

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5
Franken MVPs

ADDRESS (number and street) P.O. Box 583232
Check if different than previously reported. (ACC) Minneapolis MN 55458

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE
C C00480814
3. IS THIS REPORT NEW OR AMENDED
[X] (N) [ ] (A)

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

5. Covering Period 01 / 01 / 2016 through 03 / 31 / 2016

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

Type or Print Name of Treasurer Thomas Borman

Signature of Treasurer Thomas Borman [Electronically Filed] Date 04 / 15 / 2016

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Franken MVPs**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>	<input type="text" value="26199.94"/>	<input type="text" value="26199.94"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="26199.94"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="91225.00"/>	<input type="text" value="91225.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="117424.94"/>	<input type="text" value="117424.94"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="108608.11"/>	<input type="text" value="108608.11"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="8816.83"/>	<input type="text" value="8816.83"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**Franken MVPs**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	91100.00	91100.00
(ii) Unitemized .....	125.00	125.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	91225.00	91225.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	91225.00	91225.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	91225.00	91225.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	91225.00	91225.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	3208.11	3208.11
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	3208.11	3208.11
22. Transfers to Affiliated/Other Party Committees.....	105400.00	105400.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	108608.11	108608.11
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	108608.11	108608.11

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	91225.00	91225.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	91225.00	91225.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	3208.11	3208.11
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	3208.11	3208.11

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 20
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)  
**Franken MVPs**

**A. Abbe Kahn Aron**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1430 N Lake Shore Dr  
City Chicago State IL Zip Code 60610-1753  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Homemaker  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
03 / 17 / 2016  
**Transaction ID : C6553728**  
Amount of Each Receipt this Period  
5000.00  
 Memo Item

**B. Irving Azoff**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1100 Glendon Ave Ste 2000  
City Los Angeles State CA Zip Code 90024-3524  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Ticketmaster/Azoff Entertainment Occupation CEO  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
03 / 17 / 2016  
**Transaction ID : C6553756**  
Amount of Each Receipt this Period  
5000.00  
 Memo Item

**C. Rochelle Azoff**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1015 Gayley Ave  
City Los Angeles State CA Zip Code 90024  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Homemaker  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5400.00

Date of Receipt  
MM / DD / YYYY  
03 / 17 / 2016  
**Transaction ID : C6553757**  
Amount of Each Receipt this Period  
5400.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 OF 20
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Franken MVPs**

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

Mailing Address 360 Hamilton Ave  
Ste 100

City State Zip Code  
White Plains NY 10601-1847

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

Name of Employer Occupation  
Self-Employed Actor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
03 / 30 / 2016

**Transaction ID : C6567959**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

Mailing Address 605 Hightree Rd

City State Zip Code  
Santa Monica CA 90402-1007

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

Name of Employer Occupation  
Self-Employed Producer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
03 / 22 / 2016

**Transaction ID : C6561094**

Amount of Each Receipt this Period  
5000.00

Memo Item

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

Mailing Address 605 Hightree Rd

City State Zip Code  
Santa Monica CA 90402-1007

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

Name of Employer Occupation  
Self-Employed Writer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5400.00

Date of Receipt  
MM / DD / YYYY  
03 / 22 / 2016

**Transaction ID : C6561093**

Amount of Each Receipt this Period  
5400.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	11400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Franken MVPs**

**A. Marcia L Carsey**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4024 Radford Ave  
 City State Zip Code  
 Studio City CA 91604-2101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Carsey Werner Producer  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 30 / 2016  
**Transaction ID : C6567962**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

**B. Michael Earl Dillon**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 671 Quincy Ave  
 City State Zip Code  
 Long Beach CA 90814  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 N/A Retired  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 7700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2016  
**Transaction ID : C6553729**  
 Amount of Each Receipt this Period  
 7700.00  
 Memo Item

**C. Julia Hall**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2811 Wilshire Blvd  
 c/o Avery & Greig, LLP  
 City State Zip Code  
 Santa Monica CA 90403-4804  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Self-Employed Actress  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 30 / 2016  
**Transaction ID : C6567961**  
 Amount of Each Receipt this Period  
 2700.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15400.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Franken MVPs**

**A. Jo Ann Kaplan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 773 Latimer Rd  
 City Santa Monica State CA Zip Code 90402-1015  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer N/A Occupation Retired  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt **03 / 18 / 2016**  
**Transaction ID : C6557270**  
 Amount of Each Receipt this Period **1000.00**  
 Memo Item

