

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than 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

Republican Party of Minnesota

ADDRESS (number and street)

525 PARK STREET

SUITE 250

Check if different than previously reported. (ACC)

ST PAUL MN 55103

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIPCODE

C00001313

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

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 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

<input checked="" type="checkbox"/> Feb 20 (M2)	<input type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
<input type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/> Apr 20 (M4)	<input type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Jan 31 (YE)

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

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12S)	

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

(d) 30-Day **Post -Election** Report for the:

<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
--	---------------------------------------	--

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 01 01 2009 through 01 31 2009

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 David E. Sturrock

Signature of Treasurer Electronically Filed by David E. Sturrock Date 02 08 2011

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

Office Use Only										<b>FEC FORM 3X</b> (Rev. 12/2004)
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**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Republican Party of Minnesota

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		292733.43
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	292733.43									
(c) Total Receipts (from Line 19) .....	1195010.16	1195010.16								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	1487743.59	1487743.59								
7. Total Disbursements (from Line 31) .....	450787.31	450787.31								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	1036956.28	1036956.28								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	220486.88									

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

**For further information contact:**

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
Republican Party of Minnesota

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	39350.00	39350.00
(ii) Unitemized .....	344011.68	344011.68
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	383361.68	383361.68
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	5000.00	5000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	388361.68	388361.68
12. Transfers From Affiliated/Other Party Committees .....	393191.73	393191.73
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	166891.70	166891.70
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	246565.05	246565.05
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	1195010.16	1195010.16
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	1195010.16	1195010.16

## DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	9548.20	9548.20
(ii) Non-Federal Share.....	54106.63	54106.63
(b) Other Federal Operating Expenditures.....	77716.26	77716.26
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	141371.09	141371.09
22. Transfers to Affiliated/Other Party Committees.....	25.00	25.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	3310.98	3310.98
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	5700.00	5700.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	5700.00	5700.00
29. Other Disbursements.....	168467.51	168467.51
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	131912.73	131912.73
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	131912.73	131912.73
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	450787.31	450787.31
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	396680.68	396680.68

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	388361.68	388361.68
34. Total Contribution Refunds (from Line 28(d)) .....	5700.00	5700.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	382661.68	382661.68
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	87264.46	87264.46
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	166891.70	166891.70
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	-79627.24	-79627.24

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 154  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.** Full Name (Last, First, Middle Initial)  
Gertrude Agoglia

Mailing Address PO Box 150596

City State Zip Code  
Brooklyn NY 11215-0596

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

Name of Employer Retired Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 01 / 15 / 2009  
Transaction ID: 00320.C729373  
Amount of Each Receipt this Period: 225.00  
Receipt

**B.** Full Name (Last, First, Middle Initial)  
Robert Aikens

Mailing Address PO Box 1336

City State Zip Code  
Boca Grande FL 33921-1336

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

Name of Employer Robert And Ass LLC Occupation Real Estate

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt: 01 / 13 / 2009  
Transaction ID: 00320.C728196  
Amount of Each Receipt this Period: 1300.00  
Receipt

**C.** Full Name (Last, First, Middle Initial)  
Curtis Aljets

Mailing Address 4730 Westminster Cir

City State Zip Code  
Saint Paul MN 55122-2756

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

Name of Employer None Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 01 / 05 / 2009  
Transaction ID: 00320.C726462  
Amount of Each Receipt this Period: 300.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1825.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 154
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<b>A.</b>	Full Name (Last, First, Middle Initial) Ruth Arneson	Date of Receipt MM / DD / YYYY 01 / 13 / 2009
	Mailing Address 2101 Irving Ave S	Transaction ID: 00320.C728365
	City State Zip Code Minneapolis MN 55405-2522	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Professional Instrument co Occupation CLERK FINANCE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 250.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Maureen Brown	Date of Receipt MM / DD / YYYY 01 / 20 / 2009
	Mailing Address 6156 S Rockridge Blvd	Transaction ID: 00320.C732041
	City State Zip Code Oakland CA 94618-1861	Amount of Each Receipt this Period 225.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Self Occupation HOMEMAKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 225.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Harry Bruce	Date of Receipt MM / DD / YYYY 01 / 12 / 2009
	Mailing Address 1082 Los Jardines Cir	Transaction ID: 00320.C727759
	City State Zip Code El Paso TX 79912-1941	Amount of Each Receipt this Period 330.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Retired Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 330.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	805.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 154  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.**

Full Name (Last, First, Middle Initial)  
Edward Buerkle

Mailing Address P. O Box 278

City State Zip Code  
New York Mills MN 56567-4316

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

Name of Employer Farmers&merch Occupation BANKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  
MM / DD / YYYY  
01 / 15 / 2009

Transaction ID: 00320.C729735

Amount of Each Receipt this Period  
200.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Edward Buerkle

Mailing Address P. O Box 278

City State Zip Code  
New York Mills MN 56567-4316

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

Name of Employer Farmers&merch Occupation BANKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
01 / 23 / 2009

Transaction ID: 00320.C733589

Amount of Each Receipt this Period  
100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Joan Burnett

Mailing Address 4 Woodlyn Ln

City State Zip Code  
Bradbury CA 91008-1127

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

Name of Employer Self Occupation HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
01 / 13 / 2009

Transaction ID: 00320.C728287

Amount of Each Receipt this Period  
300.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **600.00**

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



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

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

FOR LINE NUMBER: PAGE 9 / 154  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.** Full Name (Last, First, Middle Initial)  
David Carlsen

Mailing Address 4340 Fremont Ave S

City State Zip Code  
Minneapolis MN 55409-1721

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
UMI Co Inc EXECUTIVE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 23 / 2009  
**Transaction ID:** 00320.C733430

Amount of Each Receipt this Period 250.00

Receipt

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

Mailing Address 1419 Virginia Ave

City State Zip Code  
Columbus OH 43212-3040

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Ohio State Universit Systems Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 01 / 20 / 2009  
**Transaction ID:** 00320.C731278

Amount of Each Receipt this Period 220.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Anne Clapp

Mailing Address 9100 Billings Rd

City State Zip Code  
Willoughby OH 44094-9574

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Self Housewife

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 01 / 20 / 2009  
**Transaction ID:** 00320.C732064

Amount of Each Receipt this Period 300.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... 770.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 154

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.**

Full Name (Last, First, Middle Initial)  
Kay Clausen

Mailing Address 360 Dreshertown Rd

City State Zip Code  
Fort Washington PA 19034-3009

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

Name of Employer Occupation  
Retired RETIRED

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

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

Transaction ID: 00320.C732372

Amount of Each Receipt this Period

500.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Carol Cooper

Mailing Address 585 S Valley Dr

City State Zip Code  
Las Cruces NM 88005-2733

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

Name of Employer Occupation  
Self ACCOUNTANT

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 1 3 / 2 0 0 9

Transaction ID: 00320.C778248

Amount of Each Receipt this Period

225.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Robert Craigmyle

Mailing Address 48 Boronda Rd

City State Zip Code  
Carmel Valley CA 93924-9443

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

Name of Employer Occupation  
Retired RETIRED

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 330.00

Date of Receipt

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

Transaction ID: 00320.C727745

Amount of Each Receipt this Period

330.00

Receipt

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

1055.00

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

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

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

FOR LINE NUMBER: PAGE 11 / 154  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.** Full Name (Last, First, Middle Initial)  
Robert Egelston  
Mailing Address PO Box 2622  
City Pasadena State CA Zip Code 91102-2622  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Inova Health Systems Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00  
Date of Receipt 01 / 29 / 2009  
Transaction ID: 00320.C781224  
Amount of Each Receipt this Period 300.00  
Receipt

**B.** Full Name (Last, First, Middle Initial)  
John Gailbraith  
Mailing Address 500 Crestwood Dr  
City Charlottesville State VA Zip Code 22903-4890  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2500.00  
Date of Receipt 01 / 23 / 2009  
Transaction ID: 00320.C733456  
Amount of Each Receipt this Period 2500.00  
Receipt

**C.** Full Name (Last, First, Middle Initial)  
Robert Goyne  
Mailing Address 116 Brook Valley Rd  
City Wilmington State DE Zip Code 19807-2004  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00  
Date of Receipt 01 / 23 / 2009  
Transaction ID: 00320.C733557  
Amount of Each Receipt this Period 500.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 3300.00  
**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 154  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.**

Full Name (Last, First, Middle Initial)  
Richard Green

Mailing Address 681 Lincoln Ave

City State Zip Code  
Winnetka IL 60093-2345

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

Name of Employer Briefing .com Occupation Management

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
550.00

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

Transaction ID: 00320.C727676

Amount of Each Receipt this Period  
550.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Wesley Grow

Mailing Address 248 Mineral St

City State Zip Code  
Pottstown PA 19464-3942

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

Name of Employer Retired Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 1 / 1 4 / 2 0 0 9

Transaction ID: 00320.C728640

Amount of Each Receipt this Period  
600.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Violet Hanna

Mailing Address 4123 Mary Ellen Ave

City State Zip Code  
Studio City CA 91604-2212

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

Name of Employer Retired Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
550.00

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

Transaction ID: 00320.C727793

Amount of Each Receipt this Period  
550.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1700.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 154  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.**

Full Name (Last, First, Middle Initial)  
Dru Hartranft

Mailing Address 2651 Covington Rd

City State Zip Code  
Del Mar CA 92014

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

Name of Employer Occupation  
ATK Systems Engineer

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
330.00

Date of Receipt

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

Transaction ID: 00320.C727505

Amount of Each Receipt this Period

330.00

Receipt

**B.**

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

Mailing Address 10330 325th St

City State Zip Code  
Vesta MN 56292-1104

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

Name of Employer Occupation  
Self FARMER FT

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
250.00

Date of Receipt

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

Transaction ID: 00320.C727595

Amount of Each Receipt this Period

250.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Morton Israel

Mailing Address 18901 Patrician Dr

City State Zip Code  
Villa Park CA 92861-4250

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

Name of Employer Occupation  
Self PHYSICIAN

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
255.00

Date of Receipt

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

Transaction ID: 00320.C729374

Amount of Each Receipt this Period

255.00

Receipt

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

835.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 154

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.**

Full Name (Last, First, Middle Initial)  
Morton Israel

Mailing Address 18901 Patrician Dr

City State Zip Code  
Villa Park CA 92861-4250

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

Name of Employer Self Occupation  
PHYSICIAN

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 505.00

Date of Receipt

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

Transaction ID: 00320.C732319

Amount of Each Receipt this Period

250.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Joanne Johnson

Mailing Address PO Box 66

City State Zip Code  
Riddle OR 97469-0066

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

Name of Employer Self Occupation  
Housewife

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 235.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 3 0 / 2 0 0 9

Transaction ID: 00320.C736176

Amount of Each Receipt this Period

235.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Robert Johnson

Mailing Address 1296 Aspen Way

City State Zip Code  
Saint Paul MN 55118-1750

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

Name of Employer None Occupation  
RETIRED

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

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

Transaction ID: 00320.C727628

Amount of Each Receipt this Period

400.00

Receipt

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

885.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 154
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<b>A.</b>	Full Name (Last, First, Middle Initial) Barbara Kasler		Date of Receipt
	Mailing Address 19169 Strathcona Dr		<input type="text" value="01"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Detroit	MI	48203-1486
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Self		Occupation HOMEMAKER	Transaction ID: 00320.C726373
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="300.00"/>
		<input type="text" value="300.00"/>	Receipt

<b>B.</b>	Full Name (Last, First, Middle Initial) Esther Kellogg		Date of Receipt
	Mailing Address 339 Mount Curve Blvd		<input type="text" value="01"/> / <input type="text" value="21"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Saint Paul	MN	55105-1217
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Homemaker		Occupation HOMEMAKER	Transaction ID: 00320.C732816
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="1000.00"/>
		<input type="text" value="1000.00"/>	Receipt

<b>C.</b>	Full Name (Last, First, Middle Initial) Adeline Kitt		Date of Receipt
	Mailing Address 7720 Oak Ave		<input type="text" value="01"/> / <input type="text" value="29"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Gary	IN	46403-1363
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Respite Care Services		Occupation Support Aide	Transaction ID: 00320.C735630
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="225.00"/>
		<input type="text" value="225.00"/>	Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="1525.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 16 / 154  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.** Full Name (Last, First, Middle Initial)  
Glenn Lefkovitz  
Mailing Address 112 Glenwood Ave  
City Winnetka State IL Zip Code 60093-1509  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Management Co  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 330.00  
Date of Receipt 01 / 16 / 2009  
Transaction ID: 00320.C761751  
Amount of Each Receipt this Period 330.00  
Receipt

**B.** Full Name (Last, First, Middle Initial)  
Glenn Lefkovitz  
Mailing Address 112 Glenwood Ave  
City Winnetka State IL Zip Code 60093-1509  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Management Co  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 430.00  
Date of Receipt 01 / 23 / 2009  
Transaction ID: 00320.C761752  
Amount of Each Receipt this Period 100.00  
Receipt

**C.** Full Name (Last, First, Middle Initial)  
Marie Lett  
Mailing Address 3940 Lett Ln  
City Burleson State TX Zip Code 76028-1742  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Rancher  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00  
Date of Receipt 01 / 20 / 2009  
Transaction ID: 00320.C732386  
Amount of Each Receipt this Period 250.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 680.00  
**TOTAL** This Period (last page this line number only) ..... ▶



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 154  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.**

Full Name (Last, First, Middle Initial)  
Alan Lewitzke

Mailing Address PO Box 249

City State Zip Code  
Mosinee WI 54455-0249

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

Name of Employer Occupation  
LNS Electric PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
01 / 20 / 2009

Transaction ID: 00320.C731244

Amount of Each Receipt this Period  
500.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
James Long

Mailing Address 2348 S Ocean Blvd

City State Zip Code  
Highland Beach FL 33487-1808

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

Name of Employer Occupation  
Retired RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
01 / 12 / 2009

Transaction ID: 00320.C727764

Amount of Each Receipt this Period  
250.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Bender Wallace Mackey

Mailing Address 10419 Cory Lake Dr

City State Zip Code  
Tampa FL 33647-2709

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

Name of Employer Occupation  
Sycamore Group Inc Financial Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt  
MM / DD / YYYY  
01 / 12 / 2009

Transaction ID: 00320.C786681

Amount of Each Receipt this Period  
330.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1080.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 154  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.** Full Name (Last, First, Middle Initial)  
Ken Malecha  
Mailing Address 8448 133rd Street Ct  
City Apple Valley State MN Zip Code 55124-9503  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Broker  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt 01 / 20 / 2009  
Transaction ID: 00320.C731539  
Amount of Each Receipt this Period 1000.00  
Receipt

**B.** Full Name (Last, First, Middle Initial)  
Daniel Martin  
Mailing Address RR 3 Box 115  
City Carrollton State IL Zip Code 62016-9537  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1020.00  
Date of Receipt 01 / 12 / 2009  
Transaction ID: 00320.C804801  
Amount of Each Receipt this Period 1020.00  
Receipt

**C.** Full Name (Last, First, Middle Initial)  
R Craig Olson  
Mailing Address 6306 Huntover Ln  
City Rockville State MD Zip Code 20852-3672  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Oari Occupation Publisher  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00  
Date of Receipt 01 / 13 / 2009  
Transaction ID: 00320.C728288  
Amount of Each Receipt this Period 400.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2420.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 154  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.** Full Name (Last, First, Middle Initial)  
John Pagin  
Mailing Address PO Box 86  
City Howe State IN Zip Code 46746-0086  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00  
Date of Receipt 01 / 16 / 2009  
Transaction ID: 00320.C729802  
Amount of Each Receipt this Period 300.00  
Receipt

**B.** Full Name (Last, First, Middle Initial)  
Helen Peterson  
Mailing Address 509 Missouri St  
City San Francisco State CA Zip Code 94107-2836  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00  
Date of Receipt 01 / 13 / 2009  
Transaction ID: 00320.C787111  
Amount of Each Receipt this Period 500.00  
Receipt

**C.** Full Name (Last, First, Middle Initial)  
Peggy Pichelman  
Mailing Address 2920 Casco Point Rd  
City Wayzata State MN Zip Code 55391-9725  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Ardel Engineering Occupation Engineer  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00  
Date of Receipt 01 / 22 / 2009  
Transaction ID: 00320.C733064  
Amount of Each Receipt this Period 250.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1050.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 154

