

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 1017 8th Street NE  
 Check if different than previously reported. (ACC)  
Washington DC 20002

2. **FEC IDENTIFICATION NUMBER** C00187419  
**CITY** **STATE** **ZIP CODE** **STATE** **DISTRICT**  
3. IS THIS REPORT  NEW (N) OR  AMENDED (A)  
MN 08

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 [ ] [ ] [ ] in the State of [ ]  
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on [ ] [ ] [ ] in the State of [ ]

5. Covering Period 04 01 2010 through 06 30 2010

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 Ms Carlotta M Richard

Signature of Treasurer Electronically Filed by Ms Carlotta M Richard Date 10 13 2010

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

A. Form/Schedule : **F3A**  
Transaction ID :

We are filing this amended report to reflect requested contributor information and disbursement purpose as requested in recent FEC cure letter.

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Friends of Jim Oberstar

Report Covering the Period: From:    To:

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)).....	119204.07	1263032.93
(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)).....	119204.07	1263032.93
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17).....	114447.66	610903.16
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	1500.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	114447.66	609403.16
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	1159460.61	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	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  
Friends of Jim Oberstar

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

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	26550.00	536859.38
(i) Itemized (use Schedule A).....	6610.00	60480.11
(ii) Unitemized.....	33160.00	597339.49
(iii) TOTAL of contributions from individuals..... ▶	0.00	262.55
(b) Political Party Committees.....	86044.07	665430.89
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	119204.07	1263032.93
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))		
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	0.00	6944.04
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.).....		
	0.00	1500.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	443.91	4008.16
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶		
	119647.98	1275485.13

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
17. OPERATING EXPENDITURES.....	114447.66	610903.16
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.....	104000.00	377650.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	218447.66	988553.16

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1258260.29
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	119647.98
25. SUBTOTAL (add Line 23 and Line 24).....	1377908.27
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	218447.66
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1159460.61

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 6 / 101</span> (check only one) <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15
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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)  
Friends of Jim Oberstar

<p><b>A.</b> Full Name (Last, First, Middle Initial) Philip A. Bangert</p> <p>Mailing Address 2550 M St NW</p> <p>City State Zip Code Washington DC 20037-1301</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Patton Boggs Attorney</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ <span style="float: right; border: 1px solid black; padding: 2px;">500.00</span></p>	<p>Date of Receipt  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p><b>Transaction ID:</b> C2442515</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">500.00</span></p>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	3		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	3		2	0	1	0												

<p><b>B.</b> Full Name (Last, First, Middle Initial) John Cowles, Jr.</p> <p>Mailing Address 155 5th Ave. So. Suite 1000</p> <p>City State Zip Code Minneapolis MN 55401-2550</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation N/A Retired</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ <span style="float: right; border: 1px solid black; padding: 2px;">2900.00</span></p>	<p>Date of Receipt  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p><b>Transaction ID:</b> C2450099</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">1200.00</span></p>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	3		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	3		2	0	1	0												

<p><b>C.</b> Full Name (Last, First, Middle Initial) John Cowles, Jr.</p> <p>Mailing Address 155 5th Ave. So. Suite 1000</p> <p>City State Zip Code Minneapolis MN 55401-2550</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation N/A Retired</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ <span style="float: right; border: 1px solid black; padding: 2px;">2900.00</span></p>	<p>Date of Receipt  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p><b>Transaction ID:</b> C2450101</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">700.00</span></p>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	7		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	7		2	0	1	0												

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">2400.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 101  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

**A.** Full Name (Last, First, Middle Initial)  
Richard G. Devlin  
Mailing Address 317 6th Ave. SW  
City Rochester State MN Zip Code 55902  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Mayo Clinic Occupation Executive  
Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 400.00  
Date of Receipt 06 / 21 / 2010  
Transaction ID: C2450916  
Amount of Each Receipt this Period 200.00

**B.** Full Name (Last, First, Middle Initial)  
Mort Downey  
Mailing Address 1401 K St NW Ste 701  
City Washington State DC Zip Code 20005-3430  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Parsons Brinckerhoff Occupation Vice President, Gov't Rel.  
Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00  
Date of Receipt 05 / 11 / 2010  
Transaction ID: C2353184  
Amount of Each Receipt this Period 500.00

**C.** Full Name (Last, First, Middle Initial)  
Crystal Drwenski  
Mailing Address 6162 N Brookline  
City Oklahoma City State OK Zip Code 73112  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Drwenski Communications LLC Occupation Legislative Consultant  
Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00  
Date of Receipt 04 / 05 / 2010  
Transaction ID: C2220383  
Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1200.00  
**TOTAL** This Period (last page this line number only) ..... ►



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 101  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

<p><b>A.</b> Full Name (Last, First, Middle Initial) Stuart Dye</p> <p>Mailing Address 2099 Pennsylvania Ave NW STE 100</p> <p>City State Zip Code Washington DC 20006-6801</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Holland &amp; Knight Attorney</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ <span style="border: 1px solid black; padding: 2px;">750.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 6 / 2 6 / 2 0 1 0</span></p> <p><b>Transaction ID:</b> C2453289</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">250.00</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Warren K Erdman</p> <p>Mailing Address 5340 Ward Pkwy</p> <p>City State Zip Code Kansas City MO 64112-2369</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Kansas City Southern Executive</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ <span style="border: 1px solid black; padding: 2px;">500.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 4 / 2 2 / 2 0 1 0</span></p> <p><b>Transaction ID:</b> C2235298</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">500.00</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Dan Erhart</p> <p>Mailing Address 4120 115th Ave NW</p> <p>City State Zip Code Coon Rapids MN 55433-2511</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Anoka County County Commissioner</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ <span style="border: 1px solid black; padding: 2px;">250.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 6 / 1 8 / 2 0 1 0</span></p> <p><b>Transaction ID:</b> C2450485</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">100.00</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">850.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 101  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

**A.** Full Name (Last, First, Middle Initial)  
Matt & Hazel Filipovich

Mailing Address 1112 East Ct

City State Zip Code  
Eveleth MN 55734-1417

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

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 11 / 2010

**Transaction ID:** C2353191

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Matt & Hazel Filipovich

Mailing Address 1112 East Ct

City State Zip Code  
Eveleth MN 55734-1417

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

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 11 / 2010

**Transaction ID:** C2353193

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Frederick S Fish

Mailing Address 5408 Larada Ln

City State Zip Code  
Edina MN 55436-1025

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

Name of Employer Self Occupation Physician

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
05 / 17 / 2010

**Transaction ID:** C2355865

Amount of Each Receipt this Period  
2000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3000.00**

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

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

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

FOR LINE NUMBER: PAGE 11 / 101  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

**A.** Full Name (Last, First, Middle Initial)  
Glenn S. Forbes

Mailing Address 5199 Meadow Crossing Rd. SW

City State Zip Code  
Rochester MN 55902

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

Name of Employer Occupation  
Mayo Clinic Physician

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 18 / 2010

**Transaction ID:** C2450471

Amount of Each Receipt this Period  
500.00

750.00

**B.** Full Name (Last, First, Middle Initial)  
Don Fowler

Mailing Address PO Box 50627  
2725 Devine Street

City State Zip Code  
Columbia SC 29250-0627

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

Name of Employer Occupation  
Fowler Communications, In- Proprietor  
c.

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 14 / 2010

**Transaction ID:** C2442543

Amount of Each Receipt this Period  
250.00

1500.00

**C.** Full Name (Last, First, Middle Initial)  
Don Fowler

Mailing Address PO Box 50627  
2725 Devine Street

City State Zip Code  
Columbia SC 29250-0627

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

Name of Employer Occupation  
Fowler Communications, In- Proprietor  
c.

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 26 / 2010

**Transaction ID:** C2453284

Amount of Each Receipt this Period  
250.00

1500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1000.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 101  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

**A.**

Full Name (Last, First, Middle Initial)  
Martin Frost

Mailing Address 1152 15th Street NW  
Suite 800

City Washington State DC Zip Code 20005-1723

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

Name of Employer Polsinelli Shughart Occupation Congressional Affairs Consultant

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3500.00

Date of Receipt 04 / 22 / 2010  
**Transaction ID: C2235292**  
Amount of Each Receipt this Period 1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Chris Gade

Mailing Address 2041 Galway Ln. NE

City Rochester State MN Zip Code 55906

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

Name of Employer Mayo Clinic Foundation Occupation Chair

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

Date of Receipt 06 / 18 / 2010  
**Transaction ID: C2450472**  
Amount of Each Receipt this Period 200.00

**C.**

Full Name (Last, First, Middle Initial)  
Tim Geisler

Mailing Address 2157 Ponderosa Dr SW

City Rochester State MN Zip Code 55902

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

Name of Employer Mayo Occupation Manager

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt 06 / 18 / 2010  
**Transaction ID: C2450473**  
Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1250.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 101  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

**A.**

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

Mailing Address 10102 Lawyers Rd

City State Zip Code  
Vienna VA 22181-2940

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

Name of Employer: Graber Government & Public Affairs  
Occupation: President

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 04 / 30 / 2010  
**Transaction ID: C2239642**  
 Amount of Each Receipt this Period: 250.00

**B.**

Full Name (Last, First, Middle Initial)  
Michael R Haverty

Mailing Address 4920 Central Ave

City State Zip Code  
Kansas City MO 64112

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

Name of Employer: Kansas City Southern  
Occupation: CEO

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 04 / 22 / 2010  
**Transaction ID: C2235297**  
 Amount of Each Receipt this Period: 1000.00

**C.**

Full Name (Last, First, Middle Initial)  
John Himle

Mailing Address 13908 Emerald Ridge

City State Zip Code  
Minnetonka MN 55305

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

Name of Employer: Himle, Hornér, Inc.  
Occupation: Proprietor

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 06 / 18 / 2010  
**Transaction ID: C2450475**  
 Amount of Each Receipt this Period: 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1500.00**

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

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

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

FOR LINE NUMBER: PAGE 14 / 101

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

**A.**

Full Name (Last, First, Middle Initial)

Albert C Kelly

Mailing Address 601 N Main

City State Zip Code  
Bristow OK 74010

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

Name of Employer Occupation  
Spirit Bank Executive

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 6 / 2 0 1 0

Transaction ID: C2220485

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Jeffrey Korsmo

Mailing Address 2026 Telemark Ct., NW

City State Zip Code  
Rochester MN 55901

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

Name of Employer Occupation  
Mayo Administrator

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 8 / 2 0 1 0

Transaction ID: C2450460

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Norma Krayem

Mailing Address 7904 16th St.NW

City State Zip Code  
washington DC 20012

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

Name of Employer Occupation  
Patton Boggs LLP Sr. Advisor

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1500.00

Date of Receipt

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

Transaction ID: C2358472

Amount of Each Receipt this Period

1500.00

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

2750.00

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

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

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

FOR LINE NUMBER: PAGE 15 / 101  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

**A.** Full Name (Last, First, Middle Initial)  
James F Kuhn  
Mailing Address 6034 Grove Dr  
City Alexandria State VA Zip Code 22307-1139  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Public Affairs Consultant  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
500.00  
Date of Receipt 04 / 01 / 2010  
Transaction ID: C2217634  
Amount of Each Receipt this Period 500.00

**B.** Full Name (Last, First, Middle Initial)  
Edward McCall  
Mailing Address 914 Michigan Ave #2  
City Evanston State IL Zip Code 60202  
FEC ID number of contributing federal political committee. **C**  
Name of Employer CDM Occupation Engineer  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
250.00  
Date of Receipt 04 / 14 / 2010  
Transaction ID: C2226024  
Amount of Each Receipt this Period 250.00

**C.** Full Name (Last, First, Middle Initial)  
Stephen McHale  
Mailing Address 10314 Armory Ave  
City Kensington State MD Zip Code 20895  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Patton Boggs Occupation Attorney  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
500.00  
Date of Receipt 05 / 11 / 2010  
Transaction ID: C2353185  
Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1250.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 101  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