**B. Lawrence Kasdan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 708 N Elm Dr  
 City Beverly Hills State CA Zip Code 90210-3423  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-Employed Occupation Producer  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **2000.00**

Date of Receipt **03 / 30 / 2016**  
**Transaction ID : C6564744**  
 Amount of Each Receipt this Period **2000.00**  
 Memo Item

**C. Jill Leiderman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1408 Miller Dr  
 City Los Angeles State CA Zip Code 90069-1422  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ABC Occupation Executive Producer  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt **03 / 17 / 2016**  
**Transaction ID : C6553758**  
 Amount of Each Receipt this Period **250.00**  
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Franken MVPs**

**A. Jonathan Littman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11601 Wilshire Blvd  
 Ste 2150  
 City Los Angeles State CA Zip Code 90025-1757  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Jerry Bruckheimer Television Occupation Producer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2016  
**Transaction ID : C6553723**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item

**B. Bill Maher**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10960 Wilshire Blvd  
 City Los Angeles State CA Zip Code 90024-3702  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-Employed Occupation Comedian  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 19 / 2016  
**Transaction ID : C6501124**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

**C. Jim Margolis**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 222 N Norton Ave  
 City Los Angeles State CA Zip Code 90004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Employed Occupation Writer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2016  
**Transaction ID : C6557271**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 11 OF 20  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Franken MVPs**

**A. Diane Mello**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6 Starburst Ct  
 City Newport Beach State CA Zip Code 92663  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Hotel California by the Sea Occupation Owner  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2016  
**Transaction ID : C6564741**  
 Amount of Each Receipt this Period  
 2700.00  
 Memo Item

**B. Kevin Mello**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2811 Villa Way  
 City Newport Beach State CA Zip Code 92663  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Hotel California by the Sea Occupation Owner  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2016  
**Transaction ID : C6564736**  
 Amount of Each Receipt this Period  
 2700.00  
 Memo Item

**C. Barbara Mosen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7 Currents  
 City Newport Coast State CA Zip Code 92657-2159  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer N/A Occupation Homemaker  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2016  
**Transaction ID : C6564746**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 7900.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

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NAME OF COMMITTEE (In Full)  
**Franken MVPs**

**A. Carl Mosen**  
Full Name (Last, First, Middle Initial)

Mailing Address 7 Currents

City Newport Coast State CA Zip Code 92657-2159

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

Name of Employer Mosen Properties Occupation Business Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 03 / 30 / 2016  
**Transaction ID : C6564745**

Amount of Each Receipt this Period  
2500.00

Memo Item

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

Mailing Address 16105 Northfield St.

City Pacific Palisades State CA Zip Code 90272-4263

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

Name of Employer Self-Employed Occupation Actor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2700.00

Date of Receipt  
 03 / 17 / 2016  
**Transaction ID : C6553749**

Amount of Each Receipt this Period  
2700.00

Memo Item

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

Mailing Address 1990 S Bundy dr #200

City Los Angeles State CA Zip Code 90025

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

Name of Employer Self-Employed Occupation Actor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5400.00

Date of Receipt  
 03 / 18 / 2016  
**Transaction ID : C6557274**

Amount of Each Receipt this Period  
5400.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 10600.00

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

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

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

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NAME OF COMMITTEE (In Full)  
**Franken MVPs**

**A. Jeffrey Ross**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 816 N Stanley Ave  
 City Los Angeles State CA Zip Code 90046  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-Employed Occupation Entertainer  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 1000.00

Date of Receipt 03 / 21 / 2016  
**Transaction ID : C6561092**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. Garry Shandling**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9100 Wilshire Blvd  
 C/o The Management Group  
 City Beverly Hills State CA Zip Code 90212-3464  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-Employed Occupation Actor  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 10000.00

Date of Receipt 03 / 30 / 2016  
**Transaction ID : C6564742**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item

**C. Hope Warschaw**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 514 Palisades Beach Rd  
 City Santa Monica State CA Zip Code 90402-2604  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Warland Investments Occupation Co-Managing Director  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 2700.00

Date of Receipt 03 / 17 / 2016  
**Transaction ID : C6553751**  
 Amount of Each Receipt this Period 2700.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... **13700.00**  
**TOTAL** This Period (last page this line number only).....