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.**

Full Name (Last, First, Middle Initial)  
Eugene Regad

Mailing Address 854 Riverview Dr

City State Zip Code  
Morgantown WV 26505-4660

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 01 / 13 / 2009

Transaction ID: 00320.C728194

Amount of Each Receipt this Period 300.00

Receipt

**B.**

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

Mailing Address 1621 Howard Ave

City State Zip Code  
Pottsville PA 17901-3214

FEC ID number of contributing federal political committee. C

Name of Employer Gilbertdon Occupation EXECUTIVE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 23 / 2009

Transaction ID: 00320.C733617

Amount of Each Receipt this Period 500.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Lunsford Richardson

Mailing Address 7 Indian Spring Rd

City State Zip Code  
Norwalk CT 06853-1304

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation Entrepreneur

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt 01 / 20 / 2009

Transaction ID: 00320.C732410

Amount of Each Receipt this Period 750.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... 1550.00

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

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

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

FOR LINE NUMBER: PAGE 21 / 154  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.** Full Name (Last, First, Middle Initial)  
Clarence Roeben

Mailing Address 16 Banks Blvd

City State Zip Code  
Silver Bay MN 55614-1339

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

Name of Employer Retired Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
01 / 13 / 2009

Transaction ID: 00320.C728312

Amount of Each Receipt this Period  
300.00

Receipt

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

Mailing Address 330 S Ocean Blvd Apt 3B

City State Zip Code  
Palm Beach FL 33480-4263

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

Name of Employer Retired Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
01 / 13 / 2009

Transaction ID: 00320.C728286

Amount of Each Receipt this Period  
250.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Rosemary Rummel

Mailing Address PO Box 64

City State Zip Code  
Oscar LA 70762-0064

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

Name of Employer Self Occupation ATTORNEY

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
MM / DD / YYYY  
01 / 14 / 2009

Transaction ID: 00320.C785913

Amount of Each Receipt this Period  
350.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **900.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 154  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.**

Full Name (Last, First, Middle Initial)  
Robert Rumpasa

Mailing Address 28W558 Hawthorne Ln

City State Zip Code  
West Chicago IL 60185-2474

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 07 / 2009

Transaction ID: 00320.C726895

Amount of Each Receipt this Period 1000.00

Receipt

**B.**

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

Mailing Address 719 Avocet Way

City State Zip Code  
Arroyo Grande CA 93420-5572

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation Sales Representative

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 01 / 23 / 2009

Transaction ID: 00320.C733314

Amount of Each Receipt this Period 300.00

Receipt

**C.**

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

Mailing Address 4354 Fawn Lake Dr

City State Zip Code  
Stacy MN 55079-9547

FEC ID number of contributing federal political committee. C

Name of Employer Cenex Harvest States Occupation Cfo

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 27 / 2009

Transaction ID: 00320.C734855

Amount of Each Receipt this Period 500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... 1800.00

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

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

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

FOR LINE NUMBER: PAGE 23 / 154  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.** Full Name (Last, First, Middle Initial)  
Kenneth Slater

Mailing Address 11 Sloans Curve Dr

City State Zip Code  
Palm Beach FL 33480-5215

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

Name of Employer Occupation  
Tremont Partners LLC Management

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
MM / DD / YYYY  
01 / 20 / 2009

**Transaction ID:** 00320.C731463

Amount of Each Receipt this Period  
550.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
George Spillman

Mailing Address 24 Pajarito Loop

City State Zip Code  
Santa Fe NM 87506-7217

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

Name of Employer Occupation  
Retired RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
MM / DD / YYYY  
01 / 15 / 2009

**Transaction ID:** 00320.C729693

Amount of Each Receipt this Period  
225.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Myles Tanenbaum

Mailing Address 1305 Wrenfield Way

City State Zip Code  
Villanova PA 19085-2061

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

Name of Employer Occupation  
Retired RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt  
MM / DD / YYYY  
01 / 20 / 2009

**Transaction ID:** 00320.C731279

Amount of Each Receipt this Period  
4000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4775.00**

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

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

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

FOR LINE NUMBER: PAGE 24 / 154  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.** Full Name (Last, First, Middle Initial)  
Catherine Terry  
Mailing Address 431 Creekside Ct  
City Willowbrook State IL Zip Code 60527-5492  
FEC ID number of contributing federal political committee. C  
Name of Employer Self Occupation HOMEMAKER  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00  
Date of Receipt 01 / 26 / 2009  
**Transaction ID:** 00320.C734118  
Amount of Each Receipt this Period 300.00  
Receipt

**B.** Full Name (Last, First, Middle Initial)  
Phyllis Thomas  
Mailing Address RR 4  
City Sewickley State PA Zip Code 15143  
FEC ID number of contributing federal political committee. C  
Name of Employer Homemaker Occupation HOMEMAKER  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00  
Date of Receipt 01 / 20 / 2009  
**Transaction ID:** 00320.C732284  
Amount of Each Receipt this Period 300.00  
Receipt

**C.** Full Name (Last, First, Middle Initial)  
Albert Tovar  
Mailing Address 4966 Kingston Way  
City San Jose State CA Zip Code 95130-2214  
FEC ID number of contributing federal political committee. C  
Name of Employer Retired Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 225.00  
Date of Receipt 01 / 28 / 2009  
**Transaction ID:** 00320.C735168  
Amount of Each Receipt this Period 225.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... 825.00  
**TOTAL** This Period (last page this line number only) .....



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

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

FOR LINE NUMBER: PAGE 25 / 154  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.** Full Name (Last, First, Middle Initial)  
Edwin Trusheim

Mailing Address 3330 Edinborough Way Apt 1511

City Edina State MN Zip Code 55435-5965

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

Name of Employer Retired Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 20 / 2009

Transaction ID: 00320.C731385

Amount of Each Receipt this Period 250.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Dean White

Mailing Address 1000 E 80th PI

City Merrillville State IN Zip Code 46410-5608

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

Name of Employer Whiteco Industries, Inc Occupation EXECUTIVE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 01 / 30 / 2009

Transaction ID: 00320.C735815

Amount of Each Receipt this Period 10000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Rodric Widger

Mailing Address 3402 W Suzanne Cir

City Springfield State MO Zip Code 65810-1034

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

Name of Employer Andreck Evans Law Firm Occupation Lawyer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 31 / 2009

Transaction ID: 00320.C816568

Amount of Each Receipt this Period 500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 10750.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 26 / 154	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<b>A.</b>	Full Name (Last, First, Middle Initial) Carol Wilson		Date of Receipt																					
	Mailing Address PO Box 2366		<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>1</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	2		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	1		2	2		2	0	0	9														
	City	State	Zip Code		<b>Transaction ID:</b> 00320.C807583																			
	Wichita	KS	67201-2366																					
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>		Amount of Each Receipt this Period																				
Name of Employer Education Over Land		Occupation Travel Agent		<input type="text" value="220.00"/>																				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		Receipt																				
		<input type="text" value="220.00"/>																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="220.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="39350.00"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 154

(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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

NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.**

Full Name (Last, First, Middle Initial)  
Targetcitizens Political Forum

Mailing Address 1000 Nicollet Mall

City State Zip Code  
Minneapolis MN 55403-2542

FEC ID number of contributing federal political committee. C C00098061

Name of Employer information requested Occupation  
..

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 1 / 3 0 / 2 0 0 9

Transaction ID: 00320.C736001

Amount of Each Receipt this Period  
5000.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">5000.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;">5000.00</span>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 154

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.**

Full Name (Last, First, Middle Initial)  
Republican National Committee - Rnc

Mailing Address 310 1st St SE

City State Zip Code  
Washington DC 20003-1885

FEC ID number of contributing federal political committee. **C** C00003418

Name of Employer information requested Occupation ..

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 2 8 / 2 0 0 9

Transaction ID: 00320.C735254

Amount of Each Receipt this Period

250000.00

Transfers From Affil./Aut-h.

**B.**

Full Name (Last, First, Middle Initial)  
MN Coleman Victory Committee

Mailing Address 7315 Wisconsin Ave Ste 310E

City State Zip Code  
Bethesda MD 20814-3221

FEC ID number of contributing federal political committee. **C** C00436428

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1034.94

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 2 8 / 2 0 0 9

Transaction ID: 00320.C757217

Amount of Each Receipt this Period

1034.94

Transfers From Affil./Aut-h.

**C.**

Full Name (Last, First, Middle Initial)  
McCain Victory

Mailing Address 228 S Washington St Ste 115

City State Zip Code  
Alexandria VA 22314-5408

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 142156.79

Date of Receipt

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

Transaction ID: 00320.C727627

Amount of Each Receipt this Period

142156.79

Transfers From Affil./Aut-h.

NOTE: McCain Victory Committee

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

393191.73

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

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

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

FOR LINE NUMBER: PAGE 29 / 154  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.** Full Name (Last, First, Middle Initial)  
Aldona Wos  
Mailing Address 806 Country Club Dr  
City Greensboro State NC Zip Code 27408-5601  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1350.00  
Date of Receipt 01 / 12 / 2009  
Transaction ID: 00320.C770220  
Amount of Each Receipt this Period 1350.00  
Transfer Memo  
**[MEMO ITEM]**  
NOTE: McCain Victory Comm-itee

**B.** Full Name (Last, First, Middle Initial)  
Cal Turner  
Mailing Address 138 2nd Ave N Suite 200  
City Nashville State TN Zip Code 37201-1926  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 475.00  
Date of Receipt 01 / 12 / 2009  
Transaction ID: 00320.C770263  
Amount of Each Receipt this Period 475.00  
Transfer Memo  
**[MEMO ITEM]**  
NOTE: McCain Victory Comm-itee

**C.** Full Name (Last, First, Middle Initial)  
William Clements  
Mailing Address 1901 N Akard St  
City Dallas State TX Zip Code 75201-2305  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00  
Date of Receipt 01 / 12 / 2009  
Transaction ID: 00320.C770246  
Amount of Each Receipt this Period 250.00  
Transfer Memo  
**[MEMO ITEM]**  
NOTE: McCain Victory Comm-itee

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 154

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	--	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.**

Full Name (Last, First, Middle Initial)  
Lawrence J. De George

Mailing Address 176 Spyglass Ln

City State Zip Code  
Jupiter FL 33477-4037

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

Name of Employer Occupation  
Retired RETIRED

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 7125.00

Date of Receipt

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

Transaction ID: 00320.C780842

Amount of Each Receipt this Period

2500.00

Transfer Memo

**[MEMO ITEM]**

NOTE: McCain Victory Comm-  
itee

**B.**

Full Name (Last, First, Middle Initial)  
Abigail Kawanakoa

Mailing Address 420 Kekau Pl

City State Zip Code  
Honolulu HI 96817-1755

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

Name of Employer Occupation  
Retired RETIRED

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1625.00

Date of Receipt

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

Transaction ID: 00320.C770252

Amount of Each Receipt this Period

1625.00

Transfer Memo

**[MEMO ITEM]**

NOTE: McCain Victory Comm-  
itee

**C.**

Full Name (Last, First, Middle Initial)  
Paul Baker

Mailing Address 3333 E Speedway Blvd

City State Zip Code  
Tucson AZ 85716-3935

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

Name of Employer Occupation  
None RETIRED

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1500.00

Date of Receipt

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

Transaction ID: 00320.C770243

Amount of Each Receipt this Period

1500.00

Transfer Memo

**[MEMO ITEM]**

NOTE: McCain Victory Comm-  
itee

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

0.00

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

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

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

FOR LINE NUMBER: PAGE 31 / 154  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.** Full Name (Last, First, Middle Initial)  
Lawrence J. De George

Mailing Address 176 Spyglass Ln

City State Zip Code  
Jupiter FL 33477-4037

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

Name of Employer Retired Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 7125.00

Date of Receipt 01 / 12 / 2009  
Transaction ID: 00320.C780841  
Amount of Each Receipt this Period 4625.00  
Transfer Memo  
**[MEMO ITEM]**  
NOTE: McCain Victory Committee

**B.** Full Name (Last, First, Middle Initial)  
Natalie Black

Mailing Address 9934 Weeks Ln

City State Zip Code  
Oostburg WI 53070-1937

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

Name of Employer Kohler Company Occupation ATTORNEY

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 01 / 12 / 2009  
Transaction ID: 00320.C770245  
Amount of Each Receipt this Period 3000.00  
Transfer Memo  
**[MEMO ITEM]**  
NOTE: McCain Victory Committee

**C.** Full Name (Last, First, Middle Initial)  
Lynn Horn

Mailing Address 57 Maria Rd

City State Zip Code  
Woodcliff Lake NJ 07677-8144

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

Name of Employer Self Occupation HOMEMAKER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2125.00

Date of Receipt 01 / 12 / 2009  
Transaction ID: 00320.C770251  
Amount of Each Receipt this Period 2125.00  
Transfer Memo  
**[MEMO ITEM]**  
NOTE: McCain Victory Committee

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 0.00

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

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

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

FOR LINE NUMBER: PAGE 32 / 154  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.** Full Name (Last, First, Middle Initial)  
Giovanna Miller

Mailing Address 17 DEEP VALLEY TRL

City State Zip Code  
Stamford CT 06903-

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

Name of Employer Self Occupation  
Self HOMEMAKER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2125.00

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

Transaction ID: 00320.C770255

Amount of Each Receipt this Period  
2125.00

Transfer Memo  
**[MEMO ITEM]**  
NOTE: McCain Victory Committee

**B.** Full Name (Last, First, Middle Initial)  
Michelle Trulaske

Mailing Address 9625 Ladue Rd

City State Zip Code  
Saint Louis MO 63124-1310

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

Name of Employer Self Occupation  
Self HOMEMAKER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2412.50

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

Transaction ID: 00320.C770224

Amount of Each Receipt this Period  
2412.50

Transfer Memo  
**[MEMO ITEM]**  
NOTE: McCain Victory Committee

**C.** Full Name (Last, First, Middle Initial)  
Tea Pollock

Mailing Address 427 Fairview Ave

City State Zip Code  
Westwood NJ 07675-1615

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

Name of Employer Self Occupation  
Self HOMEMAKER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2125.00

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

Transaction ID: 00320.C770256

Amount of Each Receipt this Period  
2125.00

Transfer Memo  
**[MEMO ITEM]**  
NOTE: McCain Victory Committee

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 154  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.** Full Name (Last, First, Middle Initial)  
Margaret Rothman  
Mailing Address 6320 W Maclaurin Dr  
City Tampa State FL Zip Code 33647-1162  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation HOMEMAKER  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 3000.00  
Date of Receipt 01 / 12 / 2009  
Transaction ID: 00320.C770258  
Amount of Each Receipt this Period 3000.00  
Transfer Memo  
**[MEMO ITEM]**  
NOTE: McCain Victory Comm-itee

**B.** Full Name (Last, First, Middle Initial)  
George Couch  
Mailing Address PO Box 50004  
City Watsonville State CA Zip Code 95077-5004  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Couch Distributing Co. Occupation PRESIDENT  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 7875.00  
Date of Receipt 01 / 12 / 2009  
Transaction ID: 00320.C770236  
Amount of Each Receipt this Period 7875.00  
Transfer Memo  
**[MEMO ITEM]**  
NOTE: McCain Victory Comm-itee

**C.** Full Name (Last, First, Middle Initial)  
David Mardigian  
Mailing Address 35980 Woodward Ave Ste 110 Suite 110  
City Bloomfield Hills State MI Zip Code 48304-0933  
FEC ID number of contributing federal political committee. **C**  
Name of Employer MCM Management Occupation PRESIDENT  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 4800.00  
Date of Receipt 01 / 12 / 2009  
Transaction ID: 00320.C770231  
Amount of Each Receipt this Period 4800.00  
Transfer Memo  
**[MEMO ITEM]**  
NOTE: McCain Victory Comm-itee

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 34 / 154  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.** Full Name (Last, First, Middle Initial)  
Peter Thiel

Mailing Address 1 Letterman Dr Bldg C  
Building C

City San Francisco State CA Zip Code 94129-1494

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

Name of Employer Clarium Capital Occupation PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 6750.00

Date of Receipt 01 / 12 / 2009  
Transaction ID: 00320.C770262  
Amount of Each Receipt this Period 6750.00  
Transfer Memo  
**[MEMO ITEM]**  
NOTE: McCain Victory Comm-itee

**B.** Full Name (Last, First, Middle Initial)  
Rex Sinquefield

Mailing Address 244Bent Walnut

City Westphalia State MO Zip Code 65085-

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

Name of Employer Show Me Institute Occupation PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 9250.00