**A.**

Full Name (Last, First, Middle Initial)  
Daniel McNamara

Mailing Address 811 Milestone Drive

City State Zip Code  
Silver Spring MD 20904

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

Name of Employer Occupation  
Cassidy & Associates Legislative Consultant

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	6	/	2	0	1	0

Transaction ID: C2220491

Amount of Each Receipt this Period  
1000.00

Election Cycle-to-Date ▼ 1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Carolina A. Mederos

Mailing Address 2550 M St NW

City State Zip Code  
Washington DC 20037-1301

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

Name of Employer Occupation  
Patton Boggs Public Policy Consultant

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	6	/	2	0	1	0

Transaction ID: C2230930

Amount of Each Receipt this Period  
1000.00

Election Cycle-to-Date ▼ 2500.00

**C.**

Full Name (Last, First, Middle Initial)  
Choctaw Nation of Oklahoma

Mailing Address Gregory E. Pyle, Chief  
PO Box 1210

City State Zip Code  
Durant OK 74702-1210

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

Name of Employer Occupation  
N/A Native American Tribe

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	6	/	2	0	1	0

Transaction ID: C2358946

Amount of Each Receipt this Period  
1400.00

Election Cycle-to-Date ▼ 3400.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3400.00**

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





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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 18 / 101  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

**A.** Full Name (Last, First, Middle Initial)  
Gerald E. Sikorski

Mailing Address 2099 Pennsylvania Ave NW  
STE 100

City Washington State DC Zip Code 20006

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

Name of Employer Holland & Knight Occupation Attorney

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 06 / 26 / 2010  
**Transaction ID: C2453288**  
 Amount of Each Receipt this Period 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Peter Speer

Mailing Address 1520 2nd Street

City Kirkland State WA Zip Code 98033

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

Name of Employer Pexco LLC Occupation Vice President of Sales

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 04 / 06 / 2010  
**Transaction ID: C2220486**  
 Amount of Each Receipt this Period 500.00

**C.** Full Name (Last, First, Middle Initial)  
David Starling

Mailing Address 427 W 12th St

City Kansas City State MO Zip Code 64105-1403

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

Name of Employer Kansas City Southern Occupation President

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 04 / 22 / 2010  
**Transaction ID: C2235299**  
 Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2000.00

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



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

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

FOR LINE NUMBER: PAGE 20 / 101  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

**A.** Full Name (Last, First, Middle Initial)  
3M PAC  
Mailing Address 3M Center  
City Saint Paul State MN Zip Code 55144  
FEC ID number of contributing federal political committee. **C** C00084475  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00  
Date of Receipt 04 / 06 / 2010  
Transaction ID: C2220488  
Amount of Each Receipt this Period 1000.00

**B.** Full Name (Last, First, Middle Initial)  
ACTBLUE  
Mailing Address P.O. Box 382110  
City Cambridge State MA Zip Code 02238  
FEC ID number of contributing federal political committee. **C** C00401224  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 172.87  
Date of Receipt 05 / 11 / 2010  
Transaction ID: C2353189  
Amount of Each Receipt this Period 96.05

**C.** Full Name (Last, First, Middle Initial)  
ACTBLUE  
Mailing Address P.O. Box 382110  
City Cambridge State MA Zip Code 02238  
FEC ID number of contributing federal political committee. **C** C00401224  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 172.87  
Date of Receipt 05 / 11 / 2010  
Transaction ID: C2353190  
Amount of Each Receipt this Period 48.02

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1144.07  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 21 / 101  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

**A.** Full Name (Last, First, Middle Initial)  
Amalgamated Transit Union COPE (PAC)  
Mailing Address 5025 Wisconsin Avenue, N.W.  
City Washington State DC Zip Code 20016-4139  
FEC ID number of contributing federal political committee. **C** C00032995  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 6000.00  
Date of Receipt: 04 / 06 / 2010  
Transaction ID: C2220505  
Amount of Each Receipt this Period: 1500.00

**B.** Full Name (Last, First, Middle Initial)  
American Association for Justice  
Mailing Address 1050 31st Street NW  
Fifth Floor  
City Washington State DC Zip Code 20007  
FEC ID number of contributing federal political committee. **C** C00024521  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 7000.00  
Date of Receipt: 04 / 06 / 2010  
Transaction ID: C2220504  
Amount of Each Receipt this Period: 1000.00

**C.** Full Name (Last, First, Middle Initial)  
AMERICAN CONCRETE PAVEMENT ASSOCIATION PAC (ACPA)  
Mailing Address 5420 Old Orchard Road  
Suite A-100  
City Skokie State IL Zip Code 60077  
FEC ID number of contributing federal political committee. **C** C00322727  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00  
Date of Receipt: 05 / 17 / 2010  
Transaction ID: C2356041  
Amount of Each Receipt this Period: 2000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4500.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 22 / 101  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

**A.** Full Name (Last, First, Middle Initial)  
AMERICAN FEDERATION OF TEACHERS AFL-CIO COMMITTEE

Mailing Address 555 New Jersey Avenue NW

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00028860

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 1 / 2 0 1 0

**Transaction ID:** C2353182

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
APL Limited PAC

Mailing Address 1111 Broadway

City State Zip Code  
Oakland CA 94607

FEC ID number of contributing federal political committee. **C** C00137828

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 2 7 / 2 0 1 0

**Transaction ID:** C2237451

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
ARTBA Political Action Committee

Mailing Address Pete Ruane  
1010 Massachusetts Ave. NW

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00118208

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 1 / 2 0 1 0

**Transaction ID:** C2353171

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5500.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 101

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

**A.**

Full Name (Last, First, Middle Initial)  
ARTBA Political Action Committee

Mailing Address Pete Ruane  
1010 Massachusetts Ave. NW

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00118208

Name of Employer Occupation

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4500.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 11 / 2010

Transaction ID: C2353173

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)  
ASH GROVE CEMENT POLITICAL ACTION COMMITTEE

Mailing Address P.O. BOX 25900

City State Zip Code  
OVERLAND PARK KS 66225

FEC ID number of contributing federal political committee. **C** C00102517

Name of Employer Occupation

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
04 / 30 / 2010

Transaction ID: C2239643

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Barnes & Thornburg LLP

Mailing Address 11 South Meridian Street

City State Zip Code  
Indianapolis IN 46204

FEC ID number of contributing federal political committee. **C** C00395947

Name of Employer Occupation

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt

M M / D D / Y Y Y Y  
04 / 14 / 2010

Transaction ID: C2226026

Amount of Each Receipt this Period

1000.00

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

2500.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 101  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

**A.** Full Name (Last, First, Middle Initial)  
BOEING POLITICAL ACTION COMMITTEE

Mailing Address 1200 Wilson Blvd

City State Zip Code  
Arlington VA 22209

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 6000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 3 0 / 2 0 1 0

**Transaction ID:** C2239790

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
BROTHERHOOD OF RAILROAD SIGNALMEN POLITICAL ACTION

Mailing Address 917 Shenandoah Shores Road

City State Zip Code  
Front Royal VA 22630

FEC ID number of contributing federal political committee. **C** C00011262

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 1 / 2 0 1 0

**Transaction ID:** C2353183

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Burns & McDonnell, Inc.

Mailing Address 9400 Ward Parkway

City State Zip Code  
Kansas City MO 64114

FEC ID number of contributing federal political committee. **C** C00442913

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 2 2 / 2 0 1 0

**Transaction ID:** C2235290

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **7000.00**

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 101  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

**A.** Full Name (Last, First, Middle Initial)  
CAMP DRESSER & MCKEE INC. NATIONAL POLITICAL ACTIO

Mailing Address 14420 ALBEMARLE POINT PL SUITE 210

City State Zip Code  
CHANTILLY VA 20151

FEC ID number of contributing federal political committee. **C** C00398222

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	8	/	2	0	1	0

**Transaction ID:** C2239283

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Cement Kiln Recycling Coalition PAC

Mailing Address P.O. Box 7553  
SUITE 615

City State Zip Code  
Arlington VA 22207

FEC ID number of contributing federal political committee. **C** C00287524

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

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

**Transaction ID:** C2353123

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
DUPONT GOOD GOVERNMENT FUND

Mailing Address 1007 Market Street  
BMP30-1318

City State Zip Code  
Wilmington DE 19898

FEC ID number of contributing federal political committee. **C** C00171926

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

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

**Transaction ID:** C2217639

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2500.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 101  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

**A.** Full Name (Last, First, Middle Initial)  
ESSROC PAC

Mailing Address 3251 Bath Pike

City State Zip Code  
Nazareth PA 18064

FEC ID number of contributing federal political committee. **C** C00332775

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 9 / 2 0 1 0

**Transaction ID:** C2310097

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
FLUOR CORPORATION PUBLIC AFFAIRS COMMITTEE (FLUOR)

Mailing Address 403 East Capitol St. SE

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00034132

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 9 / 2 0 1 0

**Transaction ID:** C2310098

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Forest City Enterprises

Mailing Address 50 Public Square-  
Terminal Tower, Suite 1100

City State Zip Code  
Cleveland OH 44113

FEC ID number of contributing federal political committee. **C** C00123513

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 4 / 0 6 / 2 0 1 0

**Transaction ID:** C2220493

Amount of Each Receipt this Period  
2000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4000.00**

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

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

Use separate schedule(s)  
for each category of the  
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(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

**A.** Full Name (Last, First, Middle Initial)  
GENESEE & WYOMING INC. PAC

Mailing Address 204 North George Street Suite 230

City York State PA Zip Code 17401

FEC ID number of contributing federal political committee. **C** C00289058

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt: 06 / 26 / 2010  
**Transaction ID: C2453287**  
 Amount of Each Receipt this Period: 1500.00

**B.** Full Name (Last, First, Middle Initial)  
Giant Cement Holding, Inc.

Mailing Address 320D MIDLAND PARKWAY

City SUMMERVILLE State SC Zip Code 29485

FEC ID number of contributing federal political committee. **C** C00412270

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 04 / 26 / 2010  
**Transaction ID: C2236985**  
 Amount of Each Receipt this Period: 1000.00

**C.** Full Name (Last, First, Middle Initial)  
GOODYEAR TIRE & RUBBER COMPANY GOOD GOVERNMENT FUN

Mailing Address 1144 EAST MARKET STREET

City AKRON State OH Zip Code 44316

FEC ID number of contributing federal political committee. **C** C00100131

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 04 / 06 / 2010  
**Transaction ID: C2220499**  
 Amount of Each Receipt this Period: 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3500.00

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

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

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

FOR LINE NUMBER: PAGE 28 / 101  
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 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

**A.** Full Name (Last, First, Middle Initial)  
Greyhound Lines Political Action Committee

Mailing Address 15110 N DALLAS PARKWAY

City State Zip Code  
DALLAS TX 75248

FEC ID number of contributing federal political committee. **C** C00215129

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 1 1 / 2 0 1 0

**Transaction ID:** C2222050

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
HARRIS FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address 600 Maryland Avenue SW  
Suite 850E

City State Zip Code  
Washington DC 20024

FEC ID number of contributing federal political committee. **C** C00100321

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 2 6 / 2 0 1 0

**Transaction ID:** C2453286

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE

Mailing Address 1001 Pennsylvania Avenue NW  
Suite 700 South

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 0 6 / 2 0 1 0

**Transaction ID:** C2220487

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3000.00

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

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

Use separate schedule(s)  
for each category of the  
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 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

**A.** Full Name (Last, First, Middle Initial)  
J E DUNN CONSTRUCTION GROUP INC PAC

Mailing Address 929 HOLMES

City State Zip Code  
KANSAS CITY MO 64106

FEC ID number of contributing federal political committee. **C** C00453688

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 8 / 2 0 1 0

**Transaction ID:** C2239284

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
JACOBS GOOD GOVERNMENT FUND OF JACOBS ENGINEERING

Mailing Address 1111 South Arroyo Parkway

City State Zip Code  
Pasadena CA 91105

FEC ID number of contributing federal political committee. **C** C00142299

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 0 6 / 2 0 1 0

**Transaction ID:** C2220489

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Jones Walker PAC

Mailing Address 201 St. Charles Ave.

