Each Disbursement this Period 903.08
City Bellevue State WA Zip Code 98005	Purpose of Disbursement Travel expenses	
Candidate Name	Category/Type	Transaction ID : D450866 [MEMO ITEM]
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) B. Expedia		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address NE 1st Street & 120th Ave		Amount of Each Disbursement this Period 561.50
City Bellevue State WA Zip Code 98005	Purpose of Disbursement Travel expenses	
Candidate Name	Category/Type	Transaction ID : D450867 [MEMO ITEM]
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. Expedia		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address NE 1st Street & 120th Ave		Amount of Each Disbursement this Period 561.50
City Bellevue State WA Zip Code 98005	Purpose of Disbursement Travel expenses	
Candidate Name	Category/Type	Transaction ID : D450868 [MEMO ITEM]
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).....	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 88 OF 90		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
McCullum for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Expedia		M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address NE 1st Street & 120th Ave		Amount of Each Disbursement this Period 202.60
City Bellevue	State WA Zip Code 98005	
Purpose of Disbursement Travel expenses		Transaction ID : D450870
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		[MEMO ITEM]
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B.		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)		Date of Disbursement
C.		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).....	0.00
TOTAL This Period (last page this line number only).....	75957.18

**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 90
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
McCollum for Congress

Full Name (Last, First, Middle Initial) A. Democratic Congressional Campaign Committee		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2014
Mailing Address 430 S Capitol St SE		Amount of Each Disbursement this Period 20000.00 Transaction ID : D444509
City Washington State DC Zip Code 20003-4024	Purpose of Disbursement Contribution - Unlimited transfer	
Candidate Name	Category/Type	
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) B. MIKE HONDA FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 123 E. SAN CARLOS ST., #531		Amount of Each Disbursement this Period 1000.00 Transaction ID : D451106
City SAN JOSE State CA Zip Code 95112	Purpose of Disbursement Contribution	
Candidate Name MIKE HONDA	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA District: 17		

Full Name (Last, First, Middle Initial) C. Minnesota Democratic Farmer Labor Party		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2014
Mailing Address 255 Plato Blvd E		Amount of Each Disbursement this Period 7133.20 Transaction ID : D444209
City Saint Paul State MN Zip Code 55107-1623	Purpose of Disbursement Unlimited Transfer	
Candidate Name	Category/Type	
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).....	28133.20
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 90	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
McCullum 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 08 / 01 / 2014
Mailing Address 255 Plato Blvd E		Amount of Each Disbursement this Period 2741.00 Transaction ID : D444187
City Saint Paul	State MN	
Zip Code 55107-1623	Purpose of Disbursement Unlimited Transfer	Category/ Type
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) B. MONTANANS FOR LEWIS		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2014
Mailing Address PO BOX 1916		Amount of Each Disbursement this Period 500.00 Transaction ID : D450929
City BILLINGS	State MT	
Zip Code 59103	Purpose of Disbursement Contribution	Category/ Type
Candidate Name JOHN LEWIS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MT District: 00	

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	Category/ Type
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).....	3241.00
TOTAL This Period (last page this line number only).....	31374.20