Date of Receipt 01 / 12 / 2009  
Transaction ID: 00320.C770239  
Amount of Each Receipt this Period 9250.00  
Transfer Memo  
**[MEMO ITEM]**  
NOTE: McCain Victory Comm-itee

**C.** Full Name (Last, First, Middle Initial)  
R Penrod

Mailing Address 411 Claxton Glen Ct

City Dayton State OH Zip Code 45429-6000

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

Name of Employer Carlton Bates Corp. Occupation EXECUTIVE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 6550.00

Date of Receipt 01 / 12 / 2009  
Transaction ID: 00320.C770235  
Amount of Each Receipt this Period 6550.00  
Transfer Memo  
**[MEMO ITEM]**  
NOTE: McCain Victory Comm-itee

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 0.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 154  
(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.** Full Name (Last, First, Middle Initial)  
Jason Levecke

Mailing Address 8830 S 20th PI

City State Zip Code  
Phoenix AZ 85042-8157

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

Name of Employer Occupation  
MJKL Enterprises, L.L.C. EXECUTIVE

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 7500.00

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

**Transaction ID:** 00320.C770225

Amount of Each Receipt this Period  
2500.00

Transfer Memo  
**[MEMO ITEM]**  
NOTE: McCain Victory Comm-itee

**B.** Full Name (Last, First, Middle Initial)  
Jason Levecke

Mailing Address 8830 S 20th PI

City State Zip Code  
Phoenix AZ 85042-8157

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

Name of Employer Occupation  
MJKL Enterprises, L.L.C. EXECUTIVE

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 7500.00

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

**Transaction ID:** 00320.C770233

Amount of Each Receipt this Period  
5000.00

Transfer Memo  
**[MEMO ITEM]**  
NOTE: McCain Victory Comm-itee

**C.** Full Name (Last, First, Middle Initial)  
A. Scribante

Mailing Address 2969 Wulfurt Road

City State Zip Code  
Sanibel FL 33957-

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

Name of Employer Occupation  
Majers Corporation CEO

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

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

**Transaction ID:** 00320.C770227

Amount of Each Receipt this Period  
3000.00

Transfer Memo  
**[MEMO ITEM]**  
NOTE: McCain Victory Comm-itee

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 154
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<b>A.</b>	Full Name (Last, First, Middle Initial) Richard Brueckner	Date of Receipt MM / DD / YYYY 01 / 12 / 2009
	Mailing Address PO Box 1015	Transaction ID: 00320.C770240
	City State Zip Code Bedminster NJ 07921-1015	Amount of Each Receipt this Period 9250.00
	FEC ID number of contributing federal political committee. C	Transfer Memo
	Name of Employer Occupation Pershing LLC CEO	<b>[MEMO ITEM]</b> NOTE: McCain Victory Comm-itee
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 9250.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Gary Reamey	Date of Receipt MM / DD / YYYY 01 / 12 / 2009
	Mailing Address 121 St. Lawrence Drive	Transaction ID: 00320.C770222
	City State Zip Code Russia IL 99999-	Amount of Each Receipt this Period 2125.00
	FEC ID number of contributing federal political committee. C	Transfer Memo
	Name of Employer Occupation Edward Jones CEO	<b>[MEMO ITEM]</b> NOTE: McCain Victory Comm-itee
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2125.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Alfred Eckert	Date of Receipt MM / DD / YYYY 01 / 12 / 2009
	Mailing Address 500 Campus Dr	Transaction ID: 00320.C770228
	City State Zip Code Florham Park NJ 07932-1024	Amount of Each Receipt this Period 3000.00
	FEC ID number of contributing federal political committee. C	Transfer Memo
	Name of Employer Occupation GSC Group CEO	<b>[MEMO ITEM]</b> NOTE: McCain Victory Comm-itee
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 37 / 154  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.**

Full Name (Last, First, Middle Initial)  
Ken Mehlman

Mailing Address 1525 32nd St NW

City Washington State DC Zip Code 20007-3077

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

Name of Employer Akin Gump Strauss Hauer & Feld Occupation PARTNER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2009

Transaction ID: 00320.C770253

Amount of Each Receipt this Period 250.00

Transfer Memo

**[MEMO ITEM]**  
NOTE: McCain Victory Committee

**B.**

Full Name (Last, First, Middle Initial)  
Richard Gilliam

Mailing Address PO Box 820  
POBox 820

City Keswick State VA Zip Code 22947-0820

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

Name of Employer Cumberland Resources Corp. Occupation MANAGER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 01 / 12 / 2009

Transaction ID: 00320.C770221

Amount of Each Receipt this Period 1800.00

Transfer Memo

**[MEMO ITEM]**  
NOTE: McCain Victory Committee

**C.**

Full Name (Last, First, Middle Initial)  
Robert Rothman

Mailing Address 6320 W Maclaurin Dr

City Tampa State FL Zip Code 33647-1162

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

Name of Employer Black Diamond Group Occupation INVESTOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 01 / 12 / 2009

Transaction ID: 00320.C770260

Amount of Each Receipt this Period 1925.00

Transfer Memo

**[MEMO ITEM]**  
NOTE: McCain Victory Committee

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 154  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.** Full Name (Last, First, Middle Initial)  
Robert Rothman  
Mailing Address 6320 W Maclaurin Dr  
City Tampa State FL Zip Code 33647-1162  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Black Diamond Group Occupation INVESTOR  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 3000.00  
Date of Receipt 01 / 12 / 2009  
Transaction ID: 00320.C770259  
Amount of Each Receipt this Period 1075.00  
Transfer Memo  
**[MEMO ITEM]**  
NOTE: McCain Victory Comm-itee

**B.** Full Name (Last, First, Middle Initial)  
Gerald Ford  
Mailing Address 200 Crescent Ct Ste 1350 Suite 1350  
City Dallas State TX Zip Code 75201-6988  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Diamon A Ford Corp. Occupation INVESTOR  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 9250.00  
Date of Receipt 01 / 12 / 2009  
Transaction ID: 00320.C770238  
Amount of Each Receipt this Period 9250.00  
Transfer Memo  
**[MEMO ITEM]**  
NOTE: McCain Victory Comm-itee

**C.** Full Name (Last, First, Middle Initial)  
Edward Via  
Mailing Address 6541 Tallwood Dr  
City Roanoke State VA Zip Code 24018-7457  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation INVESTOR  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4800.00  
Date of Receipt 01 / 12 / 2009  
Transaction ID: 00320.C770232  
Amount of Each Receipt this Period 4800.00  
Transfer Memo  
**[MEMO ITEM]**  
NOTE: McCain Victory Comm-itee

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 154  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.** Full Name (Last, First, Middle Initial)  
John Tlapek

Mailing Address 8025 Maryland Ave Unit 7K  
Unit 7K

City State Zip Code  
Saint Louis MO 63105-3939

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

Name of Employer Occupation  
The Summit Equity Group Owner

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
575.00

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

Transaction ID: 00320.C770218

Amount of Each Receipt this Period  
575.00

Transfer Memo  
**[MEMO ITEM]**  
NOTE: McCain Victory Comm-  
itee

**B.** Full Name (Last, First, Middle Initial)  
Ira Rennert

Mailing Address 30 Rockefeller Plz

City State Zip Code  
New York NY 10112-0015

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

Name of Employer Occupation  
Renco Group Chairman

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
6550.00

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

Transaction ID: 00320.C770257

Amount of Each Receipt this Period  
6550.00

Transfer Memo  
**[MEMO ITEM]**  
NOTE: McCain Victory Comm-  
itee

**C.** Full Name (Last, First, Middle Initial)  
Mark Dedomenico

Mailing Address 4455 148th Ave NE

City State Zip Code  
Bellevue WA 98007-3120

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

Name of Employer Occupation  
Pro Sports Club Chairman

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1250.00

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

Transaction ID: 00320.C770219

Amount of Each Receipt this Period  
1250.00

Transfer Memo  
**[MEMO ITEM]**  
NOTE: McCain Victory Comm-  
itee

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **0.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 154  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.** Full Name (Last, First, Middle Initial)  
Leslie Gilliam

Mailing Address PO Box 820  
PO Box 820

City State Zip Code  
Keswick VA 22947-0820

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

Name of Employer Occupation  
Cumberland Resources Co. Director  
Inc.

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
8100.00

Date of Receipt  
MM / DD / YYYY  
01 / 12 / 2009

Transaction ID: 00320.C770237

Amount of Each Receipt this Period  
8100.00

Transfer Memo  
**[MEMO ITEM]**  
NOTE: McCain Victory Comm-  
itee

**B.** Full Name (Last, First, Middle Initial)  
Steven Cohen

Mailing Address 24 Fox Den Rd

City State Zip Code  
Mount Kisco NY 10549-3835

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

Name of Employer Occupation  
Elliott Associates Financial Advisor

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2125.00

Date of Receipt  
MM / DD / YYYY  
01 / 12 / 2009

Transaction ID: 00320.C770247

Amount of Each Receipt this Period  
2125.00

Transfer Memo  
**[MEMO ITEM]**  
NOTE: McCain Victory Comm-  
itee

**C.** Full Name (Last, First, Middle Initial)  
Michael Briseno

Mailing Address 3320 Sawtelle Blvd Apt 301  
Apt 301

City State Zip Code  
Los Angeles CA 90066-1633

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

Name of Employer Occupation  
Stanford University Medical Cen Surgeon

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2900.00

Date of Receipt  
MM / DD / YYYY  
01 / 12 / 2009

Transaction ID: 00320.C770226

Amount of Each Receipt this Period  
2900.00

Transfer Memo  
**[MEMO ITEM]**  
NOTE: McCain Victory Comm-  
itee

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 154  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.** Full Name (Last, First, Middle Initial)  
Keith Horn

Mailing Address 57 Maria Rd

City State Zip Code  
Woodcliff Lake NJ 07677-8144

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

Name of Employer  
Elliott Management Corporation  
Occupation  
Investment Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2125.00

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

Transaction ID: 00320.C770250

Amount of Each Receipt this Period  
2125.00

Transfer Memo  
**[MEMO ITEM]**  
NOTE: McCain Victory Committee

**B.** Full Name (Last, First, Middle Initial)  
Brian Miller

Mailing Address 17 Deep Valley Trl

City State Zip Code  
Stamford CT 06903-2729

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

Name of Employer  
Elliott Associates  
Occupation  
Portfolio Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2125.00

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

Transaction ID: 00320.C770254

Amount of Each Receipt this Period  
2125.00

Transfer Memo  
**[MEMO ITEM]**  
NOTE: McCain Victory Committee

**C.** Full Name (Last, First, Middle Initial)  
Carl Leveck

Mailing Address 2134 W Carson Rd

City State Zip Code  
Phoenix AZ 85041-6528

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

Name of Employer  
MJKL Enterprises  
Occupation  
COO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4450.00

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

Transaction ID: 00320.C770229

Amount of Each Receipt this Period  
4450.00

Transfer Memo  
**[MEMO ITEM]**  
NOTE: McCain Victory Committee

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

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

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

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

FOR LINE NUMBER: PAGE 42 / 154  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.** Full Name (Last, First, Middle Initial)  
Barry MacLean  
Mailing Address 1000 Allanson Rd  
City State Zip Code  
Mundelein IL 60060-3804  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
MacLean and Fogg Co President & CEO  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 4800.00  
Date of Receipt 01 / 12 / 2009  
Transaction ID: 00320.C770230  
Amount of Each Receipt this Period 4800.00  
Transfer Memo  
**[MEMO ITEM]**  
NOTE: McCain Victory Committee

**B.** Full Name (Last, First, Middle Initial)  
Duer Wagner  
Mailing Address 3100 W 7th St Ste 400  
City State Zip Code  
Fort Worth TX 76107-2793  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Self Oil & Gas Producer  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 575.00  
Date of Receipt 01 / 12 / 2009  
Transaction ID: 00320.C770242  
Amount of Each Receipt this Period 575.00  
Transfer Memo  
**[MEMO ITEM]**  
NOTE: McCain Victory Committee

**C.** Full Name (Last, First, Middle Initial)  
George Weisz  
Mailing Address 7752 E Via del Futuro  
City State Zip Code  
Scottsdale AZ 85258-4105  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
City of Phoenix Public Administration  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 25.00  
Date of Receipt 01 / 12 / 2009  
Transaction ID: 00320.C770264  
Amount of Each Receipt this Period 25.00  
Transfer Memo  
**[MEMO ITEM]**  
NOTE: McCain Victory Committee

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 0.00  
**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 / 154  
 (check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.** Full Name (Last, First, Middle Initial)  
Marissa Briseno

Mailing Address 3320 Sawtelle Blvd  
Apt 301

City State Zip Code  
Los Angeles CA 90066-1632

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

Name of Employer Occupation  
MJKL Enterprises Inc. Director of Loss Prevention

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2300.00

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

Transaction ID: 00320.C770223

Amount of Each Receipt this Period  
2300.00

Transfer Memo  
**[MEMO ITEM]**  
NOTE: McCain Victory Comm-itee

**B.** Full Name (Last, First, Middle Initial)  
Dan Hughes

Mailing Address PO Box 669

City State Zip Code  
Beeville TX 78104-0669

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

Name of Employer Occupation  
Dan A. Hughes Co, L.P. Independent Oil Operator

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5300.00

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

Transaction ID: 00320.C770234

Amount of Each Receipt this Period  
5300.00

Transfer Memo  
**[MEMO ITEM]**  
NOTE: McCain Victory Comm-itee

**C.** Full Name (Last, First, Middle Initial)  
Shani Studnik

Mailing Address 1101 Harbor Ct

City State Zip Code  
Hollywood FL 33019-5031

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

Name of Employer Occupation  
Self Dermatologist

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 9250.00

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

Transaction ID: 00320.C770241

Amount of Each Receipt this Period  
9250.00

Transfer Memo  
**[MEMO ITEM]**  
NOTE: McCain Victory Comm-itee

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00

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

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

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

FOR LINE NUMBER: PAGE 44 / 154

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.**

Full Name (Last, First, Middle Initial)  
Alice Baker

Mailing Address 3333 E Speedway Blvd

City State Zip Code  
Tucson AZ 85716-3935

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

Name of Employer Occupation  
Self Fundraising Consultant

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 9250.00

Date of Receipt

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

Transaction ID: 00320.C770244

Amount of Each Receipt this Period

9250.00

Transfer Memo

**[MEMO ITEM]**  
NOTE: McCain Victory Comm-  
itee

**B.**

Full Name (Last, First, Middle Initial)  
McCain Victory Unitemized

Mailing Address

City State Zip Code  
Minneapolis MN 55405-

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 43.75

Date of Receipt

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

Transaction ID: 00320.C770214

Amount of Each Receipt this Period

43.75

Transfer Memo

**[MEMO ITEM]**  
NOTE: McCain Victory Comm-  
itee

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

0.00

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

393191.73

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 154
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<b>A.</b>	Full Name (Last, First, Middle Initial) American Express	Date of Receipt MM / DD / YYYY 01 / 28 / 2009
	Mailing Address 20002 N 19th Ave	Transaction ID: 00320.C735253
	City State Zip Code Phoenix AZ 85027-4250	Amount of Each Receipt this Period 164111.60
	FEC ID number of contributing federal political committee. <b>C</b>	Offsets to Operating Expenditure
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 164111.60	

<b>B.</b>	Full Name (Last, First, Middle Initial) US Post Office	Date of Receipt MM / DD / YYYY 01 / 16 / 2009
	Mailing Address 401 Kellogg Blvd E	Transaction ID: 00320.C730249
	City State Zip Code Saint Paul MN 55101-	Amount of Each Receipt this Period 907.20
	FEC ID number of contributing federal political committee. <b>C</b>	Offsets to Operating Expenditure
Name of Employer information requested	Occupation ..	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 907.20	Note: vendor refund

<b>C.</b>	Full Name (Last, First, Middle Initial) US Post Office	Date of Receipt MM / DD / YYYY 01 / 16 / 2009
	Mailing Address 401 Kellogg Blvd E	Transaction ID: 00320.C730248
	City State Zip Code Saint Paul MN 55101-	Amount of Each Receipt this Period 1171.80
	FEC ID number of contributing federal political committee. <b>C</b>	Offsets to Operating Expenditure
Name of Employer information requested	Occupation ..	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2079.00	note: vendor refund

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>166190.60</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 154  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.** Full Name (Last, First, Middle Initial)  
US Post Office

Mailing Address 401 Kellogg Blvd E

City	State	Zip Code
Saint Paul	MN	55101-

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

Name of Employer information requested	Occupation
	..