City State Zip Code  
New Orleans LA 70170

FEC ID number of contributing federal political committee. **C** C00111534

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 1 / 2 0 1 0

**Transaction ID:** C2353187

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **6500.00**

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

**SCHEDULE A (FEC Form 3 )  
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Use separate schedule(s)  
for each category of the  
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(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

**A.** Full Name (Last, First, Middle Initial)  
KANSAS CITY SOUTHERN EMPLOYEE PAC  
Mailing Address 427 W 12TH STREET

City State Zip Code  
KANSAS CITY MO 64105

FEC ID number of contributing federal political committee. **C** C00139451

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 2 2 / 2 0 1 0

**Transaction ID:** C2235294

Amount of Each Receipt this Period  
3000.00

**B.** Full Name (Last, First, Middle Initial)  
LOCKRIDGE GRINDAL NAUEN POLITICAL FUND  
Mailing Address 100 WASHINGTON AVE SO SUITE 2200

City State Zip Code  
MINNEAPOLIS MN 55401

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 9358.02

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 1 8 / 2 0 1 0

**Transaction ID:** C2450487

Amount of Each Receipt this Period  
3000.00

**C.** Full Name (Last, First, Middle Initial)  
NATIONAL ASSOCIATION OF REALTORS  
Mailing Address 430 N MICHIGAN AVENUE

City State Zip Code  
CHICAGO IL 60611

FEC ID number of contributing federal political committee. **C** C70002563

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 0 7 / 2 0 1 0

**Transaction ID:** C2378742

Amount of Each Receipt this Period  
2000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **8000.00**

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

**SCHEDULE A (FEC Form 3 )  
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Use separate schedule(s)  
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 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

**A.** Full Name (Last, First, Middle Initial)  
NATIONAL EDUCATION ASSOCIATION  
Mailing Address 1201 16TH ST NW  
City WASHINGTON State DC Zip Code 20036  
FEC ID number of contributing federal political committee. **C** C70002209  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00  
Date of Receipt: 06 / 13 / 2010  
Transaction ID: C2442506  
Amount of Each Receipt this Period: 2000.00

**B.** Full Name (Last, First, Middle Initial)  
National Telecommunications Cooperative Assn  
Mailing Address 4121 Wilson Blvd.  
10th Floor  
City Arlington State VA Zip Code 22203  
FEC ID number of contributing federal political committee. **C** C00004473  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00  
Date of Receipt: 06 / 07 / 2010  
Transaction ID: C2378744  
Amount of Each Receipt this Period: 2000.00

**C.** Full Name (Last, First, Middle Initial)  
NORFOLK SOUTHERN CORPORATION GOOD GOVERNMENT FUND  
Mailing Address 1500 K Street NW  
Suite 375  
City Washington State DC Zip Code 20005  
FEC ID number of contributing federal political committee. **C** C00009282  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00  
Date of Receipt: 04 / 09 / 2010  
Transaction ID: C2221298  
Amount of Each Receipt this Period: 5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 9000.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

Use separate schedule(s)  
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(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

**A.** Full Name (Last, First, Middle Initial)  
NUCOR CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 2100 Rexford Road

City State Zip Code  
Charlotte NC 28211

FEC ID number of contributing federal political committee. **C** C00379628

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 7 / 2 0 1 0

**Transaction ID:** C2355864

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
OFFSHORE MARINE SERVICE ASSOCIATION PAC

Mailing Address 990 N CORPORATE DRIVE SUITE 210

City State Zip Code  
HARAHAN LA 70123

FEC ID number of contributing federal political committee. **C** C00455584

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 1 / 2 0 1 0

**Transaction ID:** C2353186

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Polsinelli PAC

Mailing Address 700 West 47th St  
Sutie 1000

City State Zip Code  
Kansas City MO 64112

FEC ID number of contributing federal political committee. **C** C00445981

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 7400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 2 / 2 0 1 0

**Transaction ID:** C2235295

Amount of Each Receipt this Period  
4900.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **6400.00**

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



**SCHEDULE A (FEC Form 3 )  
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11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

**A.**

Full Name (Last, First, Middle Initial)  
PORTLAND CEMENT ASSOCIATION INC. PCA PAC

Mailing Address 1130 Connecticut Avenue N.W.  
Suite 1250

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00237065

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt

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

Transaction ID: C2310099

Amount of Each Receipt this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)  
ROCKPAC

Mailing Address National Stone, Sand & Gravel Asso  
2101 Wilson Blvd

City State Zip Code  
Arlington VA 22201

FEC ID number of contributing federal political committee. **C** C00089458

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt

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

Transaction ID: C2226027

Amount of Each Receipt this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)  
SERVICE EMPLOYEES INTERNATIONAL UNION POLITICAL AC

Mailing Address 1313 L Street N W

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00004036

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 6 / 2 0 1 0

Transaction ID: C2236986

Amount of Each Receipt this Period

2500.00

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

7000.00

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

**SCHEDULE A (FEC Form 3 )  
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 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

**A.** Full Name (Last, First, Middle Initial)  
SRA INTERNATIONAL INC FUND FOR BETTER IT IN GOVERN

Mailing Address 4300 Fair Lakes Court

City State Zip Code  
Fairfax VA 22033

FEC ID number of contributing federal political committee. **C** C00393256

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 2 6 / 2 0 1 0

**Transaction ID:** C2453285

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
TRANSYSTEMS CORPORATION PAC

Mailing Address 2400 PERSHING ROAD SUITE 400

City State Zip Code  
KANSAS CITY MO 64108

FEC ID number of contributing federal political committee. **C** C00433672

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 6000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 2 2 / 2 0 1 0

**Transaction ID:** C2235291

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
United Parcel Service

Mailing Address 55 Glen Lake Parkway NE

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 6000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 0 5 / 2 0 1 0

**Transaction ID:** C2220368

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **8000.00**

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

**SCHEDULE A (FEC Form 3 )  
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FOR LINE NUMBER: PAGE 35 / 101  
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 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

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

Mailing Address Five Gateway Center

City State Zip Code  
Pittsburgh PA 15222

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  

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

**Transaction ID:** C2353181

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
WAL-MART STORES INC. PAC

Mailing Address 702 S.W. 8th Street

City State Zip Code  
Bentonville AR 72716

FEC ID number of contributing federal political committee. **C** C00093054

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  

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

**Transaction ID:** C2353112

Amount of Each Receipt this Period  
2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	7500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	86044.07

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

**A.** Full Name (Last, First, Middle Initial)  
CD 2280154422

Mailing Address 230 W Superior St  
CD 2280154422

City Duluth State MN Zip Code 55802-1916

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1478.54

Date of Receipt: 04 / 30 / 2010  
**Transaction ID: C2463863**  
 Amount of Each Receipt this Period: 37.72

**B.** Full Name (Last, First, Middle Initial)  
CD 2280154422

Mailing Address 230 W Superior St  
CD 2280154422

City Duluth State MN Zip Code 55802-1916

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1478.54

Date of Receipt: 05 / 28 / 2010  
**Transaction ID: C2463858**  
 Amount of Each Receipt this Period: 38.98

**C.** Full Name (Last, First, Middle Initial)  
CD 2280154422

Mailing Address 230 W Superior St  
CD 2280154422

City Duluth State MN Zip Code 55802-1916

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1478.54

Date of Receipt: 06 / 30 / 2010  
**Transaction ID: C2463856**  
 Amount of Each Receipt this Period: 37.73

**SUBTOTAL** of Receipts This Page (optional) ..... ► **114.43**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

**A.**

Full Name (Last, First, Middle Initial)  
Cd 4300311209

Mailing Address 230 W Superior St  
CD 4300311209

City Duluth State MN Zip Code 55802-1916

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1351.74

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 0 1 / 2 0 1 0

**Transaction ID: C2463860**

Amount of Each Receipt this Period  
81.23

**B.**

Full Name (Last, First, Middle Initial)  
Cd 4300311209

Mailing Address 230 W Superior St  
CD 4300311209

City Duluth State MN Zip Code 55802-1916

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1351.74

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 1 0

**Transaction ID: C2463862**

Amount of Each Receipt this Period  
78.62

**C.**

Full Name (Last, First, Middle Initial)  
Cd 4300311209

Mailing Address 230 W Superior St  
CD 4300311209

City Duluth State MN Zip Code 55802-1916

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1351.74

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 0 1 / 2 0 1 0

**Transaction ID: C2463854**

Amount of Each Receipt this Period  
81.23

**SUBTOTAL** of Receipts This Page (optional) ..... ► **241.08**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 101  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

**A.**

Full Name (Last, First, Middle Initial)  
Wells Fargo

Mailing Address 230 W Superior St

City Duluth State MN Zip Code 55802-2030

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1171.66

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 1 0

**Transaction ID:** C2463864

Amount of Each Receipt this Period  
2.52

**B.**

Full Name (Last, First, Middle Initial)  
Wells Fargo

Mailing Address 230 W Superior St

City Duluth State MN Zip Code 55802-2030

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1171.66

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 8 / 2 0 1 0

**Transaction ID:** C2463859

Amount of Each Receipt this Period  
14.73

**C.**

Full Name (Last, First, Middle Initial)  
Wells Fargo

Mailing Address 230 W Superior St

City Duluth State MN Zip Code 55802-2030

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1171.66

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 1 / 2 0 1 0

**Transaction ID:** C2463869

Amount of Each Receipt this Period  
44.86

**SUBTOTAL** of Receipts This Page (optional) ..... ► **62.11**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 39 / 101	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

<b>A.</b>	Full Name (Last, First, Middle Initial) Wells Fargo		Date of Receipt	
	Mailing Address 230 W Superior St		M M / D D / Y Y Y Y 06 / 30 / 2010	
	City	State	Zip Code	<b>Transaction ID:</b> C2463857
	Duluth	MN	55802-2030	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		C	26.01
	Name of Employer		Occupation	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1171.66		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	26.01
<b>TOTAL</b> This Period (last page this line number only) .....	443.63

# 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

<b>A.</b>	Full Name (Last, First, Middle Initial) American Express Merchant Account  Mailing Address World Financial Center 200 Vessy St.  City New York State NY Zip Code 10285  Purpose of Disbursement Bank Service Charge Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D303318 <b>Date of Disbursement:</b> M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 1 0  Amount of Each Disbursement this Period 63.95
<b>B.</b>	Full Name (Last, First, Middle Initial) American Express Merchant Account  Mailing Address World Financial Center 200 Vessy St.  City New York State NY Zip Code 10285  Purpose of Disbursement Bank Service Charge Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D319789 <b>Date of Disbursement:</b> M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 1 0  Amount of Each Disbursement this Period 63.96
<b>C.</b>	Full Name (Last, First, Middle Initial) American Express Merchant Account  Mailing Address World Financial Center 200 Vessy St.  City New York State NY Zip Code 10285  Purpose of Disbursement Bank Service Charge Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D319790 <b>Date of Disbursement:</b> M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 1 0  Amount of Each Disbursement this Period 145.83

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>273.74</b>
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

A.

Full Name (Last, First, Middle Initial)  
American Legion Post 550

Mailing Address 1703 Selby Ave

City State Zip Code  
Saint Paul MN 55104-6151

Purpose of Disbursement  
Advertising

Candidate Name

004  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D300915

Date of Disbursement

04 / 11 / 2010

Amount of Each Disbursement this Period

150.00

B.

Full Name (Last, First, Middle Initial)  
American Legion Post 550

Mailing Address 1703 Selby Ave

City State Zip Code  
Saint Paul MN 55104-6151

Purpose of Disbursement  
advertising

Candidate Name

004  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D316817

Date of Disbursement

06 / 11 / 2010

Amount of Each Disbursement this Period

300.00

C.