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

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

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NAME OF COMMITTEE (In Full)  
**Franken MVPs**

**A. John Law Warschaw**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 514 Palisades Beach Rd  
 City Santa Monica State CA Zip Code 90402  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer N/A Occupation Retired  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **2700.00**

Date of Receipt **03 / 17 / 2016**  
**Transaction ID : C6553754**  
 Amount of Each Receipt this Period **2700.00**  
 Memo Item

**B. Bradley Whitford**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10866 Wilshire Blvd FI 10  
 City Los Angeles State CA Zip Code 90024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-Employed Occupation Entertainer  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt **03 / 18 / 2016**  
**Transaction ID : C6557269**  
 Amount of Each Receipt this Period **1000.00**  
 Memo Item

**C. Susan Yeagley**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16105 Northfield St  
 City Pacific Palisades State CA Zip Code 90272  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Netflix/NBC Occupation Actress  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt **03 / 18 / 2016**  
**Transaction ID : C6557272**  
 Amount of Each Receipt this Period **1000.00**  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>4700.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 15 OF 20  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Franken MVPs**

**A. Christine Zander**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4547 Ethel Ave  
City State Zip Code  
Studio City CA 91604-1003  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Self-Employed Writer, Producer  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 18 / 2016  
**Transaction ID : C6557273**  
Amount of Each Receipt this Period  
1000.00  
 Memo Item

**B.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
Amount of Each Receipt this Period  
 Memo Item

**C.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	91100.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Franken MVPs**

Full Name (Last, First, Middle Initial)

**A. NGP VAN, Inc.**

Mailing Address 1101 15th St NW  
Ste 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement  
Database Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 08 / 2016

Transaction ID : **D449439**

Amount of Each Disbursement this Period

300.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Paypal**

Mailing Address 1840 Embarcadero Rd

City Palo Alto State CA Zip Code 94303-3308

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 02 / 2016

Transaction ID : **D449440**

Amount of Each Disbursement this Period

60.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Paypal**

Mailing Address 1840 Embarcadero Rd

City Palo Alto State CA Zip Code 94303-3308

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 03 / 2016

Transaction ID : **D449441**

Amount of Each Disbursement this Period

60.00

Memo Item

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

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

420.00



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Franken MVPs**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Mailing Address 1840 Embarcadero Rd

City Palo Alto State CA Zip Code 94303-3308

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2016

Transaction ID : **D449461**

Amount of Each Disbursement this Period

60.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Paypal**

Mailing Address 1840 Embarcadero Rd

City Palo Alto State CA Zip Code 94303-3308

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2016

Transaction ID : **D449462**

Amount of Each Disbursement this Period

1740.80

Memo Item

Full Name (Last, First, Middle Initial)

**C. Cardmember Service**

Mailing Address P.O. Box 790408

City Saint Louis State MO Zip Code 63179

Purpose of Disbursement  
Credit Card Payment - See Memos

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 25 / 2016

Transaction ID : **D449435**

Amount of Each Disbursement this Period

967.20

Memo Item

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

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

2768.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Franken MVPs**

Full Name (Last, First, Middle Initial)

**A. Delta**

Mailing Address 1030 Delta Blvd

City Atlanta State GA Zip Code 30354-1989

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

**Transaction ID : D449436**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Franken MVPs**

Full Name (Last, First, Middle Initial)

**A. AL FRANKEN FOR SENATE**

Mailing Address PO BOX 583144

City MINNEAPOLIS State MN Zip Code 55458

Purpose of Disbursement  
Transfer of Joint Fundraising Proceeds

Candidate Name  
**AL FRANKEN**

Office Sought:  House  
 Senate  
 President  
State: MN District: 00

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 19 / 2016

Transaction ID : **D449433**

Amount of Each Disbursement this Period

400.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. AL FRANKEN FOR SENATE**

Mailing Address PO BOX 583144

City MINNEAPOLIS State MN Zip Code 55458

Purpose of Disbursement  
Transfer of Joint Fundraising Proceeds

Candidate Name  
**AL FRANKEN**

Office Sought:  House  
 Senate  
 President  
State: MN District: 00

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2016

Transaction ID : **D449434**

Amount of Each Disbursement this Period

32000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Midwest Values PAC**

Mailing Address PO Box 583232

City Minneapolis State MN Zip Code 55458-3232

Purpose of Disbursement  
Transfer of Joint Fundraising Proceeds

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 19 / 2016

Transaction ID : **D449437**

Amount of Each Disbursement this Period

25000.00

Memo Item

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

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

57400.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Franken MVPs**

Full Name (Last, First, Middle Initial)

**A. Midwest Values PAC**

Mailing Address PO Box 583232

City Minneapolis State MN Zip Code 55458-3232

Purpose of Disbursement  
Transfer of Joint Fundraising Proceeds

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : D449438**

Amount of Each Disbursement this Period

48000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Memo Item

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

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

48000.00

105400.00