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼

2780.10

Date of Receipt

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

Transaction ID: 00320.C731864

Amount of Each Receipt this Period

701.10

Offsets to Operating Expenditure

note:vendor refund

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	701.10
<b>TOTAL</b> This Period (last page this line number only) .....	▶	166891.70

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 154

(check only one)

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

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

NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.**

Full Name (Last, First, Middle Initial)  
Alliance Bank  
Mailing Address 444 Cedar St

City State Zip Code  
Saint Paul MN 55101-2179

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

Name of Employer Occupation  
..

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
287.55

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 3 0 / 2 0 0 9

Transaction ID: 00320.C757310

Amount of Each Receipt this Period

287.55

Other Receipt

Note: Interest Income

**B.**

Full Name (Last, First, Middle Initial)  
Charles Albers  
Mailing Address 340 S Palm Ave

City State Zip Code  
Sarasota FL 34236-6723

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

Name of Employer Occupation  
Retired RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 0 6 / 2 0 0 9

Transaction ID: 00320.C756896

Amount of Each Receipt this Period

1000.00

Exempt Legal/Accounting Serv.

**[MEMO ITEM]**

NOTE: Coleman MN Recount

**C.**

Full Name (Last, First, Middle Initial)  
Charles Albers  
Mailing Address 340 S Palm Ave

City State Zip Code  
Sarasota FL 34236-6723

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

Name of Employer Occupation  
Retired RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 8 / 2 0 0 9

Transaction ID: 00320.C757056

Amount of Each Receipt this Period

2000.00

Exempt Legal/Accounting Serv.

**[MEMO ITEM]**

NOTE: Coleman MN Recount

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

287.55

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 154  
 (check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.** Full Name (Last, First, Middle Initial)  
George Anderson

Mailing Address 11412 Mississippi Dr N

City State Zip Code  
Champlin MN 55316-3508

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

Name of Employer Occupation  
Crown Iron Works VICE PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 1 / 2 8 / 2 0 0 9

Transaction ID: 00320.C756919

Amount of Each Receipt this Period  
2700.00

Exempt Legal/Accounting Serv.

**[MEMO ITEM]**  
NOTE: Coleman MN Recount

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

Mailing Address 3054 Gordon Dr

City State Zip Code  
Naples FL 34102-7861

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

Name of Employer Occupation  
API Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 1 / 2 8 / 2 0 0 9

Transaction ID: 00320.C757024

Amount of Each Receipt this Period  
7700.00

Exempt Legal/Accounting Serv.

**[MEMO ITEM]**  
NOTE: Coleman MN Recount

**C.** Full Name (Last, First, Middle Initial)  
James Booth

Mailing Address PO Box 1387

City State Zip Code  
Inez KY 41224-1387

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

Name of Employer Occupation  
MATRIE Energy Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 1 / 0 7 / 2 0 0 9

Transaction ID: 00320.C756901

Amount of Each Receipt this Period  
10000.00

Exempt Legal/Accounting Serv.

**[MEMO ITEM]**  
NOTE: Coleman MN Recount

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

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



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

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

FOR LINE NUMBER: PAGE 49 / 154  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.** Full Name (Last, First, Middle Initial)  
Thomas S. Everist  
Mailing Address 709 E Tomar Rd  
City State Zip Code  
Sioux Falls SD 57105-7053  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
The Everist Company PRESIDENT  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 0.00  
Date of Receipt 01 / 06 / 2009  
Transaction ID: 00320.C756895  
Amount of Each Receipt this Period 2700.00  
Exempt Legal/Accounting Serv.  
[MEMO ITEM]  
NOTE: Coleman MN Recount

**B.** Full Name (Last, First, Middle Initial)  
Lisa Marie Falcone  
Mailing Address 22 E 67th St  
City State Zip Code  
New York NY 10065-5805  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Self HOMEMAKER  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 0.00  
Date of Receipt 01 / 06 / 2009  
Transaction ID: 00320.C756889  
Amount of Each Receipt this Period 10000.00  
Exempt Legal/Accounting Serv.  
[MEMO ITEM]  
NOTE: Coleman MN Recount

**C.** Full Name (Last, First, Middle Initial)  
Philip Falcone  
Mailing Address 22 E 67th St  
City State Zip Code  
New York NY 10065-5805  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Harbringer Capital Finance  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 0.00  
Date of Receipt 01 / 06 / 2009  
Transaction ID: 00320.C756890  
Amount of Each Receipt this Period 10000.00  
Exempt Legal/Accounting Serv.  
[MEMO ITEM]  
NOTE: Coleman MN Recount

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 0.00  
**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 154
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<b>A.</b>	Full Name (Last, First, Middle Initial) Joseph Fogg	Date of Receipt MM / DD / YYYY 01 / 07 / 2009
	Mailing Address 4295 Cutlass Ln	Transaction ID: 00320.C756902
	City State Zip Code Naples FL 34102-7960	Amount of Each Receipt this Period 10000.00
	FEC ID number of contributing federal political committee. C	Exempt Legal/Accounting Serv. [MEMO ITEM] NOTE: Coleman MN Recount
Name of Employer JG Fogg & Company	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Food Marketing Institute PAC	Date of Receipt MM / DD / YYYY 01 / 06 / 2009
	Mailing Address 655 15th St NW	Transaction ID: 00320.C781371
	City State Zip Code Washington DC 20005-5701	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C C00014555	Exempt Legal/Accounting Serv. [MEMO ITEM] NOTE: Coleman MN Recount
Name of Employer information requested	Occupation ..	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Michael Gorman	Date of Receipt MM / DD / YYYY 01 / 28 / 2009
	Mailing Address 5100 Mirror Lakes Dr	Transaction ID: 00320.C756998
	City State Zip Code Edina MN 55436-1342	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	Exempt Legal/Accounting Serv. [MEMO ITEM] NOTE: Coleman MN Recount
Name of Employer St Paul Venture Capital	Occupation EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 51 / 154  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.** Full Name (Last, First, Middle Initial)  
Dian Graves-Stai

Mailing Address 400 Pine St Ste 100  
Suite 100

City State Zip Code  
Abilene TX 79601-5108

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

Name of Employer Retired Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
MM / DD / YYYY  
01 / 28 / 2009

Transaction ID: 00320.C756903

Amount of Each Receipt this Period  
2000.00

Exempt Legal/Accounting Serv.

**[MEMO ITEM]**  
NOTE: Coleman MN Recount

**B.** Full Name (Last, First, Middle Initial)  
Bradley Hughes

Mailing Address 884 Iron Works Pike

City State Zip Code  
Lexington KY 40511-9410

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
MM / DD / YYYY  
01 / 06 / 2009

Transaction ID: 00320.C756897

Amount of Each Receipt this Period  
2700.00

Exempt Legal/Accounting Serv.

**[MEMO ITEM]**  
NOTE: Coleman MN Recount

**C.** Full Name (Last, First, Middle Initial)  
Betty Johnson

Mailing Address 108 Edgerstoune Rd

City State Zip Code  
Princeton NJ 08540-6716

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

Name of Employer None Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
MM / DD / YYYY  
01 / 06 / 2009

Transaction ID: 00320.C756892

Amount of Each Receipt this Period  
10000.00

Exempt Legal/Accounting Serv.

**[MEMO ITEM]**  
NOTE: Coleman MN Recount

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 52 / 154  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.** Full Name (Last, First, Middle Initial)  
Bonnie Loeb

Mailing Address 315 E 69th St Apt 10A  
Apt 10A

City State Zip Code  
New York NY 10021-5532

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

Name of Employer Elliott Management Occupation EXECUTIVE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt 01 / 28 / 2009  
Transaction ID: 00320.C757057  
Amount of Each Receipt this Period 10000.00  
Exempt Legal/Accounting Serv.  
**[MEMO ITEM]**  
NOTE: Coleman MN Recount

**B.** Full Name (Last, First, Middle Initial)  
Whitney MacMillan

Mailing Address 1560 Fox St.

City State Zip Code  
Wayzata MN 55391-9328

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

Name of Employer Retired Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt 01 / 28 / 2009  
Transaction ID: 00320.C803307  
Amount of Each Receipt this Period 7700.00  
Exempt Legal/Accounting Serv.  
**[MEMO ITEM]**  
NOTE: Coleman MN Recount

**C.** Full Name (Last, First, Middle Initial)  
Whitney MacMillan

Mailing Address 1560 Fox St.

City State Zip Code  
Wayzata MN 55391-9328

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

Name of Employer Retired Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt 01 / 28 / 2009  
Transaction ID: 00320.C803308  
Amount of Each Receipt this Period 7700.00  
Exempt Legal/Accounting Serv.  
**[MEMO ITEM]**  
NOTE: Coleman MN Recount

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 0.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 53 / 154  
 (check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.** Full Name (Last, First, Middle Initial)  
Elizabeth Macmillan

Mailing Address 1560 Fox St

City State Zip Code  
Wayzata MN 55391-9328

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

Name of Employer None Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
MM / DD / YYYY  
01 / 28 / 2009

Transaction ID: 00320.C756977

Amount of Each Receipt this Period  
7700.00

Exempt Legal/Accounting Serv.

**[MEMO ITEM]**  
NOTE: Coleman MN Recount

**B.** Full Name (Last, First, Middle Initial)  
John Menard

Mailing Address 603 Lamplighter Ct

City State Zip Code  
Eau Claire WI 54703-

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

Name of Employer Menard, Inc. Occupation PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
MM / DD / YYYY  
01 / 06 / 2009

Transaction ID: 00320.C756916

Amount of Each Receipt this Period  
10000.00

Exempt Legal/Accounting Serv.

**[MEMO ITEM]**  
NOTE: Coleman MN Recount

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

Mailing Address 3115 Ocean Front Walk

City State Zip Code  
Marina del Rey CA 90292-5142

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

Name of Employer Self-employed Occupation Medical Doctor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
MM / DD / YYYY  
01 / 28 / 2009

Transaction ID: 00320.C756913

Amount of Each Receipt this Period  
10000.00

Exempt Legal/Accounting Serv.

**[MEMO ITEM]**  
NOTE: Coleman MN Recount

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 54 / 154  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.**

Full Name (Last, First, Middle Initial)  
Republican Party Of Minnesota

Mailing Address 525 Park St  
Suite 250

City State Zip Code  
Saint Paul MN 55103-2111

FEC ID number of contributing federal political committee. **C** C00001313

Name of Employer Occupation  
..

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
27798.79

Date of Receipt  
MM / DD / YYYY  
01 / 01 / 2009

**Transaction ID:** 10203.C876641

Amount of Each Receipt this Period  
27798.79

Other Receipt

NOTE: AUDIT ADJUSTMENT

**B.**

Full Name (Last, First, Middle Initial)  
A. Malachi Mixon

Mailing Address 1 Invacare Way

City State Zip Code  
Elyria OH 44035-4190

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

Name of Employer Occupation  
Invacare CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
0.00

Date of Receipt  
MM / DD / YYYY  
01 / 07 / 2009

**Transaction ID:** 00320.C756898

Amount of Each Receipt this Period  
7700.00

Exempt Legal/Accounting Serv.

**[MEMO ITEM]**  
NOTE: Coleman MN Recount

**C.**

Full Name (Last, First, Middle Initial)  
Robert Naegele

Mailing Address 7993 Via Vecchia

City State Zip Code  
Naples FL 34108-7531

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

Name of Employer Occupation  
Naegele Communications RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
0.00

Date of Receipt  
MM / DD / YYYY  
01 / 28 / 2009

**Transaction ID:** 00320.C757021

Amount of Each Receipt this Period  
7500.00

Exempt Legal/Accounting Serv.

**[MEMO ITEM]**  
NOTE: Coleman MN Recount

**SUBTOTAL** of Receipts This Page (optional) ..... ► **27798.79**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 55 / 154  
 (check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.** Full Name (Last, First, Middle Initial)  
American Society of Plastic Surgeons  
 Mailing Address 444 E Algonquin Rd  
 City State Zip Code  
Arlington Heights IL 60005-4654  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 0.00  
 Date of Receipt: 01 / 06 / 2009  
 Transaction ID: 00320.C756905  
 Amount of Each Receipt this Period: 5000.00  
 Exempt Legal/Accounting Serv.  
**[MEMO ITEM]**  
 NOTE: Coleman MN Recount

**B.** Full Name (Last, First, Middle Initial)  
Tenn PAC  
 Mailing Address 4525 Harding Pike Ste 200 Suite 200  
 City State Zip Code  
Nashville TN 37205-2154  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 0.00  
 Date of Receipt: 01 / 28 / 2009  
 Transaction ID: 00320.C756911  
 Amount of Each Receipt this Period: 5000.00  
 Exempt Legal/Accounting Serv.  
**[MEMO ITEM]**  
 NOTE: Coleman MN Recount

**C.** Full Name (Last, First, Middle Initial)  
Gregory Page  
 Mailing Address 512 Harrington Rd  
 City State Zip Code  
Wayzata MN 55391-1513  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
Cargill CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 0.00  
 Date of Receipt: 01 / 06 / 2009  
 Transaction ID: 00320.C756917  
 Amount of Each Receipt this Period: 2700.00  
 Exempt Legal/Accounting Serv.  
**[MEMO ITEM]**  
 NOTE: Coleman MN Recount

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 / 154
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<b>A.</b>	Full Name (Last, First, Middle Initial) Jeno Paulucci	Date of Receipt MM / DD / YYYY 01 / 28 / 2009
	Mailing Address 525 Lake Ave Suite 202	Transaction ID: 00320.C757008
	City State Zip Code Duluth MN 55802-	Amount of Each Receipt this Period 1700.00
	FEC ID number of contributing federal political committee. <b>C</b>	Exempt Legal/Accounting Serv.
Name of Employer Luiginos	Occupation PRESIDENT	<b>[MEMO ITEM]</b> NOTE: Coleman MN Recount
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Robert Pence	Date of Receipt MM / DD / YYYY 01 / 28 / 2009
	Mailing Address 3030 K St NW	Transaction ID: 00320.C757055
	City State Zip Code Washington DC 20007-5104	Amount of Each Receipt this Period 3000.00
	FEC ID number of contributing federal political committee. <b>C</b>	Exempt Legal/Accounting Serv.
Name of Employer Pence Friedel	Occupation REALTOR	<b>[MEMO ITEM]</b> NOTE: Coleman MN Recount
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Gregory Pulles	Date of Receipt MM / DD / YYYY 01 / 07 / 2009
	Mailing Address 4625 Xene Ln N	Transaction ID: 00320.C756918
	City State Zip Code Plymouth MN 55446-2191	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. <b>C</b>	Exempt Legal/Accounting Serv.
Name of Employer TCF Financial	Occupation ATTORNEY	<b>[MEMO ITEM]</b> NOTE: Coleman MN Recount
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	



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

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

FOR LINE NUMBER: PAGE 57 / 154

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.**

Full Name (Last, First, Middle Initial)  
Coleman Minnesota Recount Committee

Mailing Address PO Box 14483

City State Zip Code  
Saint Paul MN 55114-0483

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 69496.55

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 0 6 / 2 0 0 9

Transaction ID: 00320.C726898

Amount of Each Receipt this Period

69496.55

Other Receipt

NOTE: Coleman MN Recount

**B.**

Full Name (Last, First, Middle Initial)  
Coleman Minnesota Recount Committee

Mailing Address PO Box 14483

City State Zip Code  
Saint Paul MN 55114-0483

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 107598.35

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 0 7 / 2 0 0 9

Transaction ID: 00320.C726897

Amount of Each Receipt this Period

38101.80

Other Receipt

note:recount

**C.**

Full Name (Last, First, Middle Initial)  
Coleman Minnesota Recount Committee

Mailing Address PO Box 14483

City State Zip Code  
Saint Paul MN 55114-0483

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 217097.71

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 2 8 / 2 0 0 9

Transaction ID: 00320.C736299

Amount of Each Receipt this Period

109499.36

Other Receipt

Note:recount

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

217097.71

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 58 / 154  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.** Full Name (Last, First, Middle Initial)  
Annette Simmons

Mailing Address 5430 Lyndon B Johnson Fwy Ste 1700  
Suite 1700

City State Zip Code  
Dallas TX 75240-2620

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

Name of Employer None Occupation **HOMEMAKER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	7	/	2	0	0	9

**Transaction ID:** 00320.C756899

Amount of Each Receipt this Period  
5000.00

Exempt Legal/Accounting Serv.