Full Name (Last, First, Middle Initial)  
AplusNet

Mailing Address 110 E Broward Blvd  
Ste 1650

City State Zip Code  
Ft Lauderdale FL 33301-3514

Purpose of Disbursement  
Domain registration

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D308953

Date of Disbursement

05 / 11 / 2010

Amount of Each Disbursement this Period

244.40

SUBTOTAL of Disbursements This Page (optional) ▶

694.40

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

<b>A.</b>	Full Name (Last, First, Middle Initial) David L Bard  Mailing Address 2009 Dunedin Ave.  City Duluth State MN Zip Code 55803  Purpose of Disbursement Employee Gross Wages Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D318202 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 1 0	Amount of Each Disbursement this Period  1090.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Bemidji Aviation Services, Inc.  Mailing Address PO Box 624  City Bemidji State MN Zip Code 56619  Purpose of Disbursement Travel: Air charter Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D318274 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 1 0	Amount of Each Disbursement this Period  1917.20
<b>C.</b>	Full Name (Last, First, Middle Initial) Bemidji Aviation Services, Inc.  Mailing Address PO Box 624  City Bemidji State MN Zip Code 56619  Purpose of Disbursement Air fare Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D316818 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 1 / 2 0 1 0	Amount of Each Disbursement this Period  1132.45

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

**4139.65**

**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

<b>A.</b>	Full Name (Last, First, Middle Initial) Bemidji Aviation Services, Inc.  Mailing Address PO Box 624  City Bemidji State MN Zip Code 56619  Purpose of Disbursement Air fare Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D314409 Date of Disbursement 06 / 04 / 2010  Amount of Each Disbursement this Period 1428.08  002 Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) Blue Cross Blue Shield of Minnesota  Mailing Address PO Box 64676  City Saint Paul State MN Zip Code 55164-0676  Purpose of Disbursement Employee health insurance Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D314277 Date of Disbursement 05 / 29 / 2010  Amount of Each Disbursement this Period 1167.00  001 Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) Californos  Mailing Address 4124 Pennsylvania  City Kansas City State MO Zip Code 64111  Purpose of Disbursement Catering Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D302797 Date of Disbursement 04 / 21 / 2010  Amount of Each Disbursement this Period 1153.23  003 Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3748.31
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

A.	Full Name (Last, First, Middle Initial) Mr. Blake Christopher Chaffee	Transaction ID: D302871 Date of Disbursement																			
	Mailing Address 321 Carriage Hill Dr W	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	6		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	6		2	0	1	0												
	City Hinckley State MN Zip Code 55037-7303	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Employee Gross Wages Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) Mr. Blake Christopher Chaffee	Transaction ID: D303438 Date of Disbursement																			
	Mailing Address 321 Carriage Hill Dr W	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>5</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	8		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	8		2	0	1	0												
	City Hinckley State MN Zip Code 55037-7303	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Employee Gross Wages Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) Mr. Blake Christopher Chaffee	Transaction ID: D314443 Date of Disbursement																			
	Mailing Address 321 Carriage Hill Dr W	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>6</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	7		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	7		2	0	1	0												
	City Hinckley State MN Zip Code 55037-7303	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Travel Candidate Name	<table border="1"><tr><td>002</td></tr></table> Category/Type	002																		
002																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>4305.33</td></tr></table>	4305.33
4305.33		
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Blake Christopher Chaffee  Mailing Address 321 Carriage Hill Dr W  City Hinckley State MN Zip Code 55037-7303  Purpose of Disbursement Employee Gross Wages Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  State: District:	Transaction ID: D309590 Date of Disbursement 05 / 24 / 2010  Amount of Each Disbursement this Period 2083.33  001 Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Blake Christopher Chaffee  Mailing Address 321 Carriage Hill Dr W  City Hinckley State MN Zip Code 55037-7303  Purpose of Disbursement Employee gross wages Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  State: District:	Transaction ID: D316729 Date of Disbursement 06 / 09 / 2010  Amount of Each Disbursement this Period 2083.33  001 Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Blake Christopher Chaffee  Mailing Address 321 Carriage Hill Dr W  City Hinckley State MN Zip Code 55037-7303  Purpose of Disbursement Employee Gross Wages Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  State: District:	Transaction ID: D318201 Date of Disbursement 06 / 24 / 2010  Amount of Each Disbursement this Period 2083.33  001 Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6249.99
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

A.	Full Name (Last, First, Middle Initial) Charter Communications  Mailing Address 302 E Superior St  City Duluth State MN Zip Code 55802-2120  Purpose of Disbursement Utilities Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D314353 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 1 0  Amount of Each Disbursement this Period 61.13  001 Category/ Type
B.	Full Name (Last, First, Middle Initial) Charter Communications  Mailing Address 302 E Superior St  City Duluth State MN Zip Code 55802-2120  Purpose of Disbursement Utilities Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D299716 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 1 0  Amount of Each Disbursement this Period 61.12  001 Category/ Type
C.	Full Name (Last, First, Middle Initial) Clarity  Mailing Address 394 S Lake Ave Marian Lansky  City Duluth State MN Zip Code 55802-2342  Purpose of Disbursement Printing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D309213 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 1 0  Amount of Each Disbursement this Period 105.00  004 Category/ Type

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

227.25

**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

<b>A.</b>	Full Name (Last, First, Middle Initial) DAN POWERS FOR CONGRESS		Transaction ID: D314352	
	Mailing Address P.O. Box 22040		Date of Disbursement 06 / 02 / 2010	
	City Eagan	State MN	Zip Code 55122	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution		011 Category/ Type	
Candidate Name Dan Powers, h				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MN District: 02				
<b>B.</b>	Full Name (Last, First, Middle Initial) Don L. Bye		Transaction ID: D316819	
	Mailing Address 1775 County Road 17 SW		Date of Disbursement 06 / 11 / 2010	
	City Pequot Lakes	State MN	Zip Code 56472-2214	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement Consulting fee		001 Category/ Type	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:				
<b>C.</b>	Full Name (Last, First, Middle Initial) Donna Victoria		Transaction ID: D318278	
	Mailing Address 1104 Merwood Dr.		Date of Disbursement 06 / 27 / 2010	
	City Takoma Park	State MD	Zip Code 20912	Amount of Each Disbursement this Period 14000.00
	Purpose of Disbursement Polling		005 Category/ Type	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:				

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

17000.00

**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

<b>A.</b>	Full Name (Last, First, Middle Initial) Duluth Window  Mailing Address 118 S 20th Ave E  City Duluth State MN Zip Code 55812-2101  Purpose of Disbursement Maintenance: windows Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D300914 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 1 0  Amount of Each Disbursement this Period 35.60  001 Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) H Street Self Storage  Mailing Address 624 H St NE  City Washington State DC Zip Code 20002-4309  Purpose of Disbursement rent Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D316854 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 1 0  Amount of Each Disbursement this Period 1440.00  001 Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) Hickory Tech  Mailing Address 221 East Hickory Street  City Mankato State MN Zip Code 56002  Purpose of Disbursement Telephone Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D314263 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 7 / 2 0 1 0  Amount of Each Disbursement this Period 40.90  Category/ Type

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

1516.50

**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

<b>A.</b> Full Name (Last, First, Middle Initial) Hickory Tech <hr/> Mailing Address 221 East Hickory Street <hr/> City Mankato State MN Zip Code 56002 Purpose of Disbursement Telephone Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D302894 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 1 0
	Amount of Each Disbursement this Period 56.85
	Category/ Type 001
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Hickory Tech <hr/> Mailing Address 221 East Hickory Street <hr/> City Mankato State MN Zip Code 56002 Purpose of Disbursement Telephone Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D318277 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 1 0
	Amount of Each Disbursement this Period 40.90
	Category/ Type 001
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Labor World <hr/> Mailing Address 2002 London Rd Rm 110 <hr/> City Duluth State MN Zip Code 55812-2144 Purpose of Disbursement Advertising Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D308973 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 1 0
	Amount of Each Disbursement this Period 292.05
	Category/ Type 004
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	389.80
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

<b>A.</b> Full Name (Last, First, Middle Initial) Lake Superior Images <hr/> Mailing Address 515 W 5th St <hr/> City Duluth State MN Zip Code 55806-2439 <hr/> Purpose of Disbursement Media Consultant Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D309963 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 1 0
	Amount of Each Disbursement this Period 12500.00
	Category/ Type 004
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Michaud Distributing, Inc. <hr/> Mailing Address 2923 Helm St <hr/> City Duluth State MN Zip Code 55806-1710 <hr/> Purpose of Disbursement Utilites Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D314477 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 1 0
	Amount of Each Disbursement this Period 8.63
	Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Michaud Distributing, Inc. <hr/> Mailing Address 2923 Helm St <hr/> City Duluth State MN Zip Code 55806-1710 <hr/> Purpose of Disbursement Utilities Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D308975 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 1 0
	Amount of Each Disbursement this Period 8.63
	Category/ Type 001
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

12517.26

**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

<p><b>A.</b> Full Name (Last, First, Middle Initial) Michaud Distributing, Inc.</p> <p>Mailing Address 2923 Helm St</p> <p>City Duluth State MN Zip Code 55806-1710</p> <p>Purpose of Disbursement Utilities: water Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D300529 <b>Date of Disbursement</b> 04 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 8.63</p> <p>001 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Mila's Catering</p> <p>Mailing Address 1720 Lanier PI NW</p> <p>City Washington State DC Zip Code 20009-2104</p> <p>Purpose of Disbursement Catering for Fundraiser Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D301271 <b>Date of Disbursement</b> 04 / 13 / 2010</p> <p>Amount of Each Disbursement this Period 592.00</p> <p>003 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Minnesota DFL</p> <p>Mailing Address 255 Plato Blvd E</p> <p>City Saint Paul State MN Zip Code 55107-1623</p> <p>Purpose of Disbursement Contribution - Humphrey Day Dinner Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D300530 <b>Date of Disbursement</b> 04 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>011 Category/ Type</p>

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

3100.63

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

<b>A.</b>	Full Name (Last, First, Middle Initial) Minnesota DFL  Mailing Address 255 Plato Blvd E  City Saint Paul State MN Zip Code 55107-1623  Purpose of Disbursement Advertising Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D308976 Date of Disbursement 05 / 11 / 2010  Amount of Each Disbursement this Period 250.00  Category/Type 004
<b>B.</b>	Full Name (Last, First, Middle Initial) Minnesota Secretary of State  Mailing Address 180 State 100 Constitution Avenue  City Saint Paul State MN Zip Code 55155-0001  Purpose of Disbursement Filing fee Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D309192 Date of Disbursement 05 / 14 / 2010  Amount of Each Disbursement this Period 300.00  Category/Type 001
<b>C.</b>	Full Name (Last, First, Middle Initial) Minnesota U.C. Fund  Mailing Address PO Box 821 MN Dept. of Economic Security  City Minneapolis State MN Zip Code 55480-0821  Purpose of Disbursement Unemployment tax Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D308955 Date of Disbursement 05 / 11 / 2010  Amount of Each Disbursement this Period 83.00  Category/Type 001

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	633.00
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

A.	Full Name (Last, First, Middle Initial) Minnesota U.C. Fund	Transaction ID: D308957 Date of Disbursement 05 / 11 / 2010
	Mailing Address PO Box 821 MN Dept. of Economic Security	Amount of Each Disbursement this Period 250.00
	City Minneapolis State MN Zip Code 55480-0821	
	Purpose of Disbursement Unemployment Tax Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) MSP Int'l Airport	Transaction ID: D318372 Date of Disbursement 06 / 29 / 2010
	Mailing Address Lindberg Terminal	Amount of Each Disbursement this Period 3.00
	City Saint Paul State MN Zip Code 55111	
	Purpose of Disbursement Travel Candidate Name	002 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

\* In-Kind

C.	Full Name (Last, First, Middle Initial) MSP Int'l Airport	Transaction ID: D318379 Date of Disbursement 06 / 29 / 2010
	Mailing Address Lindberg Terminal	Amount of Each Disbursement this Period 7.00
	City Saint Paul State MN Zip Code 55111	
	Purpose of Disbursement Travel Candidate Name	002 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

\* In-Kind

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	260.00
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