**[MEMO ITEM]**  
NOTE: Coleman MN Recount

**B.** Full Name (Last, First, Middle Initial)  
Annette Simmons

Mailing Address 5430 Lyndon B Johnson Fwy Ste 1700  
Suite 1700

City State Zip Code  
Dallas TX 75240-2620

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

Name of Employer None Occupation **HOMEMAKER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	8	/	2	0	0	9

**Transaction ID:** 00320.C757058

Amount of Each Receipt this Period  
5000.00

Exempt Legal/Accounting Serv.

**[MEMO ITEM]**  
NOTE: Coleman MN Recount

**C.** Full Name (Last, First, Middle Initial)  
Harold Simmons

Mailing Address 5430 Lyndon B Johnson Fwy Ste 1700

City State Zip Code  
Dallas TX 75240-2620

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

Name of Employer Contractor Corp Occupation **CEO**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	7	/	2	0	0	9

**Transaction ID:** 00320.C756900

Amount of Each Receipt this Period  
5000.00

Exempt Legal/Accounting Serv.

**[MEMO ITEM]**  
NOTE: Coleman MN Recount

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 59 / 154  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.** Full Name (Last, First, Middle Initial)  
Harold Simmons

Mailing Address 5430 Lyndon B Johnson Fwy Ste 1700

City State Zip Code  
Dallas TX 75240-2620

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

Name of Employer Occupation  
Contractor Corp CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 1 / 2 8 / 2 0 0 9

Transaction ID: 00320.C757059

Amount of Each Receipt this Period  
5000.00

Exempt Legal/Accounting Serv.

**[MEMO ITEM]**  
NOTE: Coleman MN Recount

**B.** Full Name (Last, First, Middle Initial)  
Paul Singer

Mailing Address 1 W 81st St

City State Zip Code  
New York NY 10024-6048

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

Name of Employer Occupation  
Elliott Associates, LP PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 1 / 2 8 / 2 0 0 9

Transaction ID: 00320.C757060

Amount of Each Receipt this Period  
10000.00

Exempt Legal/Accounting Serv.

**[MEMO ITEM]**  
NOTE: Coleman MN Recount

**C.** Full Name (Last, First, Middle Initial)  
John Snow

Mailing Address 122 Tempsford Ln

City State Zip Code  
Richmond VA 23226-2319

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

Name of Employer Occupation  
Cerberus Capital Chairman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 1 / 0 6 / 2 0 0 9

Transaction ID: 00320.C756891

Amount of Each Receipt this Period  
10000.00

Exempt Legal/Accounting Serv.

**[MEMO ITEM]**  
NOTE: Coleman MN Recount

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **0.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 60 / 154  
 (check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.** Full Name (Last, First, Middle Initial)  
Gregg Steinhafel

Mailing Address 2265 Northshore Dr.

City State Zip Code  
Wayzata MN 55391-9347

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

Name of Employer Occupation  
Target PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
MM / DD / YYYY  
01 / 28 / 2009

Transaction ID: 00320.C757038

Amount of Each Receipt this Period  
7700.00

Exempt Legal/Accounting Serv.

**[MEMO ITEM]**  
NOTE: Coleman MN Recount

**B.** Full Name (Last, First, Middle Initial)  
American Crystal Sugar PAC

Mailing Address 101 3rd St N

City State Zip Code  
Moorhead MN 56560-1952

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
MM / DD / YYYY  
01 / 28 / 2009

Transaction ID: 00320.C757033

Amount of Each Receipt this Period  
5000.00

Exempt Legal/Accounting Serv.

**[MEMO ITEM]**  
NOTE: Coleman MN Recount

**C.** Full Name (Last, First, Middle Initial)  
Belinda Vander Sloot

Mailing Address PO Box 50305

City State Zip Code  
Idaho Falls ID 83405-0305

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

Name of Employer Occupation  
Self HOMEMAKER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
MM / DD / YYYY  
01 / 06 / 2009

Transaction ID: 00320.C805666

Amount of Each Receipt this Period  
10000.00

Exempt Legal/Accounting Serv.

**[MEMO ITEM]**  
NOTE: Coleman MN Recount

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 61 / 154  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.** Full Name (Last, First, Middle Initial)  
Frank Vander Sloot

Mailing Address PO Box 50305

City State Zip Code  
Idaho Falls ID 83405-0305

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

Name of Employer Occupation  
Melaleuca, Inc CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 1 / 0 6 / 2 0 0 9

Transaction ID: 00320.C805667

Amount of Each Receipt this Period  
10000.00

Exempt Legal/Accounting Serv.

**[MEMO ITEM]**  
NOTE: Coleman MN Recount

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

Mailing Address 556 S Waterloo Rd

City State Zip Code  
Devon PA 19333-1728

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

Name of Employer Occupation  
JJ White Inc. MANAGER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 1 / 2 8 / 2 0 0 9

Transaction ID: 00320.C757062

Amount of Each Receipt this Period  
2300.00

Exempt Legal/Accounting Serv.

**[MEMO ITEM]**  
NOTE: Coleman MN Recount

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

Mailing Address 556 S Waterloo Rd

City State Zip Code  
Devon PA 19333-1728

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

Name of Employer Occupation  
JJ White Inc. CONSULTANT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 1 / 2 8 / 2 0 0 9

Transaction ID: 00320.C757061

Amount of Each Receipt this Period  
2300.00

Exempt Legal/Accounting Serv.

**[MEMO ITEM]**  
NOTE: Coleman MN Recount

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **0.00**

**TOTAL** This Period (last page this line number only) ..... ▶ **245184.05**

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Alliance Bank</p> <p>Mailing Address 444 Cedar St</p> <p>City Saint Paul State MN Zip Code 55101-2179</p> <p>Purpose of Disbursement Employee HSA Contribution</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22656 <b>Date of Disbursement:</b> 01 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 1040.00</p> <p><b>EMPLOYEE HSA CONTRIBUTION</b></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Alliance Bank</p> <p>Mailing Address 444 Cedar St</p> <p>City Saint Paul State MN Zip Code 55101-2179</p> <p>Purpose of Disbursement Interest on Loan 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E26712 <b>Date of Disbursement:</b> 01 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 963.57</p> <p><b>INTEREST ON LOAN PAYMENT</b></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Alliance Bank</p> <p>Mailing Address 444 Cedar St</p> <p>City Saint Paul State MN Zip Code 55101-2179</p> <p>Purpose of Disbursement Bank Fee</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22924 <b>Date of Disbursement:</b> 01 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 113.23</p> <p><b>BANK FEE</b></p>

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

2116.80

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

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

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

FOR LINE NUMBER: (check only one)

PAGE 63 / 154

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bryan Cave LLP</p> <p>Mailing Address 700 13th St NW</p> <p>City Washington State DC Zip Code 20005-3960</p> <p>Purpose of Disbursement Legal Fees</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22511 <b>Date of Disbursement</b> 01 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 16092.90</p> <p><b>LEGAL FEES</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) FLS Connect</p> <p>Mailing Address 7300 Hudson Blvd N Ste 270</p> <p>City Saint Paul State MN Zip Code 55128-7143</p> <p>Purpose of Disbursement Party Fundraising Telemarketing</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22465 <b>Date of Disbursement</b> 01 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 12101.56</p> <p><b>PARTY FUNDRAISING TELEMAR- KETING</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) SMARTech Corp.</p> <p>Mailing Address PO Box 11181</p> <p>City Chattanooga State TN Zip Code 37401-2181</p> <p>Purpose of Disbursement Phone &amp; Internet Service</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22514 <b>Date of Disbursement</b> 01 / 20 / 2009</p> <p>Amount of Each Disbursement this Period 6207.97</p> <p><b>PHONE &amp; INTERNET SERVICE</b></p>

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

**34402.43**

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)  
Steve Brown Direct Mail, Inc

Transaction ID: 00320.E22512  
Date of Disbursement

Mailing Address 731 Divot Drive

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

City Fernley State NV Zip Code 89408-

Amount of Each Disbursement this Period

14260.98
----------

Purpose of Disbursement  
Generic Party Printing

Category/ Type
-------------------

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

GENERIC PARTY PRINTING

State: District:

B.

Full Name (Last, First, Middle Initial)  
Robert Engstrom

Transaction ID: 00320.E22657  
Date of Disbursement

Mailing Address 317 S Pickett St

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

City Alexandria State VA Zip Code 22304-4703

Amount of Each Disbursement this Period

200.00
--------

Purpose of Disbursement  
SEE BELOW: Reimburse for Parking

Category/ Type
-------------------

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

SEE BELOW: REIMBURSE FOR PARKING

State: District:

C.

Full Name (Last, First, Middle Initial)  
Msp International Airport

Transaction ID: 00320.E22893  
Date of Disbursement

Mailing Address LINDBERG TERMINAL

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

City Minneapolis State MN Zip Code 55440-

Amount of Each Disbursement this Period

200.00
--------

Purpose of Disbursement  
ENGSTROM-PARKING

Category/ Type
-------------------

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

[MEMO ITEM]  
MEMO: ENGSTROM-PARKING

State: District:

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

14460.98
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TOTAL This Period (last page this line number only) ..... ▶

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)  
Robert Engstrom

Mailing Address 317 S Pickett St

City Alexandria State VA Zip Code 22304-4703

Purpose of Disbursement  
SEE BELOW: Reimburse for Airline Fe

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 00320.E22658  
Date of Disbursement

01 / 22 / 2009

Amount of Each Disbursement this Period

262.00

SEE BELOW: REIMBURSE FOR AIRLINE FE

B.

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

Mailing Address 1030 Delta Blvd

City Atlanta State GA Zip Code 30354-1989

Purpose of Disbursement  
ENGSTOM-AIRLINE FEES

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 00320.E22662  
Date of Disbursement

01 / 22 / 2009

Amount of Each Disbursement this Period

230.00

[MEMO ITEM]  
MEMO: ENGSTOM-AIRLINE FEES

C.

Full Name (Last, First, Middle Initial)  
US Airways

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034-

Purpose of Disbursement  
ENGSTOM-AIRLINE FEES

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 00320.E22663  
Date of Disbursement

01 / 30 / 2009

Amount of Each Disbursement this Period

32.00

[MEMO ITEM]  
MEMO: ENGSTOM-AIRLINE FEES

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

262.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<p><b>A.</b> Full Name (Last, First, Middle Initial) Robert Engstrom</p> <p>Mailing Address 317 S Pickett St</p> <p>City Alexandria State VA Zip Code 22304-4703</p> <p>Purpose of Disbursement Reimburse for 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22659</p> <p>Date of Disbursement 01 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 28.00</p> <p>REIMBURSE FOR LODGING</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Nick Erickson</p> <p>Mailing Address 9344 134th Street</p> <p>City Savage State MN Zip Code 55378-</p> <p>Purpose of Disbursement Reimburse for Mileage</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E23508</p> <p>Date of Disbursement 01 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 120.79</p> <p>REIMBURSE FOR MILEAGE</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) American Express Financial</p> <p>Mailing Address P.O Box 5167</p> <p>City Westborough State MA Zip Code 01581-</p> <p>Purpose of Disbursement E-Merchant Fee</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22640</p> <p>Date of Disbursement 01 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 267.19</p> <p>E-MERCHANT FEE</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><b>415.98</b></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

A.	Full Name (Last, First, Middle Initial) Norma Friedrichs  Mailing Address 2860 Willow Dr  City Hamel State MN Zip Code 55340-9788  Purpose of Disbursement SEE BELOW: Reimburse for Deposit Candidate Name <input type="text"/> Category/Type <input type="text"/>  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 00320.E22537 Date of Disbursement <input type="text"/> 01 / <input type="text"/> 22 / <input type="text"/> 2009  Amount of Each Disbursement this Period <input type="text"/> 2663.00  SEE BELOW: REIMBURSE FOR DEPOSIT
B.	Full Name (Last, First, Middle Initial) Qwest Inc  Mailing Address 5325 Zuni St # 728  City Denver State CO Zip Code 80221-1499  Purpose of Disbursement FRIEDRICH-PHONE DEPOSIT Candidate Name <input type="text"/> Category/Type <input type="text"/>  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 00320.E24864 Date of Disbursement <input type="text"/> 01 / <input type="text"/> 22 / <input type="text"/> 2009  Amount of Each Disbursement this Period <input type="text"/> 2663.00  [MEMO ITEM] MEMO: FRIEDRICH-PHONE DEPOSIT
C.	Full Name (Last, First, Middle Initial) Game Fair  Mailing Address 9404 161st, Avenue Nw  City Anoka State MN Zip Code 55303-  Purpose of Disbursement Fair Booth Fee Candidate Name <input type="text"/> Category/Type <input type="text"/>  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 00320.E22454 Date of Disbursement <input type="text"/> 01 / <input type="text"/> 15 / <input type="text"/> 2009  Amount of Each Disbursement this Period <input type="text"/> 350.00  FAIR BOOTH FEE

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<input type="text"/> 3013.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

A.	Full Name (Last, First, Middle Initial) Timothy Gould	Transaction ID: 00320.E29282 Date of Disbursement 01 / 15 / 2009
	Mailing Address 192 Linden Circle	Amount of Each Disbursement this Period 111.75
	City Apple Valley State MN Zip Code 55124- Purpose of Disbursement SEE BELOW: Reimburse for Cell Phon Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SEE BELOW: REIMBURSE FOR CELL PHON

B.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: 00320.E22523 Date of Disbursement 01 / 15 / 2009
	Mailing Address PO Box 25505	Amount of Each Disbursement this Period 111.75
	City Lehigh Valley State PA Zip Code 18002-5505 Purpose of Disbursement GOULD-CELL PHONE Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: GOULD-CELL PHONE

C.	Full Name (Last, First, Middle Initial) Resolution Graphics	Transaction ID: 00320.E22472 Date of Disbursement 01 / 08 / 2009
	Mailing Address 3725 Dunlap Street N.	Amount of Each Disbursement this Period 356.09
	City Saint Paul State MN Zip Code 55112- Purpose of Disbursement Party Fundraising Mailhouse/Non-Can Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PARTY FUNDRAISING MAILHOUSE/NON-CAN

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	467.84
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<p><b>A.</b> Full Name (Last, First, Middle Initial) Norlight, Inc</p> <p>Mailing Address PO Box 740094</p> <p>City Cincinnati State OH Zip Code 45274-0094</p> <p>Purpose of Disbursement Telephone Long Distance Service Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22918 <b>Date of Disbursement</b> 01 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 1647.97</p> <p>TELEPHONE LONG DISTANCE SERVICE</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Norlight, Inc</p> <p>Mailing Address PO Box 740094</p> <p>City Cincinnati State OH Zip Code 45274-0094</p> <p>Purpose of Disbursement Telephone Long Distance Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22455 <b>Date of Disbursement</b> 01 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 671.16</p> <p>TELEPHONE LONG DISTANCE</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Qwest Inc</p> <p>Mailing Address 5325 Zuni St # 728</p> <p>City Denver State CO Zip Code 80221-1499</p> <p>Purpose of Disbursement Office Phone &amp; Internet Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E24861 <b>Date of Disbursement</b> 01 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 8.76</p> <p>OFFICE PHONE &amp; INTERNET</p>

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

2327.89

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

A.	Full Name (Last, First, Middle Initial) Auto-owners Insurance	Transaction ID: 00320.E22917 Date of Disbursement
	Mailing Address 161 Saint Anthony Ave Ste 950	<input type="text" value="01"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City Saint Paul State MN Zip Code 55103-2341	Amount of Each Disbursement this Period
	Purpose of Disbursement General Liability Insurance	<input type="text" value="210.42"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		GENERAL LIABILITY INSURANCE

B.	Full Name (Last, First, Middle Initial) Auto-owners Insurance	Transaction ID: 00320.E22919 Date of Disbursement
	Mailing Address 161 Saint Anthony Ave Ste 950	<input type="text" value="01"/> / <input type="text" value="22"/> / <input type="text" value="2009"/>
	City Saint Paul State MN Zip Code 55103-2341	Amount of Each Disbursement this Period
	Purpose of Disbursement General Liability Insurance	<input type="text" value="654.96"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		GENERAL LIABILITY INSURANCE

C.	Full Name (Last, First, Middle Initial) Matthew Kirkpatrick	Transaction ID: 00320.E22647 Date of Disbursement
	Mailing Address 3900 Valley View Dr N Apt 303	<input type="text" value="01"/> / <input type="text" value="09"/> / <input type="text" value="2009"/>
	City Saint Paul State MN Zip Code 55122-1581	Amount of Each Disbursement this Period
	Purpose of Disbursement SEE BELOW: Reimburse Phone & Lodgin	<input type="text" value="171.48"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		SEE BELOW: REIMBURSE PHONE & LODGIN

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1036.86"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)  
Verizon Wireless

Mailing Address PO Box 25505

City Lehigh Valley State PA Zip Code 18002-5505

Purpose of Disbursement  
KIRKPATRICK-PHONE

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 00320.E22649  
Date of Disbursement

01 / 30 / 2009

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

MEMO: KIRKPATRICK-PHONE

B.