A.	Full Name (Last, First, Middle Initial) NDC	Transaction ID: D303380 Date of Disbursement 05 / 07 / 2010
	Mailing Address 30 Ivy St SE	Amount of Each Disbursement this Period 740.33
	City Washington State DC Zip Code 20003-4006	
	Purpose of Disbursement Catering Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) NDC	Transaction ID: D300167 Date of Disbursement 04 / 06 / 2010
	Mailing Address 30 Ivy St SE	Amount of Each Disbursement this Period 1179.08
	City Washington State DC Zip Code 20003-4006	
	Purpose of Disbursement Catering Candidate Name	003 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) NDC	Transaction ID: D301566 Date of Disbursement 04 / 14 / 2010
	Mailing Address 30 Ivy St SE	Amount of Each Disbursement this Period 879.08
	City Washington State DC Zip Code 20003-4006	
	Purpose of Disbursement Catering Candidate Name	007 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

2798.49

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

<b>A.</b>	Full Name (Last, First, Middle Initial) NDC  Mailing Address 30 Ivy St SE  City Washington State DC Zip Code 20003-4006  Purpose of Disbursement Catering Candidate Name <span style="float: right; border: 1px solid black; padding: 2px;">007</span> Category/Type  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  State: District:	Transaction ID: D301567 Date of Disbursement <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">412.51</div>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		1	4		2	0	1	0													
<b>B.</b>	Full Name (Last, First, Middle Initial) NGP Software, Inc.  Mailing Address 1225 Eye St. NW Suite 1225  City Washington State DC Zip Code 20005  Purpose of Disbursement Computer, data base consulting Candidate Name <span style="float: right; border: 1px solid black; padding: 2px;">001</span> Category/Type  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  State: District:	Transaction ID: D300168 Date of Disbursement <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">3750.00</div>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		0	6		2	0	1	0													
<b>C.</b>	Full Name (Last, First, Middle Initial) Oneida Realty Co  Mailing Address 306 W Superior St 1605 Alworth Building  City Duluth State MN Zip Code 55802-1803  Purpose of Disbursement Rent Candidate Name <span style="float: right; border: 1px solid black; padding: 2px;">001</span> Category/Type  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  State: District:	Transaction ID: D300169 Date of Disbursement <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">955.12</div>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		0	6		2	0	1	0													

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

**5117.63**

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Oneida Realty Co</p> <p>Mailing Address 306 W Superior St 1605 Alworth Building</p> <p>City Duluth State MN Zip Code 55802-1803</p> <p>Purpose of Disbursement Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D303321</p> <p>Date of Disbursement 05 / 05 / 2010</p> <p>Amount of Each Disbursement this Period 952.43</p> <p>001 Category/ Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Oneida Realty Co</p> <p>Mailing Address 306 W Superior St 1605 Alworth Building</p> <p>City Duluth State MN Zip Code 55802-1803</p> <p>Purpose of Disbursement Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D314354</p> <p>Date of Disbursement 06 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 955.12</p> <p>001 Category/ Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Dan Pearson</p> <p>Mailing Address 3808 Portland Ave</p> <p>City Minneapolis State MN Zip Code 55407-2521</p> <p>Purpose of Disbursement Employee gross wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D316728</p> <p>Date of Disbursement 06 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 1590.00</p> <p>001 Category/ Type</p>

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

3497.55

**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

<b>A.</b>	Full Name (Last, First, Middle Initial) Dan Pearson <hr/> Mailing Address 3808 Portland Ave <hr/> City Minneapolis State MN Zip Code 55407-2521 <hr/> Purpose of Disbursement Employee Gross Wages Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D318198 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 1590.00
<b>B.</b>	Full Name (Last, First, Middle Initial) QWEST <hr/> Mailing Address PO BOX 91154 <hr/> City Seattle State WA Zip Code 98111-9254 <hr/> Purpose of Disbursement Telephone Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D318276 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 484.89
<b>C.</b>	Full Name (Last, First, Middle Initial) Qwest <hr/> Mailing Address PO Box 173821 <hr/> City Denver State CO Zip Code 80217 <hr/> Purpose of Disbursement Telephone Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D316826 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 331.30

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2406.19
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

<b>A.</b>	Full Name (Last, First, Middle Initial) Qwest  Mailing Address PO Box 173821  City Denver State CO Zip Code 80217  Purpose of Disbursement Telephone Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  State: District:	<b>Transaction ID:</b> D309232 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 1 0  <b>Amount of Each Disbursement this Period</b> 185.91
<b>B.</b>	Full Name (Last, First, Middle Initial) Qwest  Mailing Address PO Box 173821  City Denver State CO Zip Code 80217  Purpose of Disbursement Telephone Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  State: District:	<b>Transaction ID:</b> D301024 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 1 0  <b>Amount of Each Disbursement this Period</b> 185.67
<b>C.</b>	Full Name (Last, First, Middle Initial) Carlotta Richard  Mailing Address 1017 8th St. NE  City Washington State DC Zip Code 20002  Purpose of Disbursement Employee Gross Wages Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  State: District:	<b>Transaction ID:</b> D300532 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 1 0  <b>Amount of Each Disbursement this Period</b> 1040.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1411.58</b>
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

<b>A.</b>	Full Name (Last, First, Middle Initial) Carlotta Richard <hr/> Mailing Address 1017 8th St. NE <hr/> City Washington State DC Zip Code 20002 <hr/> Purpose of Disbursement Employee Gross Wages Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D302845 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 1040.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Carlotta Richard <hr/> Mailing Address 1017 8th St. NE <hr/> City Washington State DC Zip Code 20002 <hr/> Purpose of Disbursement Employee Gross Wages Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D303437 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 1040.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Carlotta Richard <hr/> Mailing Address 1017 8th St. NE <hr/> City Washington State DC Zip Code 20002 <hr/> Purpose of Disbursement Employee Gross Wages Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D309588 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 1040.00

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

3120.00

**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

A.	Full Name (Last, First, Middle Initial) Carlotta Richard	Transaction ID: D316727 Date of Disbursement 06 / 09 / 2010
	Mailing Address 1017 8th St. NE	Amount of Each Disbursement this Period 1040.00
	City Washington State DC Zip Code 20002	
	Purpose of Disbursement Employee gross wages Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Carlotta Richard	Transaction ID: D318199 Date of Disbursement 06 / 24 / 2010
	Mailing Address 1017 8th St. NE	Amount of Each Disbursement this Period 1040.00
	City Washington State DC Zip Code 20002	
	Purpose of Disbursement Employee Gross Wages Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Sams Florist	Transaction ID: D309212 Date of Disbursement 05 / 17 / 2010
	Mailing Address 6616 Cody St Georgianne Sams	Amount of Each Disbursement this Period 64.00
	City Duluth State MN Zip Code 55807-1979	
	Purpose of Disbursement Flowers Candidate Name	012 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2144.00
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

<p><b>A.</b> Full Name (Last, First, Middle Initial) Sams Florist</p> <p>Mailing Address 6616 Cody St Georgianne Sams</p> <p>City Duluth State MN Zip Code 55807-1979</p> <p>Purpose of Disbursement Flowers</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D302801 <b>Date of Disbursement</b> 04 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 70.00</p> <p>012 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) SCB Enterprises</p> <p>Mailing Address PO Box 53007</p> <p>City Washington State DC Zip Code 20009-9007</p> <p>Purpose of Disbursement Equipment maintenance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D302800 <b>Date of Disbursement</b> 04 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 429.30</p> <p>001 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) SignRocket</p> <p>Mailing Address 340 Broadway Ave</p> <p>City Saint Paul Park State MN Zip Code 55071-1840</p> <p>Purpose of Disbursement Lawn signs</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D308979 <b>Date of Disbursement</b> 05 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 3817.25</p> <p>004 Category/ Type</p>

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

4316.55

**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

<b>A.</b> Full Name (Last, First, Middle Initial) Sprint PCS (BB) <hr/> Mailing Address PO Box 4181 <hr/> City Carol Stream State IL Zip Code 60197-4181 <hr/> Purpose of Disbursement Telephone Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D302802 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 1 0
	Amount of Each Disbursement this Period 228.59
	Category/ Type 001
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Sprint PCS (BB) <hr/> Mailing Address PO Box 4181 <hr/> City Carol Stream State IL Zip Code 60197-4181 <hr/> Purpose of Disbursement Telephone Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D309477 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 1 0
	Amount of Each Disbursement this Period 228.59
	Category/ Type 001
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Sprint PCS (BB) <hr/> Mailing Address PO Box 4181 <hr/> City Carol Stream State IL Zip Code 60197-4181 <hr/> Purpose of Disbursement Telephone Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D318275 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 1 0
	Amount of Each Disbursement this Period 228.59
	Category/ Type 001
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

685.77

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) SunTrust Merchant Services</p> <p>Mailing Address PO Box 6600</p> <p>City Hagerstown State MD Zip Code 21741</p> <p>Purpose of Disbursement Bank Service Charges</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D309198</p> <p>Date of Disbursement 05 / 17 / 2010</p> <p>Amount of Each Disbursement this Period 37.58</p> <p>001 Category/Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) SunTrust Merchant Services</p> <p>Mailing Address PO Box 6600</p> <p>City Hagerstown State MD Zip Code 21741</p> <p>Purpose of Disbursement Bank Service Charge</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D316823</p> <p>Date of Disbursement 06 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 36.40</p> <p>Category/Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) SunTrust Merchant Services</p> <p>Mailing Address PO Box 6600</p> <p>City Hagerstown State MD Zip Code 21741</p> <p>Purpose of Disbursement Bank Service Charges</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D301503</p> <p>Date of Disbursement 04 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 116.01</p> <p>001 Category/Type</p>

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

189.99

**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

<b>A.</b>	Full Name (Last, First, Middle Initial) T and F Properties LLC  Mailing Address PO Box 567  City North Branch State MN Zip Code 55056  Purpose of Disbursement Rent Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D308977 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 1 0	Amount of Each Disbursement this Period  1000.00
<b>B.</b>	Full Name (Last, First, Middle Initial) T and F Properties LLC  Mailing Address PO Box 567  City North Branch State MN Zip Code 55056  Purpose of Disbursement Rent Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D316820 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 1 / 2 0 1 0	Amount of Each Disbursement this Period  1000.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Union Resources  Mailing Address PO Box 16842  City Duluth State MN Zip Code 55802  Purpose of Disbursement Advertising Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D317992 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 1 0	Amount of Each Disbursement this Period  400.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2400.00</b>
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

<b>A.</b> Full Name (Last, First, Middle Initial) US Treasury <hr/> Mailing Address INTERNAL REVENUE SERVICE <hr/> City Ogden State UT Zip Code 84201-0001 <hr/> Purpose of Disbursement Income taxes Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D301655 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 1 0
	Amount of Each Disbursement this Period 69.43
	Category/ Type 001
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Verizon Wireless, Baltimore <hr/> Mailing Address PO Box 17464 <hr/> City Baltimore State MD Zip Code 21297 <hr/> Purpose of Disbursement Telephone Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D302741 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 1 0
	Amount of Each Disbursement this Period 42.29
	Category/ Type 001
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Verizon Wireless, Baltimore <hr/> Mailing Address PO Box 17464 <hr/> City Baltimore State MD Zip Code 21297 <hr/> Purpose of Disbursement Telephone Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D309285 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 1 0
	Amount of Each Disbursement this Period 41.94
	Category/ Type 001
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

153.66

**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

<b>A.</b> Full Name (Last, First, Middle Initial) Verizon Wireless, Baltimore <hr/> Mailing Address PO Box 17464 <hr/> City Baltimore State MD Zip Code 21297 <hr/> Purpose of Disbursement Telephone Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D317991 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 1 0
	Amount of Each Disbursement this Period 43.05
	Category/ Type 001
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Verizon <hr/> Mailing Address PO Box 790293 <hr/> City Saint Louis State MO Zip Code 63179-0293 <hr/> Purpose of Disbursement Telephone Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D309720 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 1 0
	Amount of Each Disbursement this Period 49.94
	Category/ Type 001
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Verizon <hr/> Mailing Address PO Box 790293 <hr/> City Saint Louis State MO Zip Code 63179-0293 <hr/> Purpose of Disbursement Telephone Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D303021 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 1 0
	Amount of Each Disbursement this Period 49.94
	Category/ Type 001
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	142.93
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# 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 / 101

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

<b>A.</b>	Full Name (Last, First, Middle Initial) Verizon Mailing Address PO Box 790293 City Saint Louis State MO Zip Code 63179-0293 Purpose of Disbursement Telephone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D318252 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 5 / 2 0 1 0	Amount of Each Disbursement this Period 49.94
<b>B.</b>	Full Name (Last, First, Middle Initial) VFW Post 1223 Mailing Address 1703 Selby Ave City Saint Paul State MN Zip Code 55104-6151 Purpose of Disbursement Advertising Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D318273 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 1 0	Amount of Each Disbursement this Period 150.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Waste Management Mailing Address PO Box 4648 City Carol Stream State IL Zip Code 60197-4648 Purpose of Disbursement Utilities Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D300170 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 1 0	Amount of Each Disbursement this Period 58.13

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>258.07</b>
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

<p><b>A.</b> Full Name (Last, First, Middle Initial) Waste Management</p> <p>Mailing Address PO Box 4648</p> <p>City Carol Stream State IL Zip Code 60197-4648</p> <p>Purpose of Disbursement Utilities</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D303319</p> <p>Date of Disbursement 05 / 05 / 2010</p> <p>Amount of Each Disbursement this Period 79.35</p> <p>001 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Waste Management</p> <p>Mailing Address PO Box 4648</p> <p>City Carol Stream State IL Zip Code 60197-4648</p> <p>Purpose of Disbursement Utilities</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D314355</p> <p>Date of Disbursement 06 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 79.13</p> <p>001 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Wells Fargo</p> <p>Mailing Address 230 W Superior St</p> <p>City Duluth State MN Zip Code 55802-1916</p> <p>Purpose of Disbursement Payroll liabilities - employer SS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D316821</p> <p>Date of Disbursement 06 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 580.73</p> <p>001 Category/ Type</p>

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

739.21

**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Wells Fargo</p> <p>Mailing Address 230 W Superior St</p> <p>City Duluth State MN Zip Code 55802-1916</p> <p>Purpose of Disbursement Payroll liabilities - employer Medicare</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D316822</p> <p>Date of Disbursement 06 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 271.64</p> <p>001 Category/ Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Wells Fargo</p> <p>Mailing Address 230 W Superior St</p> <p>City Duluth State MN Zip Code 55802-1916</p> <p>Purpose of Disbursement Payroll liabilities - employer SS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D303022</p> <p>Date of Disbursement 05 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 409.95</p> <p>001 Category/ Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Wells Fargo</p> <p>Mailing Address 230 W Superior St</p> <p>City Duluth State MN Zip Code 55802-1916</p> <p>Purpose of Disbursement Payroll liabilities - employer Medicare</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D303023</p> <p>Date of Disbursement 05 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 95.88</p> <p>001 Category/ Type</p>

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

777.47

**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

A.	Full Name (Last, First, Middle Initial) Wells Fargo Mailing Address 230 W Superior St City Duluth State MN Zip Code 55802-1916 Purpose of Disbursement Bank Service Charge Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D319791 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 1 / 2 0 1 0 Amount of Each Disbursement this Period 128.62 Category/Type 001
B.	Full Name (Last, First, Middle Initial) Wells Fargo Mailing Address PO Box 10347 City Des Moines State IA Zip Code 50306-0347 Purpose of Disbursement Bank Service Charge Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D319792 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 1 0 Amount of Each Disbursement this Period 144.58 Category/Type 001
C.	Full Name (Last, First, Middle Initial) Wells Fargo Mailing Address 230 W Superior St City Duluth State MN Zip Code 55802-2030 Purpose of Disbursement Bank Service Charge Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D319823 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 1 0 Amount of Each Disbursement this Period 184.58 Category/Type 001

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

**457.78**

**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

<p><b>A.</b> Full Name (Last, First, Middle Initial) Women's Summit Committee</p> <p>Mailing Address c/o Betsy O'Berry PO Box 876</p> <p>City Anoka State MN Zip Code 55303</p> <p>Purpose of Disbursement Donation Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D308974 <b>Date of Disbursement</b> 05 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>012 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bryan B. Yunis</p> <p>Mailing Address 241 W Arrowhead Rd</p> <p>City Duluth State MN Zip Code 55803-2456</p> <p>Purpose of Disbursement Employee Gross Wages Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D303436 <b>Date of Disbursement</b> 05 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 1560.00</p> <p>001 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bryan B. Yunis</p> <p>Mailing Address 241 W Arrowhead Rd</p> <p>City Duluth State MN Zip Code 55803-2456</p> <p>Purpose of Disbursement Employee Gross Wages Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D302844 <b>Date of Disbursement</b> 04 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 1560.00</p> <p>001 Category/ Type</p>

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

4120.00

**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Bryan B. Yunis</p> <p>Mailing Address 241 W Arrowhead Rd</p> <p>City Duluth State MN Zip Code 55803-2456</p> <p>Purpose of Disbursement Employee Gross Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D300531</p> <p>Date of Disbursement 04 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 1560.00</p> <p>001 Category/ Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Bryan B. Yunis</p> <p>Mailing Address 241 W Arrowhead Rd</p> <p>City Duluth State MN Zip Code 55803-2456</p> <p>Purpose of Disbursement Employee gross wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D316726</p> <p>Date of Disbursement 06 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 1560.00</p> <p>001 Category/ Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Bryan B. Yunis</p> <p>Mailing Address 241 W Arrowhead Rd</p> <p>City Duluth State MN Zip Code 55803-2456</p> <p>Purpose of Disbursement Employee gross wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D309589</p> <p>Date of Disbursement 05 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 1560.00</p> <p>001 Category/ Type</p>

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

4680.00

**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bryan B. Yunis</p> <p>Mailing Address 241 W Arrowhead Rd</p> <p>City Duluth State MN Zip Code 55803-2456</p> <p>Purpose of Disbursement Employee Gross Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D318200</p> <p>Date of Disbursement</p> <p><input type="text" value="06"/> / <input type="text" value="24"/> / <input type="text" value="2010"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1666.67"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Corporate Card (BC)</p> <p>Mailing Address PO Box 6415</p> <p>City Carol Stream State IL Zip Code 60197-6415</p> <p>Purpose of Disbursement Credit Card Payment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D303014</p> <p>Date of Disbursement</p> <p><input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2010"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="170.40"/></p> <p>Category/Type: <input type="text" value="002"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Best Buy</p> <p>Mailing Address 5105 Burning Tree Rd</p> <p>City Hermantown State MN Zip Code 55811</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D303025</p> <p>Date of Disbursement</p> <p><input type="text" value="05"/> / <input type="text" value="02"/> / <input type="text" value="2010"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="107.11"/></p> <p>Category/Type: <input type="text" value="001"/></p> <p><b>[MEMO ITEM]</b></p>

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

**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

A.

Full Name (Last, First, Middle Initial)  
Grandma's Saloon and Grill

Mailing Address 525 S Lake Ave

City Duluth State MN Zip Code 55802-2300

Purpose of Disbursement

Travel: meals

Candidate Name

002  
Category/  
Type

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: D303027

Date of Disbursement

05 / 02 / 2010

Amount of Each Disbursement this Period

21.58

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
MSP Int'l Airport

Mailing Address Lindberg Terminal

City Saint Paul State MN Zip Code 55111

Purpose of Disbursement

Parking

Candidate Name

002  
Category/  
Type

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: D303026

Date of Disbursement

05 / 02 / 2010

Amount of Each Disbursement this Period

3.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
Corporate Card (BR)

Mailing Address PO Box 6415

City Carol Stream State IL Zip Code 60197-6415

Purpose of Disbursement

Credit Card Patment

Candidate Name

002  
Category/  
Type

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: D303015

Date of Disbursement

04 / 30 / 2010

Amount of Each Disbursement this Period

2238.98

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

2238.98

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

<b>A.</b> Full Name (Last, First, Middle Initial) Delta Airlines <hr/> Mailing Address PO Box 20706 <hr/> City Atlanta State GA Zip Code 30320-6001 Purpose of Disbursement Travel: air fare Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D303033 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 683.80
	[MEMO ITEM]
	Category/Type 002
<b>B.</b> Full Name (Last, First, Middle Initial) Delta Airlines <hr/> Mailing Address PO Box 20706 <hr/> City Atlanta State GA Zip Code 30320-6001 Purpose of Disbursement Travel: air fare Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D303034 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 319.40
	[MEMO ITEM]
	Category/Type 002
<b>C.</b> Full Name (Last, First, Middle Initial) Delta Airlines <hr/> Mailing Address PO Box 20706 <hr/> City Atlanta State GA Zip Code 30320-6001 Purpose of Disbursement Travel: air fare Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D303035 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 860.40
	[MEMO ITEM]
	Category/Type 002

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

<p><b>A.</b> Full Name (Last, First, Middle Initial) Renaissance Hotels Denver</p> <p>Mailing Address 3801 Quebec St</p> <p>City Denver State CO Zip Code 80207-1629</p> <p>Purpose of Disbursement Travel: lodging</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D303031</p> <p>Date of Disbursement 05 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 126.36</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Tortilla Coast</p> <p>Mailing Address 400 1st St SE</p> <p>City Washington State DC Zip Code 20003-1826</p> <p>Purpose of Disbursement Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D303037</p> <p>Date of Disbursement 05 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 31.44</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Corporate Card (BY)</p> <p>Mailing Address PO Box 6415</p> <p>City Carol Stream State IL Zip Code 60197-6415</p> <p>Purpose of Disbursement Credit Card Paynmet</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D303016</p> <p>Date of Disbursement 04 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 2982.50</p>

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

2982.50

**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

<b>A.</b> Full Name (Last, First, Middle Initial) Delta Airlines Mailing Address PO Box 20706 City Atlanta State GA Zip Code 30320-6001 Purpose of Disbursement Travel: fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D303039 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 23.00
	[MEMO ITEM]
	Category/ Type 002

<b>B.</b> Full Name (Last, First, Middle Initial) Hyatt Regency Capitol Hill Mailing Address 400 New Jersey Ave NW City Washington State DC Zip Code 20001 Purpose of Disbursement Travel: lodging Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D303439 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 2515.25
	[MEMO ITEM]
	Category/ Type 002

<b>C.</b> Full Name (Last, First, Middle Initial) Hyatt Regency Capitol Hill Mailing Address 400 New Jersey Ave NW City Washington State DC Zip Code 20001 Purpose of Disbursement Travel: meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D303440 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 26.00
	[MEMO ITEM]
	Category/ Type 002

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

<p><b>A.</b> Full Name (Last, First, Middle Initial) MSP Int'l Airport</p> <p>Mailing Address Lindberg Terminal</p> <p>City Saint Paul State MN Zip Code 55111</p> <p>Purpose of Disbursement Travel: parking</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D303040 <b>Date of Disbursement</b> 05 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 108.00</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Tortilla Coast</p> <p>Mailing Address 400 1st St SE</p> <p>City Washington State DC Zip Code 20003-1826</p> <p>Purpose of Disbursement Travel: meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D303038 <b>Date of Disbursement</b> 05 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 75.69</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) USPS</p> <p>Mailing Address 515 W 1st St Postmaster</p> <p>City Duluth State MN Zip Code 55802-1302</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D303442 <b>Date of Disbursement</b> 05 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 2.51</p> <p><b>[MEMO ITEM]</b></p>