Full Name (Last, First, Middle Initial)  
Super 8 Motel

Mailing Address 1815 Paul Bunyan Dr NW

City Bemidji State MN Zip Code 56601-5602

Purpose of Disbursement  
KIRKPATRICK-LODGING

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 00320.E22650  
Date of Disbursement

01 / 30 / 2009

Amount of Each Disbursement this Period

71.48

[MEMO ITEM]

MEMO: KIRKPATRICK-LODGING

C.

Full Name (Last, First, Middle Initial)  
Matthew Kirkpatrick

Mailing Address 3900 Valley View Dr N Apt 303

City Saint Paul State MN Zip Code 55122-1581

Purpose of Disbursement  
Reimburse for Mileage

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 00320.E22651  
Date of Disbursement

01 / 09 / 2009

Amount of Each Disbursement this Period

331.69

REIMBURSE FOR MILEAGE

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

331.69

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

A.	Full Name (Last, First, Middle Initial) Reit Management	Transaction ID: 00320.E22474 Date of Disbursement 01 / 27 / 2009
	Mailing Address 330 Second Avenue South	Amount of Each Disbursement this Period 304.00
	City Minneapolis State MN Zip Code 55401-	
	Purpose of Disbursement Office Rent	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		OFFICE RENT

B.	Full Name (Last, First, Middle Initial) MN State Unemployment	Transaction ID: 00320.E22938 Date of Disbursement 01 / 30 / 2009
	Mailing Address 332 Minnesota St	Amount of Each Disbursement this Period 885.48
	City Saint Paul State MN Zip Code 55101-1314	
	Purpose of Disbursement Unemployment Surcharge Tax	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		UNEMPLOYMENT SURCHARGE TAX

C.	Full Name (Last, First, Middle Initial) Neopost	Transaction ID: 00320.E22467 Date of Disbursement 01 / 15 / 2009
	Mailing Address P.O. Box 73727	Amount of Each Disbursement this Period 5006.15
	City Chicago State IL Zip Code 60673-	
	Purpose of Disbursement Party Fundraising Postage/Non-FEA	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PARTY FUNDRAISING POSTAGE- /NON-FEA

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	6195.63
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

A.	Full Name (Last, First, Middle Initial) Lexis Nexis	Transaction ID: 00320.E22460 Date of Disbursement 01 / 15 / 2009
	Mailing Address Po Box 2314	Amount of Each Disbursement this Period 532.00
	City Carol Stream State IL Zip Code 60132-	
	Purpose of Disbursement Office Computer Services	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		OFFICE COMPUTER SERVICES

B.	Full Name (Last, First, Middle Initial) Anthony Post	Transaction ID: 00320.E22526 Date of Disbursement 01 / 15 / 2009
	Mailing Address 1002 Drew Drive	Amount of Each Disbursement this Period 27.28
	City Saint Paul State MN Zip Code 55124-	
	Purpose of Disbursement SEE BELOW: Reimburse for Meals	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		SEE BELOW: REIMBURSE FOR MEALS

C.	Full Name (Last, First, Middle Initial) Keys Cafe	Transaction ID: 00320.E22527 Date of Disbursement 01 / 15 / 2009
	Mailing Address 504 Robert Street	Amount of Each Disbursement this Period 27.28
	City St. Paul State MN Zip Code 55101-	
	Purpose of Disbursement POST-MEAL	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] MEMO: POST-MEAL

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	559.28
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<p><b>A.</b> Full Name (Last, First, Middle Initial) US Post Office</p> <p>Mailing Address 401 Kellogg Blvd E</p> <p>City Saint Paul State MN Zip Code 55101-</p> <p>Purpose of Disbursement Party Fundraising Postage/Non-FEA</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22466 <b>Date of Disbursement</b> 01 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p><b>PARTY FUNDRAISING POSTAGE- /NON-FEA</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Cardmember Services</p> <p>Mailing Address PO Box 790408</p> <p>City Saint Louis State MO Zip Code 63179-0408</p> <p>Purpose of Disbursement SEE BELOW: CC 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22664 <b>Date of Disbursement</b> 01 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 6655.59</p> <p><b>SEE BELOW: CC PAYMENT</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Capitol City Brewing Co.</p> <p>Mailing Address 1100 New York Ave</p> <p>City Washington State DC Zip Code 20034-</p> <p>Purpose of Disbursement CC--MEAL</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22665 <b>Date of Disbursement</b> 01 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 32.55</p> <p><b>[MEMO ITEM] MEMO: CC--MEAL</b></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>11655.59</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<p><b>A.</b> Full Name (Last, First, Middle Initial) Northwest Airlines</p> <p>Mailing Address 5101 Northwest Dr</p> <p>City Saint Paul State MN Zip Code 55111-3027</p> <p>Purpose of Disbursement CC-AIRLINE FEE</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22666 <b>Date of Disbursement:</b> 01 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 15.00</p> <p><b>[MEMO ITEM]</b> MEMO: CC-AIRLINE FEE</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Corner Bakery</p> <p>Mailing Address 1828 L St NW</p> <p>City Washington State DC Zip Code 20036-5139</p> <p>Purpose of Disbursement CC- MEAL</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22667 <b>Date of Disbursement:</b> 01 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 9.88</p> <p><b>[MEMO ITEM]</b> MEMO: CC- MEAL</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Fedex Kinkos</p> <p>Mailing Address 1609 S Robert St</p> <p>City West St Paul State MN Zip Code 55118-</p> <p>Purpose of Disbursement CC- FEDEX AIR BILL</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22668 <b>Date of Disbursement:</b> 01 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 99.75</p> <p><b>[MEMO ITEM]</b> MEMO: CC- FEDEX AIR BILL</p>

<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 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<p><b>A.</b> Full Name (Last, First, Middle Initial) Subway Sandwiches - Robbinsdale</p> <p>Mailing Address 4080 W Broadway Ave</p> <p>City Minneapolis State MN Zip Code 55422-5604</p> <p>Purpose of Disbursement CC-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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22669 <b>Date of Disbursement</b> 01 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 14.93</p> <p><b>[MEMO ITEM]</b> MEMO: CC-MEALS</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Dunn Brothers Coffee</p> <p>Mailing Address 2650 University Avenue South</p> <p>City Saint Paul State MN Zip Code 55107-</p> <p>Purpose of Disbursement CC- COFFEE</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22670 <b>Date of Disbursement</b> 01 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 21.45</p> <p><b>[MEMO ITEM]</b> MEMO: CC- COFFEE</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Budget Truck Rental</p> <p>Mailing Address 1413 Huntington Valley Rd</p> <p>City Saint Paul State MN Zip Code 55108-</p> <p>Purpose of Disbursement CC-TRUCK RENTAL</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22671 <b>Date of Disbursement</b> 01 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 503.55</p> <p><b>[MEMO ITEM]</b> MEMO: CC-TRUCK RENTAL</p>

<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 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

A.	Full Name (Last, First, Middle Initial) Tivo	Transaction ID: 00320.E22672 Date of Disbursement 01 / 22 / 2009
	Mailing Address 2180 Gold Street	Amount of Each Disbursement this Period 6.95
	City Alviso State CA Zip Code 95002-	
	Purpose of Disbursement CC-SERVICE CHARGE	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Tivo	Transaction ID: 00320.E22673 Date of Disbursement 01 / 22 / 2009
	Mailing Address 2180 Gold Street	Amount of Each Disbursement this Period 12.95
	City Alviso State CA Zip Code 95002-	
	Purpose of Disbursement CC-SERVICE CHARGE	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Tivo	Transaction ID: 00320.E22674 Date of Disbursement 01 / 22 / 2009
	Mailing Address 2180 Gold Street	Amount of Each Disbursement this Period 6.95
	City Alviso State CA Zip Code 95002-	
	Purpose of Disbursement CC- SERVICE CHARGE	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]  
MEMO: CC-SERVICE CHARGE

[MEMO ITEM]  
MEMO: CC-SERVICE CHARGE

[MEMO ITEM]  
MEMO: CC- SERVICE CHARGE

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

0.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<p><b>A.</b> Full Name (Last, First, Middle Initial) Pizza Hut</p> <p>Mailing Address 1544 Larpenteur Avenue</p> <p>City Saint Paul State MN Zip Code 55104-</p> <p>Purpose of Disbursement CC- 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22675 <b>Date of Disbursement</b> 01 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 94.74</p> <p><b>[MEMO ITEM]</b> MEMO: CC- MEALS</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) United Airlines</p> <p>Mailing Address 198 Selleck St</p> <p>City Stamford State CT Zip Code 06902-6634</p> <p>Purpose of Disbursement CC- AIRLINE FEES</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22676 <b>Date of Disbursement</b> 01 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 121.00</p> <p><b>[MEMO ITEM]</b> MEMO: CC- AIRLINE FEES</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Budget Car Rental</p> <p>Mailing Address 4650 Glumack Dr</p> <p>City Saint Paul State MN Zip Code 55111-3078</p> <p>Purpose of Disbursement CC - CAR RENTAL</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22677 <b>Date of Disbursement</b> 01 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 1943.32</p> <p><b>[MEMO ITEM]</b> MEMO: CC - CAR RENTAL</p>

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

0.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<b>A.</b> Full Name (Last, First, Middle Initial) Florida Business Information Mailing Address P.o. Box 193 City Bell State FL Zip Code 32619- Purpose of Disbursement CC- CLIP SERVICES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00320.E22680 Date of Disbursement 01 / 22 / 2009
	Amount of Each Disbursement this Period 169.00 [MEMO ITEM] MEMO: CC- CLIP SERVICES

<b>B.</b> Full Name (Last, First, Middle Initial) Target Superstore Mailing Address 1300 University Ave W City Saint Paul State MN Zip Code 55104- Purpose of Disbursement CC-OFFICE SUPPLIES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00320.E22681 Date of Disbursement 01 / 22 / 2009
	Amount of Each Disbursement this Period 75.00 [MEMO ITEM] MEMO: CC-OFFICE SUPPLIES

<b>C.</b> Full Name (Last, First, Middle Initial) Baja Sol Mailing Address 2922 Upper 55th St City Inver Grove Height State MN Zip Code 55076-1673 Purpose of Disbursement CC-MEALS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00320.E22682 Date of Disbursement 01 / 22 / 2009
	Amount of Each Disbursement this Period 270.35 [MEMO ITEM] MEMO: CC-MEALS

<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 3X)  
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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<b>A.</b> Full Name (Last, First, Middle Initial) Robert D. Todd Mailing Address 715 Northern Hills Dr NE City Rochester State MN Zip Code 55906-4088 Purpose of Disbursement SEE BELOW: Reimburse for Cell Phone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00320.E22534 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 2 / 2 0 0 9
	Amount of Each Disbursement this Period 261.26 SEE BELOW: REIMBURSE FOR CELL PHONE
<b>B.</b> Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 25505 City Lehigh Valley State PA Zip Code 18002-5505 Purpose of Disbursement TODD-PHONE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00320.E22535 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 2 / 2 0 0 9
	Amount of Each Disbursement this Period 261.26 [MEMO ITEM] MEMO: TODD-PHONE

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	261.26
<b>TOTAL</b> This Period (last page this line number only) .....	▶	77507.23



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)  
Republican Party Of Minnesota

Transaction ID: 00320.E22933

Date of Disbursement

Mailing Address 525 Park St  
Suite 250

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	3		2	0	0	9

City State Zip Code  
Saint Paul MN 55103-2111

Amount of Each Disbursement this Period

25.00
-------

Purpose of Disbursement  
TRF TO NON-FEDERAL ACT

--

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

25.00
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TOTAL This Period (last page this line number only) ..... ►

25.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 82 / 154

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)  
Alliance Bank

Mailing Address 444 Cedar St

City State Zip Code  
Saint Paul MN 55101-2179

Purpose of Disbursement  
Repayment of Other Loan Repayment of Loa

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 00320.E22468

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3310.98

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

3310.98

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

3310.98

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

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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

A.	Full Name (Last, First, Middle Initial) Trimble & Associates	Transaction ID: 00320.E22453 Date of Disbursement 01 / 12 / 2009
	Mailing Address 10210 WAYZATA BLVD SUITE 130	Amount of Each Disbursement this Period 53410.88
	City Hopkins State MN Zip Code 55305-	
	Purpose of Disbursement LEGAL FEES - RECOUNT	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Trimble & Associates	Transaction ID: 00320.E22503 Date of Disbursement 01 / 26 / 2009
	Mailing Address 10210 WAYZATA BLVD SUITE 130	Amount of Each Disbursement this Period 64436.13
	City Hopkins State MN Zip Code 55305-	
	Purpose of Disbursement LEGAL FEES - RECOUNT	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Trimble & Associates	Transaction ID: 00320.E22473 Date of Disbursement 01 / 08 / 2009
	Mailing Address 10210 WAYZATA BLVD SUITE 130	Amount of Each Disbursement this Period 50620.50
	City Hopkins State MN Zip Code 55305-	
	Purpose of Disbursement LEGAL FEES - RECOUNT	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>168467.51</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>168467.51</b>

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

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FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.**

Full Name (Last, First, Middle Initial)  
Melanie Barry

Mailing Address 5959 Trenton Ln N

City Minneapolis State MN Zip Code 55442-3237

Purpose of Disbursement  
Refund of Contribution Charged Incorrect

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 00320.E22931  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

Category/  
Type

**B.**

Full Name (Last, First, Middle Initial)  
Naomi Godfrey

Mailing Address 3704 Fenton Ave

City Fort Worth State TX Zip Code 76133-2916

Purpose of Disbursement  
Refund of Contribution Incorrectly Charg

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 00320.E22939  
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 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

A.	Full Name (Last, First, Middle Initial) Alliance Bank	Transaction ID: 00320.E22934 Date of Disbursement 01 / 29 / 2009
	Mailing Address 444 Cedar St	Amount of Each Disbursement this Period 292.30
	City Saint Paul State MN Zip Code 55101-2179	
	Purpose of Disbursement Employee HSA Contribution	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		EMPLOYEE HSA CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) Blue Cross Blue Shield of Minnesota	Transaction ID: 00320.E22655 Date of Disbursement 01 / 26 / 2009
	Mailing Address P.o. Box 64338	Amount of Each Disbursement this Period 6517.00
	City St. Paul State MN Zip Code 55164-0179	
	Purpose of Disbursement FEA Employees Health Benefits	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA EMPLOYEES HEALTH BENEFITS

C.	Full Name (Last, First, Middle Initial) Assurant Employee Benefits	Transaction ID: 00320.E22652 Date of Disbursement 01 / 26 / 2009
	Mailing Address 2323 Grand Blvd	Amount of Each Disbursement this Period 313.55
	City Kansas City State MO Zip Code 64108-	
	Purpose of Disbursement FEA Employee Life and Disability Be	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA EMPLOYEE LIFE AND DISABILITY BE

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>7122.85</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

A.	Full Name (Last, First, Middle Initial) Pinnacle List Company	Transaction ID: 00320.E22513 Date of Disbursement 01 / 21 / 2009
	Mailing Address 2800 S Shirlington Rd Ste 401	Amount of Each Disbursement this Period 10823.43
	City Arlington State VA Zip Code 22206-3608	
	Purpose of Disbursement Generic Party Printing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		GENERIC PARTY PRINTING

B.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: 00320.E22546 Date of Disbursement 01 / 16 / 2009
	Mailing Address 1210 Northland Dr Ste 100	Amount of Each Disbursement this Period 14370.58
	City Saint Paul State MN Zip Code 55120-1181	
	Purpose of Disbursement SEE BELOW: FEA Payroll Taxes	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		SEE BELOW: FEA PAYROLL TAXES

C.	Full Name (Last, First, Middle Initial) MN Dept of Revenue	Transaction ID: 00320.E22541 Date of Disbursement 01 / 16 / 2009
	Mailing Address 658 Cedar St Ste 400	Amount of Each Disbursement this Period 1768.83
	City Saint Paul State MN Zip Code 55155-1603	
	Purpose of Disbursement FEA PAYROLL TAXES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] MEMO: FEA PAYROLL TAXES

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	25194.01
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<b>A.</b> Full Name (Last, First, Middle Initial) MN State Unemployment Mailing Address 332 Minnesota St City Saint Paul State MN Zip Code 55101-1314 Purpose of Disbursement PAYROLL TAXES-FEA STATE UN Candidate Name	Transaction ID: 00320.E22925 Date of Disbursement 01 / 16 / 2009
	Amount of Each Disbursement this Period 878.36 [MEMO ITEM] MEMO: PAYROLL TAXES-FEA STATE UN
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>B.</b> Full Name (Last, First, Middle Initial) Internal Revenue Service Mailing Address P.O. BOX 43251 City Ogden State UT Zip Code 84201-0001 Purpose of Disbursement FEA PAYROLL TAXES Candidate Name	Transaction ID: 00320.E25039 Date of Disbursement 01 / 16 / 2009
	Amount of Each Disbursement this Period 11723.39 [MEMO ITEM] MEMO: FEA PAYROLL TAXES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>C.</b> Full Name (Last, First, Middle Initial) Paychex Mailing Address 1210 Northland Dr Ste 100 City Saint Paul State MN Zip Code 55120-1181 Purpose of Disbursement SEE BELOW: Garnishments Candidate Name	Transaction ID: 00320.E22547 Date of Disbursement 01 / 16 / 2009
	Amount of Each Disbursement this Period 1003.71 SEE BELOW: GARNISHMENTS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1003.71
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)  
MN Child Support Center

Mailing Address PO Box 64306

City Saint Paul State MN Zip Code 55164-0306

Purpose of Disbursement  
WITHHOLDINGS

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 00320.E22548

Date of Disbursement

01 / 16 / 2009

Amount of Each Disbursement this Period

745.90

[MEMO ITEM]

MEMO: WITHHOLDINGS

B.