**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

A.	Full Name (Last, First, Middle Initial) Corporate Card (JES)	Transaction ID: D303017 Date of Disbursement
	Mailing Address po Box 6415	<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City Carol Stream State IL Zip Code 60197-6415	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Payment	<input type="text" value="1028.11"/>
	Candidate Name	<input type="text" value="002"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Delta Airlines	Transaction ID: D303446 Date of Disbursement
	Mailing Address PO Box 20706	<input type="text" value="05"/> / <input type="text" value="02"/> / <input type="text" value="2010"/>
	City Atlanta State GA Zip Code 30320-6001	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel: air fare	<input type="text" value="652.10"/>
	Candidate Name	<input type="text" value="002"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Delta Airlines	Transaction ID: D303447 Date of Disbursement
	Mailing Address PO Box 20706	<input type="text" value="05"/> / <input type="text" value="02"/> / <input type="text" value="2010"/>
	City Atlanta State GA Zip Code 30320-6001	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel: air fare	<input type="text" value="319.40"/>
	Candidate Name	<input type="text" value="002"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1028.11"/>
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

A.	Full Name (Last, First, Middle Initial) Harris Teeter  Mailing Address 1350 Potomac Ave SE,  City Washington State DC Zip Code 20003  Purpose of Disbursement Catering Candidate Name _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D303448 Date of Disbursement 05 / 02 / 2010  Amount of Each Disbursement this Period 31.10  <b>[MEMO ITEM]</b>
B.	Full Name (Last, First, Middle Initial) Corporate Card (JLO)  Mailing Address PO Box 6415  City Carol Stream State IL Zip Code 60197-6415  Purpose of Disbursement Credit Card Payment Candidate Name _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D303018 Date of Disbursement 04 / 30 / 2010  Amount of Each Disbursement this Period 1730.00
C.	Full Name (Last, First, Middle Initial) Delta Airlines  Mailing Address PO Box 20706  City Atlanta State GA Zip Code 30320-6001  Purpose of Disbursement Travel: air fare Candidate Name _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D303449 Date of Disbursement 05 / 02 / 2010  Amount of Each Disbursement this Period 552.10  <b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1730.00
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

A.	Full Name (Last, First, Middle Initial) Delta Airlines  Mailing Address PO Box 20706  City Atlanta State GA Zip Code 30320-6001  Purpose of Disbursement Travel: air fare Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D303451 Date of Disbursement 05 / 02 / 2010  Amount of Each Disbursement this Period 879.70  [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) Montmartre  Mailing Address 327 7th Street Southeast  City Washington State DC Zip Code 20003  Purpose of Disbursement Catering Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D303452 Date of Disbursement 05 / 02 / 2010  Amount of Each Disbursement this Period 255.20  [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) United Airlines  Mailing Address PO Box 66100  City Chicago State IL Zip Code 60666-0100  Purpose of Disbursement Travel: airline fee Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D303450 Date of Disbursement 05 / 02 / 2010  Amount of Each Disbursement this Period 43.00  [MEMO ITEM]

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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

<b>A.</b>	Full Name (Last, First, Middle Initial) Corporate Card (BR)	<b>Transaction ID:</b> D309604 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 1 0	
	Mailing Address PO Box 6415		
	City Carol Stream State IL Zip Code 60197-6415	<b>Amount of Each Disbursement this Period</b>	1926.28
	Purpose of Disbursement Credit Card Payment	002 Category/ Type	
	Candidate Name		
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b>	Full Name (Last, First, Middle Initial) Frontier Airlines	<b>Transaction ID:</b> D316875 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 1 0	
	Mailing Address 7001 Tower Road		
	City Denver State CO Zip Code 80249	<b>Amount of Each Disbursement this Period</b>	6.00
	Purpose of Disbursement travel: meals	002 Category/ Type	
	Candidate Name		
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b>
<b>C.</b>	Full Name (Last, First, Middle Initial) Grand Casino Hotel	<b>Transaction ID:</b> D316880 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 1 0	
	Mailing Address 777 Lady Luck Dr Rt. 3, Box 15		
	City Hinckley State MN Zip Code 55037-6400	<b>Amount of Each Disbursement this Period</b>	22.28
	Purpose of Disbursement Travel: meals	002 Category/ Type	
	Candidate Name		
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b>

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

1926.28

**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

A.

Full Name (Last, First, Middle Initial)  
Grand Casino Hotel

Mailing Address 777 Lady Luck Dr  
Rt. 3, Box 15

City Hinckley State MN Zip Code 55037-6400

Purpose of Disbursement  
Travel: lodging  
Candidate Name

002  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: District:

Transaction ID: D316885  
Date of Disbursement

05 / 24 / 2010

Amount of Each Disbursement this Period

166.13

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
Hilton Minneapolis

Mailing Address 1001 Marquette Ave.

City Minneapolis State MN Zip Code 55403

Purpose of Disbursement  
Travel: lodging  
Candidate Name

002  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: District:

Transaction ID: D316908  
Date of Disbursement

05 / 24 / 2010

Amount of Each Disbursement this Period

173.24

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
Holiday Inn - Duluth

Mailing Address 200 W 1st St

City Duluth State MN Zip Code 55802-1921

Purpose of Disbursement  
Travel: lodging  
Candidate Name

002  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: District:

Transaction ID: D316871  
Date of Disbursement

05 / 24 / 2010

Amount of Each Disbursement this Period

100.91

[MEMO ITEM]

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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

A.

Full Name (Last, First, Middle Initial)  
Holiday Inn - Duluth

Mailing Address 200 W 1st St

City Duluth State MN Zip Code 55802-1921

Purpose of Disbursement  
Travel: lodging

Candidate Name

002  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D316874  
Date of Disbursement

05 / 24 / 2010

Amount of Each Disbursement this Period

276.89

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
Midwest Airlines

Mailing Address 6744 South Howell Avenue

City Oak Creek State WI Zip Code 53154

Purpose of Disbursement  
Travel: meals

Candidate Name

002  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D316861  
Date of Disbursement

05 / 24 / 2010

Amount of Each Disbursement this Period

5.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
Midwest Airlines

Mailing Address 6744 South Howell Avenue

City Oak Creek State WI Zip Code 53154

Purpose of Disbursement  
Travel: air fare

Candidate Name

002  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D316901  
Date of Disbursement

05 / 24 / 2010

Amount of Each Disbursement this Period

423.90

[MEMO ITEM]

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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

<p><b>A.</b> Full Name (Last, First, Middle Initial) Corporate Card (BC)</p> <p>Mailing Address PO Box 6415</p> <p>City Carol Stream State IL Zip Code 60197-6415</p> <p>Purpose of Disbursement Credit Card Payment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D309605 <b>Date of Disbursement</b> 05 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 1074.06</p> <p>002 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Grand Casino Hotel</p> <p>Mailing Address 777 Lady Luck Dr Rt. 3, Box 15</p> <p>City Hinckley State MN Zip Code 55037-6400</p> <p>Purpose of Disbursement Travel: lodging</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D316913 <b>Date of Disbursement</b> 05 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 76.93</p> <p>002 Category/ Type</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Grandma's Saloon and Grill</p> <p>Mailing Address 525 S Lake Ave</p> <p>City Duluth State MN Zip Code 55802-2300</p> <p>Purpose of Disbursement Travel: meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D316910 <b>Date of Disbursement</b> 05 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 16.09</p> <p>002 Category/ Type</p> <p><b>[MEMO ITEM]</b></p>

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

1074.06

**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

A.	Full Name (Last, First, Middle Initial) Holiday Inn - Duluth	Transaction ID: D316911 Date of Disbursement 05 / 24 / 2010
	Mailing Address 200 W 1st St	Amount of Each Disbursement this Period 302.73
	City Duluth State MN Zip Code 55802-1921	
	Purpose of Disbursement Travel: lodging	002 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) MSP Int'l Airport	Transaction ID: D316916 Date of Disbursement 05 / 24 / 2010
	Mailing Address Lindberg Terminal	Amount of Each Disbursement this Period 13.00
	City Saint Paul State MN Zip Code 55111	
	Purpose of Disbursement Travel: parking	002 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Office Max	Transaction ID: D316914 Date of Disbursement 05 / 24 / 2010
	Mailing Address 125 SW 12th Street	Amount of Each Disbursement this Period 486.51
	City Forest Lake State MN Zip Code 55025	
	Purpose of Disbursement Office Equipment	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

<b>A.</b>	Full Name (Last, First, Middle Initial) Corporate Card (JES)	<b>Transaction ID:</b> D309607 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 1 0	
	Mailing Address po Box 6415		
	City Carol Stream State IL Zip Code 60197-6415	<b>Amount of Each Disbursement this Period</b>	961.33
	Purpose of Disbursement Credit Card Payment	<b>007</b>	Category/Type
	Candidate Name		
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010	
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b>	Full Name (Last, First, Middle Initial) Delta Airlines	<b>Transaction ID:</b> D316922 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 1 0	
	Mailing Address PO Box 20706		
	City Atlanta State GA Zip Code 30320-6001	<b>Amount of Each Disbursement this Period</b>	524.70
	Purpose of Disbursement Travel: air fare	<b>002</b>	Category/Type
	Candidate Name		
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010	
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b>
<b>C.</b>	Full Name (Last, First, Middle Initial) Hilton Minneapolis	<b>Transaction ID:</b> D316929 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 1 0	
	Mailing Address 1001 Marquette Ave.		
	City Minneapolis State MN Zip Code 55403	<b>Amount of Each Disbursement this Period</b>	164.80
	Purpose of Disbursement Travel: meals	<b>002</b>	Category/Type
	Candidate Name		
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010	
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>961.33</b>
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

A.	Full Name (Last, First, Middle Initial) Holiday Inn - Duluth	Transaction ID: D316925 Date of Disbursement 05 / 24 / 2010
	Mailing Address 200 W 1st St	Amount of Each Disbursement this Period 201.82
	City Duluth State MN Zip Code 55802-1921	
	Purpose of Disbursement Travel: lodging	002 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Corporate Card (BY)	Transaction ID: D309608 Date of Disbursement 05 / 24 / 2010
	Mailing Address PO Box 6415	Amount of Each Disbursement this Period 2719.02
	City Carol Stream State IL Zip Code 60197-6415	
	Purpose of Disbursement Credit Card Payment	002 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) AplusNet	Transaction ID: D316937 Date of Disbursement 05 / 24 / 2010
	Mailing Address 110 E Broward Blvd Ste 1650	Amount of Each Disbursement this Period 9.99
	City Ft Lauderdale State FL Zip Code 33301-3514	
	Purpose of Disbursement Computer Services	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2719.02
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

A.	Full Name (Last, First, Middle Initial) Grand Casino Hotel	Transaction ID: D316934 Date of Disbursement 05 / 24 / 2010
	Mailing Address 777 Lady Luck Dr Rt. 3, Box 15	Amount of Each Disbursement this Period 12.07
	City Hinckley State MN Zip Code 55037-6400	
	Purpose of Disbursement Travel: meals	002 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Grand Casino Hotel	Transaction ID: D316935 Date of Disbursement 05 / 24 / 2010
	Mailing Address 777 Lady Luck Dr Rt. 3, Box 15	Amount of Each Disbursement this Period 78.12
	City Hinckley State MN Zip Code 55037-6400	
	Purpose of Disbursement Travel: lodging	002 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Grand Casino Hotel	Transaction ID: D316936 Date of Disbursement 05 / 24 / 2010
	Mailing Address 777 Lady Luck Dr Rt. 3, Box 15	Amount of Each Disbursement this Period 2141.87
	City Hinckley State MN Zip Code 55037-6400	
	Purpose of Disbursement Catering	007 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

A.	Full Name (Last, First, Middle Initial) Hilton Minneapolis	Transaction ID: D316939 Date of Disbursement 05 / 24 / 2010
	Mailing Address 1001 Marquette Ave.	Amount of Each Disbursement this Period 146.29
	City Minneapolis State MN Zip Code 55403	
	Purpose of Disbursement Travel: lodging	002 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Hilton Minneapolis	Transaction ID: D316940 Date of Disbursement 05 / 24 / 2010
	Mailing Address 1001 Marquette Ave.	Amount of Each Disbursement this Period 159.29
	City Minneapolis State MN Zip Code 55403	
	Purpose of Disbursement Travel: Lodging	002 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Holiday Inn - Duluth	Transaction ID: D316930 Date of Disbursement 05 / 24 / 2010
	Mailing Address 200 W 1st St	Amount of Each Disbursement this Period 33.48
	City Duluth State MN Zip Code 55802-1921	
	Purpose of Disbursement Travel: meals	002 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