Full Name (Last, First, Middle Initial)  
Osi Education Services, Inc.

Mailing Address PO Box 929

City Brookfield State WI Zip Code 53008-0929

Purpose of Disbursement  
GARNISHMENTS-OSI EDUCATION

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 00320.E22549

Date of Disbursement

01 / 16 / 2009

Amount of Each Disbursement this Period

35.00

[MEMO ITEM]

MEMO: GARNISHMENTS-OSI ED-  
UCATION

C.

Full Name (Last, First, Middle Initial)  
Wi Spt Collections Trust Fund

Mailing Address PO Box 74400

City Milwaukee State WI Zip Code 53274-0001

Purpose of Disbursement  
GARNISHMENTS- WI SPT COL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 00320.E22550

Date of Disbursement

01 / 16 / 2009

Amount of Each Disbursement this Period

60.00

[MEMO ITEM]

MEMO: GARNISHMENTS- WI SPT  
COL

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

0.00

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



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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.**

Full Name (Last, First, Middle Initial)  
MN Dept of Revenue

Mailing Address 658 Cedar St Ste 400

City State Zip Code  
Saint Paul MN 55155-1603

Purpose of Disbursement  
GARNISHMENTS-FEA MN DEPT

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 00320.E22551

Date of Disbursement

01 / 16 / 2009

Amount of Each Disbursement this Period

162.81

**[MEMO ITEM]**

MEMO: GARNISHMENTS-FEA MN DEPT

**B.**

Full Name (Last, First, Middle Initial)  
Paychex

Mailing Address 1210 Northland Dr Ste 100

City State Zip Code  
Saint Paul MN 55120-1181

Purpose of Disbursement  
SEE BELOW: FEA Salary

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 00320.E22544

Date of Disbursement

01 / 16 / 2009

Amount of Each Disbursement this Period

35788.14

SEE BELOW: FEA SALARY

**C.**

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

Mailing Address 475 Dayton Ave #1  
#228

City State Zip Code  
St Paul MN 55102-

Purpose of Disbursement  
FEA SALARY

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 00320.E22371

Date of Disbursement

01 / 16 / 2009

Amount of Each Disbursement this Period

368.33

**[MEMO ITEM]**

MEMO: FEA SALARY

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

35788.14

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<p><b>A.</b> Full Name (Last, First, Middle Initial) Alexander J. Argo</p> <p>Mailing Address 9428 Erin Ct</p> <p>City Woodbury State MN Zip Code 55129-</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22372 <b>Date of Disbursement</b> 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 464.93</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Breanna M. Barr</p> <p>Mailing Address 736 Wilson Ave</p> <p>City Saint Paul State MN Zip Code 55106-5526</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22373 <b>Date of Disbursement</b> 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 509.29</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Christe Capistrant</p> <p>Mailing Address 111 E Kellogg Blvd #2911</p> <p>City St Paul State MN Zip Code 55101-</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22374 <b>Date of Disbursement</b> 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 422.21</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>

<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 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<p><b>A.</b> Full Name (Last, First, Middle Initial) William B. Carpenter</p> <p>Mailing Address 1579 H East County Rd D</p> <p>City Saint Paul State MN Zip Code 55109-</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22375 <b>Date of Disbursement</b> 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 493.94</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Joel P. Chavez</p> <p>Mailing Address 475 Dayton Ave Apt 1</p> <p>City St Paul State MN Zip Code 55102-</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22376 <b>Date of Disbursement</b> 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 562.29</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Christian G. Darouni</p> <p>Mailing Address 758 Reaney Ave</p> <p>City St Paul State MN Zip Code 55106-</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22377 <b>Date of Disbursement</b> 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 694.68</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>

<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 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

A.	Full Name (Last, First, Middle Initial) Pamela A. Finney	Transaction ID: 00320.E22381 Date of Disbursement MM / DD / YYYY 01 / 16 / 2009
	Mailing Address 441 Wheeler St N #1	Amount of Each Disbursement this Period 575.99
	City St Paul State MN Zip Code 55104-	
	Purpose of Disbursement FEA SALARY Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**[MEMO ITEM]**  
MEMO: FEA SALARY

B.	Full Name (Last, First, Middle Initial) Raymond C. Forrest	Transaction ID: 00320.E22382 Date of Disbursement MM / DD / YYYY 01 / 16 / 2009
	Mailing Address 680 Stewart Ave	Amount of Each Disbursement this Period 358.37
	City St Paul State MN Zip Code 55102-	
	Purpose of Disbursement FEA SALARY Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**[MEMO ITEM]**  
MEMO: FEA SALARY

C.	Full Name (Last, First, Middle Initial) Daniel Hanover	Transaction ID: 00320.E22383 Date of Disbursement MM / DD / YYYY 01 / 16 / 2009
	Mailing Address 575 Grand Ave	Amount of Each Disbursement this Period 640.05
	City Saint Paul State MN Zip Code 55102-	
	Purpose of Disbursement FEA SALARY Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**[MEMO ITEM]**  
MEMO: FEA SALARY

<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 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Dallas J. Hansen</p> <hr/> <p>Mailing Address 11210 Partridge St Dh</p> <hr/> <p>City Coon Rapids State MN Zip Code 55433-</p> <hr/> <p>Purpose of Disbursement FEA SALARY</p> <p>Candidate Name</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <hr/> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22385</p> <p>Date of Disbursement</p> <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>1</td><td>/</td><td>1</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <hr/> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">543.33</td> </tr> </table> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	1	6	/	2	0	0	9	543.33
M	M	/	D	D	/	Y	Y	Y	Y													
0	1	/	1	6	/	2	0	0	9													
543.33																						
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Sarah Hansen-Jones</p> <hr/> <p>Mailing Address 505 Hoyt Ave E</p> <hr/> <p>City Saint Paul State MN Zip Code 55106-</p> <hr/> <p>Purpose of Disbursement FEA SALARY</p> <p>Candidate Name</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <hr/> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22386</p> <p>Date of Disbursement</p> <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>1</td><td>/</td><td>1</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <hr/> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">437.90</td> </tr> </table> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	1	6	/	2	0	0	9	437.90
M	M	/	D	D	/	Y	Y	Y	Y													
0	1	/	1	6	/	2	0	0	9													
437.90																						
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Aaron Heidebrink</p> <hr/> <p>Mailing Address 1975 W University Ave #242</p> <hr/> <p>City St Paul State MN Zip Code 55105-</p> <hr/> <p>Purpose of Disbursement FEA SALARY</p> <p>Candidate Name</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <hr/> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22387</p> <p>Date of Disbursement</p> <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>1</td><td>/</td><td>1</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <hr/> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">459.38</td> </tr> </table> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	1	6	/	2	0	0	9	459.38
M	M	/	D	D	/	Y	Y	Y	Y													
0	1	/	1	6	/	2	0	0	9													
459.38																						

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>0.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 94 / 154

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<p><b>A.</b> Full Name (Last, First, Middle Initial) Caitlin B. Houlton</p> <p>Mailing Address 1185 Main St NW</p> <p>City Elk River State MN Zip Code 55330-1802</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22389 <b>Date of Disbursement</b> 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 140.96</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Ronald Huettl</p> <p>Mailing Address 70 Virginia St #1</p> <p>City St Paul State MN Zip Code 55107-</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22390 <b>Date of Disbursement</b> 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 1369.43</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) John Hungate</p> <p>Mailing Address 680 Stewart Ave</p> <p>City Saint Paul State MN Zip Code 55102-</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22391 <b>Date of Disbursement</b> 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 85.14</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>

<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 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<p><b>A.</b> Full Name (Last, First, Middle Initial) Kathleen Hupalo</p> <p>Mailing Address 684 Delaware Ave</p> <p>City St Paul State MN Zip Code 55107-</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22392 <b>Date of Disbursement</b> 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 147.76</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Michael T. Laehn</p> <p>Mailing Address 4140 Columbus Ave Apt 2</p> <p>City Minneapolis State MN Zip Code 55407-5082</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22393 <b>Date of Disbursement</b> 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 458.31</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Nicholas Lynch</p> <p>Mailing Address 2245 Ariel St N</p> <p>City Saint Paul State MN Zip Code 55109-2855</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22394 <b>Date of Disbursement</b> 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 204.44</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>

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

0.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

A.	Full Name (Last, First, Middle Initial) Landrey McKinzie	Transaction ID: 00320.E22396 Date of Disbursement 01 / 16 / 2009
	Mailing Address 7338 Jewel Ave S	Amount of Each Disbursement this Period 449.91
	City Cottage Grove State MN Zip Code 55016-	
	Purpose of Disbursement FEA SALARY Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> MEMO: FEA SALARY

B.	Full Name (Last, First, Middle Initial) William J. Milbach	Transaction ID: 00320.E22397 Date of Disbursement 01 / 16 / 2009
	Mailing Address 1438 N Pascal	Amount of Each Disbursement this Period 1300.25
	City St Paul State MN Zip Code 55102-	
	Purpose of Disbursement FEA SALARY Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> MEMO: FEA SALARY

C.	Full Name (Last, First, Middle Initial) Adam Mohler	Transaction ID: 00320.E22398 Date of Disbursement 01 / 16 / 2009
	Mailing Address 3924 Cedar Grove Pkwy Apt 207	Amount of Each Disbursement this Period 857.50
	City Eagan State MN Zip Code 55122-	
	Purpose of Disbursement FEA SALARY Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> MEMO: FEA SALARY

<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 3X)  
ITEMIZED DISBURSEMENTS**

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FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<p><b>A.</b> Full Name (Last, First, Middle Initial) Cherye Lee Montgomery</p> <p>Mailing Address Po Box 65231</p> <p>City Saint Paul State MN Zip Code 55165-</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22399 <b>Date of Disbursement</b> 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 463.38</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Martha M. Nichols</p> <p>Mailing Address 2124 Bates Ave. H4</p> <p>City St. Paul State MN Zip Code 55106-</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22400 <b>Date of Disbursement</b> 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 488.43</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Francis Dana Payne</p> <p>Mailing Address 1314 Marquette Ave Apt 2908</p> <p>City Minneapolis State MN Zip Code 55403-4136</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22401 <b>Date of Disbursement</b> 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 1019.52</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>

<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 3X)  
ITEMIZED DISBURSEMENTS**

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FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<p><b>A.</b> Full Name (Last, First, Middle Initial) Donald G. Pelton</p> <p>Mailing Address 535 Asbury St Apt 18</p> <p>City Saint Paul State MN Zip Code 55104-2389</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22402 <b>Date of Disbursement</b> 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 233.02</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Lori-Anne Pizzella</p> <p>Mailing Address 680 Stewart Ave</p> <p>City St Paul State MN Zip Code 55102-</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22403 <b>Date of Disbursement</b> 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 262.23</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Shawn K. Ricks</p> <p>Mailing Address 1871 East 7th St. # 6</p> <p>City St. Paul State MN Zip Code 55115-</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22404 <b>Date of Disbursement</b> 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 138.31</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>

<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 3X)  
ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

A.	Full Name (Last, First, Middle Initial) David Rupprecht	Transaction ID: 00320.E22405 Date of Disbursement 01 / 16 / 2009
	Mailing Address 1550 Edgerton St Apt 303	Amount of Each Disbursement this Period 87.12
	City St Paul State MN Zip Code 55105-	
	Purpose of Disbursement FEA SALARY Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> MEMO: FEA SALARY

B.	Full Name (Last, First, Middle Initial) Dennis Scott	Transaction ID: 00320.E22406 Date of Disbursement 01 / 16 / 2009
	Mailing Address 680 Stewart Ave Sco	Amount of Each Disbursement this Period 438.37
	City St Paul State MN Zip Code 55102-	
	Purpose of Disbursement FEA SALARY Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> MEMO: FEA SALARY

C.	Full Name (Last, First, Middle Initial) Meghan Shultz	Transaction ID: 00320.E22407 Date of Disbursement 01 / 16 / 2009
	Mailing Address 680 Stewart Ave	Amount of Each Disbursement this Period 270.41
	City Minneapolis State MN Zip Code 55407-	
	Purpose of Disbursement FEA SALARY Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> MEMO: FEA SALARY

<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 3X)  
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FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<p><b>A.</b> Full Name (Last, First, Middle Initial) Joseph Slattery</p> <p>Mailing Address 223 Bates St #707</p> <p>City St Paul State MN Zip Code 55102-</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22408</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="142.70"/></p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) John Suder</p> <p>Mailing Address 680 Stewart Ave</p> <p>City St Paul State MN Zip Code 55102-</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22409</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="980.32"/></p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Detra Turner</p> <p>Mailing Address 922 Wescott Trail #202</p> <p>City Saint Paul State MN Zip Code 55123-</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22410</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="334.74"/></p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>

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

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

**SCHEDULE B (FEC Form 3X)  
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FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<p><b>A.</b> Full Name (Last, First, Middle Initial) Joyce Walker</p> <p>Mailing Address 445 View St</p> <p>City Saint Paul State MN Zip Code 55102-3426</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22411 <b>Date of Disbursement</b> 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 524.18</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Lewis C. Wilson</p> <p>Mailing Address 235 Exeter Pl Apt 304</p> <p>City Saint Paul State MN Zip Code 55104-5711</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22412 <b>Date of Disbursement</b> 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 133.57</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Michael A. Wright</p> <p>Mailing Address 2477 Indian Way</p> <p>City St Paul State MN Zip Code 55109-</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22413 <b>Date of Disbursement</b> 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 439.84</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>

<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 3X) 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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<p><b>A.</b> Full Name (Last, First, Middle Initial) Joel Cary</p> <p>Mailing Address 12809 44th PI NE</p> <p>City Saint Michael State MN Zip Code 55376-3030</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22421 <b>Date of Disbursement</b> 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 2110.29</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Susan H. Closmore</p> <p>Mailing Address 1308 7th St SE Apt 13</p> <p>City Minneapolis State MN Zip Code 55414-1678</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22422 <b>Date of Disbursement</b> 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 127.87</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Gina Lynn Countryman</p> <p>Mailing Address 1282 Deercliff Ln</p> <p>City Eagan State MN Zip Code 55123-1434</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22423 <b>Date of Disbursement</b> 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 1557.21</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>

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

0.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<p><b>A.</b> Full Name (Last, First, Middle Initial) Andrew Stakston</p> <p>Mailing Address 525 Park St</p> <p>City Saint Paul State MN Zip Code 55103-</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22424 <b>Date of Disbursement</b> 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 127.87</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Travis Symoniak</p> <p>Mailing Address 12457 Ilex St NW</p> <p>City Coon Rapids State MN Zip Code 55448-2664</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22427 <b>Date of Disbursement</b> 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 333.50</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Robert A. Wills</p> <p>Mailing Address 1491 Woodview St E</p> <p>City Saint Paul State MN Zip Code 55122-1323</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22428 <b>Date of Disbursement</b> 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 892.72</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>