<b>A.</b>	Full Name (Last, First, Middle Initial) Wells Fargo Mailing Address PO Box 10347 City Des Moines State IA Zip Code 50306-0347 Purpose of Disbursement Bank Service Charge Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D316941 Date of Disbursement 05 / 24 / 2010 Amount of Each Disbursement this Period 35.00 [MEMO ITEM]
<b>B.</b>	Full Name (Last, First, Middle Initial) Corporate Card (JLO) Mailing Address PO Box 6415 City Carol Stream State IL Zip Code 60197-6415 Purpose of Disbursement Credit Card: credit Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D316943 Date of Disbursement 05 / 24 / 2010 Amount of Each Disbursement this Period -899.70
<b>C.</b>	Full Name (Last, First, Middle Initial) Embassy Suites Bloomington Mailing Address 2800 American Boulevard West City Minneapolis State MN Zip Code 55431 Purpose of Disbursement Travel:lodging Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D316944 Date of Disbursement 05 / 24 / 2010 Amount of Each Disbursement this Period 147.41 [MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	-899.70
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

A.	Full Name (Last, First, Middle Initial) Frontier Airlines	Transaction ID: D316945 Date of Disbursement 05 / 24 / 2010
	Mailing Address 7001 Tower Road	Amount of Each Disbursement this Period 3.00
	City Denver State CO Zip Code 80249	
	Purpose of Disbursement Travel: meals	002 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Midwest Airlines	Transaction ID: D316947 Date of Disbursement 05 / 24 / 2010
	Mailing Address 6744 South Howell Avenue	Amount of Each Disbursement this Period 156.20
	City Oak Creek State WI Zip Code 53154	
	Purpose of Disbursement Travel: air fare	002 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Wells Fargo	Transaction ID: D316948 Date of Disbursement 05 / 24 / 2010
	Mailing Address PO Box 10347	Amount of Each Disbursement this Period 33.33
	City Des Moines State IA Zip Code 50306-0347	
	Purpose of Disbursement Bank service charge	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

A.	Full Name (Last, First, Middle Initial) Corporate Card (BC)	Transaction ID: D318314 Date of Disbursement																			
	Mailing Address PO Box 6415	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>6</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	8		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	8		2	0	1	0												
	City Carol Stream State IL Zip Code 60197-6415	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Credit Card Payment	<table border="1"><tr><td>450.95</td></tr></table>	450.95																		
450.95																					
	Candidate Name	002 Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	State: District:																				

B.	Full Name (Last, First, Middle Initial) Hilton Minneapolis	Transaction ID: D318370 Date of Disbursement																			
	Mailing Address 1001 Marquette Ave.	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>6</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	9		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	9		2	0	1	0												
	City Minneapolis State MN Zip Code 55403	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Travel	<table border="1"><tr><td>12.00</td></tr></table>	12.00																		
12.00																					
	Candidate Name	002 Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]																			
	State: District:																				

C.	Full Name (Last, First, Middle Initial) Office Max	Transaction ID: D318376 Date of Disbursement																			
	Mailing Address 125 SW 12th Street	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>6</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	9		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	9		2	0	1	0												
	City Forest Lake State MN Zip Code 55025	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Office supplies	<table border="1"><tr><td>22.04</td></tr></table>	22.04																		
22.04																					
	Candidate Name	001 Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]																			
	State: District:																				

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>450.95</td></tr></table>	450.95
450.95		
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

A.	Full Name (Last, First, Middle Initial) Office Max	Transaction ID: D318369 Date of Disbursement
	Mailing Address 205 Balsam St N	<input type="text" value="06"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City Cambridge State MN Zip Code 55008	Amount of Each Disbursement this Period
	Purpose of Disbursement Office supplies	<input type="text" value="203.04"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Corporate Card (BR)	Transaction ID: D318315 Date of Disbursement
	Mailing Address PO Box 6415	<input type="text" value="06"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
	City Carol Stream State IL Zip Code 60197-6415	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Payment	<input type="text" value="815.45"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Bistro Bis	Transaction ID: D318386 Date of Disbursement
	Mailing Address 15 E St NW	<input type="text" value="06"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City Washington State DC Zip Code 20001-1501	Amount of Each Disbursement this Period
	Purpose of Disbursement Catering	<input type="text" value="784.90"/>
	Candidate Name	<input type="text" value="007"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="815.45"/>
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

A.	Full Name (Last, First, Middle Initial) USPS  Mailing Address First Floor Rayburn Building  City Washington State DC Zip Code 20515  Purpose of Disbursement Postage Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D318383 Date of Disbursement 06 / 29 / 2010  Amount of Each Disbursement this Period 20.60  [MEMO ITEM]	
B.	Full Name (Last, First, Middle Initial) Corporate Card (BY)  Mailing Address PO Box 6415  City Carol Stream State IL Zip Code 60197-6415  Purpose of Disbursement Credit Card Payment Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D318316 Date of Disbursement 06 / 28 / 2010  Amount of Each Disbursement this Period 2084.02	
C.	Full Name (Last, First, Middle Initial) Best Buy  Mailing Address 5105 Burning Tree Rd  City Hermantown State MN Zip Code 55811  Purpose of Disbursement Equipment Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D318399 Date of Disbursement 06 / 29 / 2010  Amount of Each Disbursement this Period 1031.23  [MEMO ITEM]	

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

2084.02

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

A.

Full Name (Last, First, Middle Initial)  
Grandma's Saloon and Grill

Mailing Address 525 S Lake Ave

City Duluth State MN Zip Code 55802-2300

Purpose of Disbursement

Travel: meals

Candidate Name

002  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D318397

Date of Disbursement

06 / 29 / 2010

Amount of Each Disbursement this Period

36.90

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
NewEgg.com

Mailing Address 9997 E. Rose Hills Road

City Whittier State CA Zip Code 90601

Purpose of Disbursement

Equipment

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D318408

Date of Disbursement

06 / 29 / 2010

Amount of Each Disbursement this Period

489.97

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
Office Max

Mailing Address 1023 w. Central Entrance

City Duluth State MN Zip Code 55811

Purpose of Disbursement

Office Supplies

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D318404

Date of Disbursement

06 / 29 / 2010

Amount of Each Disbursement this Period

52.86

[MEMO ITEM]

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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

A.	Full Name (Last, First, Middle Initial) USPS	Transaction ID: D318401 Date of Disbursement 06 / 29 / 2010
	Mailing Address 515 W 1st St Postmaster	Amount of Each Disbursement this Period 37.34
	City Duluth State MN Zip Code 55802-1302	
	Purpose of Disbursement Postage Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Corporate Card (JES)	Transaction ID: D318317 Date of Disbursement 06 / 28 / 2010
	Mailing Address po Box 6415	Amount of Each Disbursement this Period 50.40
	City Carol Stream State IL Zip Code 60197-6415	
	Purpose of Disbursement Credit Card Payment Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Corporate Card (JLO)	Transaction ID: D318318 Date of Disbursement 06 / 28 / 2010
	Mailing Address PO Box 6415	Amount of Each Disbursement this Period 451.78
	City Carol Stream State IL Zip Code 60197-6415	
	Purpose of Disbursement Credit Card Payment Candidate Name	002 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>502.18</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>113922.98</b>

**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

A.	Full Name (Last, First, Middle Initial) KIRKPATRICK FOR ARIZONA	Transaction ID: D309483
	Mailing Address PO Box 993	Date of Disbursement MM / DD / YYYY 05 / 21 / 2010
	City Prescott State AZ Zip Code 86302	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Candidate Name Hoin Ann Kirkpatrick Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 01 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type
B.	Full Name (Last, First, Middle Initial) Democratic Congresssional Campaign Cte	Transaction ID: D309476
	Mailing Address 430 S Capitol St SE	Date of Disbursement MM / DD / YYYY 05 / 20 / 2010
	City Washington State DC Zip Code 20003-4024	Amount of Each Disbursement this Period 25000.00
	Purpose of Disbursement Contribution from excess funds Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type
C.	Full Name (Last, First, Middle Initial) Democratic Congresssional Campaign Cte	Transaction ID: D300163
	Mailing Address 430 S Capitol St SE	Date of Disbursement MM / DD / YYYY 04 / 06 / 2010
	City Washington State DC Zip Code 20003-4024	Amount of Each Disbursement this Period 25000.00
	Purpose of Disbursement Contribution from excess funds Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>51000.00</b>
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

**A.** Full Name (Last, First, Middle Initial)  
**CITIZENS TO ELECT RICK LARSEN**

Mailing Address PO Box 326

City Everett State WA Zip Code 98206

Purpose of Disbursement  
Contribution

Candidate Name  
Hon Rick Larsen

Office Sought:  House  
 Senate  
 President

State: WA District: 02

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

**Transaction ID:** D309482

Date of Disbursement

/   /

Amount of Each Disbursement this Period

Category/  
Type

**B.** Full Name (Last, First, Middle Initial)  
**Mark Critz for Congress Committee**

Mailing Address 551 MAIN STREET SUITE 120

City JOHNSTOWN State PA Zip Code 15901

Purpose of Disbursement  
Contribution

Candidate Name  
Mark Critz

Office Sought:  House  
 Senate  
 President

State: PA District: 12

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Special

**Transaction ID:** D303295

Date of Disbursement

/   /

Amount of Each Disbursement this Period

Category/  
Type

**C.** Full Name (Last, First, Middle Initial)  
**Minnesota DFL - United Democratic Fund**

Mailing Address 255 Plato Blvd E

City Saint Paul State MN Zip Code 55107-1623

Purpose of Disbursement  
Contribution from excess funds

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

**Transaction ID:** D303012

Date of Disbursement

/   /

Amount of Each Disbursement this Period

Category/  
Type

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

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

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

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

FOR LINE NUMBER: (check only one)

PAGE 100 / 101

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

<p><b>A.</b> Full Name (Last, First, Middle Initial) Minnesota DFL - United Democratic Fund</p> <p>Mailing Address 255 Plato Blvd E</p> <p>City Saint Paul State MN Zip Code 55107-1623</p> <p>Purpose of Disbursement Contribution from excess funds</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D301505</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="15000.00"/></p> <p style="text-align: center;"><b>011</b> Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Minnesota DFL - United Democratic Fund</p> <p>Mailing Address 255 Plato Blvd E</p> <p>City Saint Paul State MN Zip Code 55107-1623</p> <p>Purpose of Disbursement Contribution from excess funds</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D318272</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="15000.00"/></p> <p style="text-align: center;"><b>011</b> Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) DRIEHAUS FOR CONGRESS</p> <p>Mailing Address 650 Fox Trails Way</p> <p>City Cincinnati State OH Zip Code 45233</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Hon. Steve Driehaus</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: OH District: 01</p>	<p><b>Transaction ID:</b> D303320</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="2000.00"/></p> <p style="text-align: center;"><b>011</b> Category/ Type</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="32000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value=""/>

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 101 / 101

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

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NAME OF COMMITTEE (In Full)  
Friends of Jim Oberstar

A.

Full Name (Last, First, Middle Initial)  
TIM RYAN FOR CONGRESS

Transaction ID: D309481

Date of Disbursement

Mailing Address 1600 Roosevelt Avenue  
Suite 804

<sup>M</sup>	<sup>M</sup>	/	<sup>D</sup>	<sup>D</sup>	/	<sup>Y</sup>	<sup>Y</sup>	<sup>Y</sup>	<sup>Y</sup>
0	5		2	1		2	0	1	0

City Niles State OH Zip Code 44446

Amount of Each Disbursement this Period

2000.00
---------

Purpose of Disbursement  
Contribution

011
Category/ Type

Candidate Name  
Hon. Tim Ryan

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: OH District: 17

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

2000.00
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TOTAL This Period (last page this line number only) ..... ►

104000.00
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