<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 3X)  
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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<p><b>A.</b> Full Name (Last, First, Middle Initial) Matthew Kirkpatrick</p> <p>Mailing Address 3900 Valley View Dr N Apt 303</p> <p>City Saint Paul State MN Zip Code 55122-1581</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22430 <b>Date of Disbursement</b> 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 1007.34</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Anthony Post</p> <p>Mailing Address 1002 Drew Drive</p> <p>City Saint Paul State MN Zip Code 55124-</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22431 <b>Date of Disbursement</b> 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 905.25</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Darren Bearson</p> <p>Mailing Address 3930 Yellowstone Ln N</p> <p>City Plymouth State MN Zip Code 55446-2818</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22432 <b>Date of Disbursement</b> 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 2486.95</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>

<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 3X)  
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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

A.	Full Name (Last, First, Middle Initial) Dorothy Fleming	Transaction ID: 00320.E22434 Date of Disbursement 01 / 16 / 2009
	Mailing Address 3101 Wendhurst Ave	Amount of Each Disbursement this Period 1336.29
	City St Anthony State MN Zip Code 55418-1725	
	Purpose of Disbursement FEA SALARY Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> MEMO: FEA SALARY

B.	Full Name (Last, First, Middle Initial) Thomas W. Hoffman	Transaction ID: 00320.E22755 Date of Disbursement 01 / 16 / 2009
	Mailing Address 6051 Courtyly Alcove Ave	Amount of Each Disbursement this Period 29.79
	City Woodbury State MN Zip Code 55125-	
	Purpose of Disbursement FEA SALARY Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> MEMO: FEA SALARY

C.	Full Name (Last, First, Middle Initial) Angela Nielsen	Transaction ID: 00320.E22859 Date of Disbursement 01 / 16 / 2009
	Mailing Address 123M McKnight Rd N	Amount of Each Disbursement this Period 1623.30
	City Saint Paul State MN Zip Code 55119-6653	
	Purpose of Disbursement FEA SALARY Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> MEMO: FEA SALARY

<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 3X)  
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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<p><b>A.</b> Full Name (Last, First, Middle Initial) Nick Erickson</p> <p>Mailing Address 9344 134th Street</p> <p>City Savage State MN Zip Code 55378-</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E23504 <b>Date of Disbursement</b> 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 861.76</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Ronald Wayne Carey</p> <p>Mailing Address 2638 146th Ave NE</p> <p>City Ham Lake State MN Zip Code 55304-6420</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E24494 <b>Date of Disbursement</b> 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 2520.05</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Patty Daugherty</p> <p>Mailing Address 1395 Farrington St Apt A</p> <p>City Saint Paul State MN Zip Code 55117-</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E24687 <b>Date of Disbursement</b> 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 274.28</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>

<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 3X) 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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)  
Bethany Dorobiala

Mailing Address 9225 Cornell Bay

City Woodbury State MN Zip Code 55125-

Purpose of Disbursement  
FEA SALARY

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 00320.E24752  
Date of Disbursement

01 / 16 / 2009

Amount of Each Disbursement this Period

506.06

[MEMO ITEM]  
MEMO: FEA SALARY

B.

Full Name (Last, First, Middle Initial)  
Jeannette Manning

Mailing Address 749 Ottawa Ave

City St Paul State MN Zip Code 55104-

Purpose of Disbursement  
FEA PAYROLL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 00320.E26298  
Date of Disbursement

01 / 16 / 2009

Amount of Each Disbursement this Period

260.87

[MEMO ITEM]  
MEMO: FEA PAYROLL

C.

Full Name (Last, First, Middle Initial)  
Terese Emberson

Mailing Address 165 County Road B2 E Apt 211

City Saint Paul State MN Zip Code 55117-1510

Purpose of Disbursement  
FEA SALARY

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 00320.E28640  
Date of Disbursement

01 / 16 / 2009

Amount of Each Disbursement this Period

403.89

[MEMO ITEM]  
MEMO: FEA SALARY

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

0.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<p><b>A.</b> Full Name (Last, First, Middle Initial) Timothy Gould</p> <p>Mailing Address 192 Linden Circle</p> <p>City Apple Valley State MN Zip Code 55124-</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E29194 <b>Date of Disbursement</b> 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 922.32</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Paychex</p> <p>Mailing Address 1210 Northland Dr Ste 100</p> <p>City Saint Paul State MN Zip Code 55120-1181</p> <p>Purpose of Disbursement SEE BELOW: FEA Salary</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22553 <b>Date of Disbursement</b> 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 38400.89</p> <p>SEE BELOW: FEA SALARY</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Michael J. Anderson</p> <p>Mailing Address 475 Dayton Ave #1 #228</p> <p>City St Paul State MN Zip Code 55102-</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22564 <b>Date of Disbursement</b> 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 354.90</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>

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

38400.89

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<p><b>A.</b> Full Name (Last, First, Middle Initial) Alexander J. Argo</p> <p>Mailing Address 9428 Erin Ct</p> <p>City Woodbury State MN Zip Code 55129-</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22565 <b>Date of Disbursement</b> 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 442.87</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Breanna M. Barr</p> <p>Mailing Address 736 Wilson Ave</p> <p>City Saint Paul State MN Zip Code 55106-5526</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22566 <b>Date of Disbursement</b> 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 468.87</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Christe Capistrant</p> <p>Mailing Address 111 E Kellogg Blvd #2911</p> <p>City St Paul State MN Zip Code 55101-</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22567 <b>Date of Disbursement</b> 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 386.79</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>

<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 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

A.	Full Name (Last, First, Middle Initial) William B. Carpenter	Transaction ID: 00320.E22568 Date of Disbursement 01 / 30 / 2009
	Mailing Address 1579 H East County Rd D	Amount of Each Disbursement this Period 610.78
	City Saint Paul State MN Zip Code 55109-	
	Purpose of Disbursement FEA PAYROLL	[MEMO ITEM] MEMO: FEA PAYROLL
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Joel P. Chavez	Transaction ID: 00320.E22569 Date of Disbursement 01 / 30 / 2009
	Mailing Address 475 Dayton Ave Apt 1	Amount of Each Disbursement this Period 637.39
	City St Paul State MN Zip Code 55102-	
	Purpose of Disbursement FEA PAYROLL	[MEMO ITEM] MEMO: FEA PAYROLL
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Christian G. Darouni	Transaction ID: 00320.E22570 Date of Disbursement 01 / 30 / 2009
	Mailing Address 758 Reaney Ave	Amount of Each Disbursement this Period 1071.41
	City St Paul State MN Zip Code 55106-	
	Purpose of Disbursement FEA PAYROLL	[MEMO ITEM] MEMO: FEA PAYROLL
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<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 3X)  
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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<p><b>A.</b> Full Name (Last, First, Middle Initial) Pamela A. Finney</p> <p>Mailing Address 441 Wheeler St N #1</p> <p>City St Paul State MN Zip Code 55104-</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22575</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="478.93"/></p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Raymond C. Forrest</p> <p>Mailing Address 680 Stewart Ave</p> <p>City St Paul State MN Zip Code 55102-</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22576</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="644.09"/></p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Kianna Gordon</p> <p>Mailing Address 6842 Homestead Ave S</p> <p>City Cottage Grove State MN Zip Code 55016-</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22577</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="207.63"/></p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

A.

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

Mailing Address 575 Grand Ave

City State Zip Code  
Saint Paul MN 55102-

Purpose of Disbursement  
FEA SALARY

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 00320.E22578  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

549.17

[MEMO ITEM]  
MEMO: FEA SALARY

B.

Full Name (Last, First, Middle Initial)  
Dallas J. Hansen

Mailing Address 11210 Partridge St  
Dh

City State Zip Code  
Coon Rapids MN 55433-

Purpose of Disbursement  
FEA SALARY

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 00320.E22579  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

349.81

[MEMO ITEM]  
MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)  
Sarah Hansen-Jones

Mailing Address 505 Hoyt Ave E

City State Zip Code  
Saint Paul MN 55106-

Purpose of Disbursement  
FEA SALARY

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 00320.E22580  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

505.87

[MEMO ITEM]  
MEMO: FEA SALARY

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

0.00

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



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 113 / 154

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

A.	Full Name (Last, First, Middle Initial) Aaron Heidebrink	Transaction ID: 00320.E22581 Date of Disbursement 01 / 30 / 2009
	Mailing Address 1975 W University Ave #242	Amount of Each Disbursement this Period 562.27
	City St Paul State MN Zip Code 55105-	
	Purpose of Disbursement FEA SALARY	[MEMO ITEM] MEMO: FEA SALARY
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Caitlin B. Houlton	Transaction ID: 00320.E22583 Date of Disbursement 01 / 30 / 2009
	Mailing Address 1185 Main St NW	Amount of Each Disbursement this Period 287.22
	City Elk River State MN Zip Code 55330-1802	
	Purpose of Disbursement FEA SALARY	[MEMO ITEM] MEMO: FEA SALARY
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Ronald Huettl	Transaction ID: 00320.E22584 Date of Disbursement 01 / 30 / 2009
	Mailing Address 70 Virginia St #1	Amount of Each Disbursement this Period 1369.43
	City St Paul State MN Zip Code 55107-	
	Purpose of Disbursement FEA SALARY	[MEMO ITEM] MEMO: FEA SALARY
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

<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 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<p><b>A.</b> Full Name (Last, First, Middle Initial) John Hungate</p> <p>Mailing Address 680 Stewart Ave</p> <p>City Saint Paul State MN Zip Code 55102-</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22585 <b>Date of Disbursement</b> 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 103.02</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Kathleen Hupalo</p> <p>Mailing Address 684 Delaware Ave</p> <p>City St Paul State MN Zip Code 55107-</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22586 <b>Date of Disbursement</b> 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 297.11</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Michael T. Laehn</p> <p>Mailing Address 4140 Columbus Ave Apt 2</p> <p>City Minneapolis State MN Zip Code 55407-5082</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22587 <b>Date of Disbursement</b> 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 504.10</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>

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

0.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.**

Full Name (Last, First, Middle Initial)  
Nicholas Lynch

Mailing Address 2245 Ariel St N

City Saint Paul State MN Zip Code 55109-2855

Purpose of Disbursement  
FEA SALARY

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 00320.E22589  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
MEMO: FEA SALARY

**B.**

Full Name (Last, First, Middle Initial)  
Landrey McKinzie

Mailing Address 7338 Jewel Ave S

City Cottage Grove State MN Zip Code 55016-

Purpose of Disbursement  
FEA SALARY

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 00320.E22591  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
MEMO: FEA SALARY

**C.**

Full Name (Last, First, Middle Initial)  
William J. Milbach

Mailing Address 1438 N Pascal

City St Paul State MN Zip Code 55102-

Purpose of Disbursement  
FEA SALARY

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 00320.E22592  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
MEMO: FEA SALARY

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

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<p><b>A.</b> Full Name (Last, First, Middle Initial) Adam Mohler</p> <p>Mailing Address 3924 Cedar Grove Pkwy Apt 207</p> <p>City Eagan State MN Zip Code 55122-</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22593 <b>Date of Disbursement</b> 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 936.34</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Cherye Lee Montgomery</p> <p>Mailing Address Po Box 65231</p> <p>City Saint Paul State MN Zip Code 55165-</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22594 <b>Date of Disbursement</b> 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 607.67</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Francis Dana Payne</p> <p>Mailing Address 1314 Marquette Ave Apt 2908</p> <p>City Minneapolis State MN Zip Code 55403-4136</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22595 <b>Date of Disbursement</b> 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 1099.36</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>

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

0.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<p><b>A.</b> Full Name (Last, First, Middle Initial) Donald G. Pelton</p> <p>Mailing Address 535 Asbury St Apt 18</p> <p>City Saint Paul State MN Zip Code 55104-2389</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22596 <b>Date of Disbursement</b> 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 317.84</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Lori-Anne Pizzella</p> <p>Mailing Address 680 Stewart Ave</p> <p>City St Paul State MN Zip Code 55102-</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22597 <b>Date of Disbursement</b> 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 557.87</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Shawn K. Ricks</p> <p>Mailing Address 1871 East 7th St. # 6</p> <p>City St. Paul State MN Zip Code 55115-</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22598 <b>Date of Disbursement</b> 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 325.53</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>

<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 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<p><b>A.</b> Full Name (Last, First, Middle Initial) Dena Roby</p> <p>Mailing Address 1577 Jessamine Ln B</p> <p>City St Paul State MN Zip Code 55106-</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22599 <b>Date of Disbursement</b> 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 26.62</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) David Rupprecht</p> <p>Mailing Address 1550 Edgerton St Apt 303</p> <p>City St Paul State MN Zip Code 55105-</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22600 <b>Date of Disbursement</b> 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 110.34</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Dennis Scott</p> <p>Mailing Address 680 Stewart Ave Sco</p> <p>City St Paul State MN Zip Code 55102-</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22601 <b>Date of Disbursement</b> 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 669.37</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<b>A.</b> Full Name (Last, First, Middle Initial) Meghan Shultz <hr/> Mailing Address 680 Stewart Ave <hr/> City Minneapolis State MN Zip Code 55407- <hr/> Purpose of Disbursement FEA SALARY Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00320.E22602 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 544.46
	[MEMO ITEM] MEMO: FEA SALARY
	Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Joseph Slattery <hr/> Mailing Address 223 Bates St #707 <hr/> City St Paul State MN Zip Code 55102- <hr/> Purpose of Disbursement FEA SALARY Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00320.E22603 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 436.51
	[MEMO ITEM] MEMO: FEA SALARY
	Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) John Suder <hr/> Mailing Address 680 Stewart Ave <hr/> City St Paul State MN Zip Code 55102- <hr/> Purpose of Disbursement FEA SALARY Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00320.E22604 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 1067.94
	[MEMO ITEM] MEMO: FEA SALARY
	Category/ Type

<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 3X)  
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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<p><b>A.</b> Full Name (Last, First, Middle Initial) Joyce Walker</p> <p>Mailing Address 445 View St</p> <p>City Saint Paul State MN Zip Code 55102-3426</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22605 <b>Date of Disbursement</b> 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 231.58</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Lewis C. Wilson</p> <p>Mailing Address 235 Exeter Pl Apt 304</p> <p>City Saint Paul State MN Zip Code 55104-5711</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22606 <b>Date of Disbursement</b> 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 265.83</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Michael A. Wright</p> <p>Mailing Address 2477 Indian Way</p> <p>City St Paul State MN Zip Code 55109-</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22607 <b>Date of Disbursement</b> 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 472.60</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>

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

0.00

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



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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<p><b>A.</b> Full Name (Last, First, Middle Initial) Joel Cary</p> <p>Mailing Address 12809 44th PI NE</p> <p>City Saint Michael State MN Zip Code 55376-3030</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22614 <b>Date of Disbursement</b> 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 2110.29</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Susan H. Closmore</p> <p>Mailing Address 1308 7th St SE Apt 13</p> <p>City Minneapolis State MN Zip Code 55414-1678</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22615 <b>Date of Disbursement</b> 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 127.87</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Gina Lynn Countryman</p> <p>Mailing Address 1282 Deercliff Ln</p> <p>City Eagan State MN Zip Code 55123-1434</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22616 <b>Date of Disbursement</b> 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 1557.21</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>

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

0.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<p><b>A.</b> Full Name (Last, First, Middle Initial) Andrew Stakston</p> <p>Mailing Address 525 Park St</p> <p>City Saint Paul State MN Zip Code 55103-</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22617 <b>Date of Disbursement</b> 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 127.87</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Nick Erickson</p> <p>Mailing Address 9344 134th Street</p> <p>City Savage State MN Zip Code 55378-</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22620 <b>Date of Disbursement</b> 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 861.76</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Matthew Kirkpatrick</p> <p>Mailing Address 3900 Valley View Dr N Apt 303</p> <p>City Saint Paul State MN Zip Code 55122-1581</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22633 <b>Date of Disbursement</b> 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 1007.34</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>

<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 3X) 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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

A.	Full Name (Last, First, Middle Initial) Anthony Post	Transaction ID: 00320.E22634 Date of Disbursement 01 / 30 / 2009
	Mailing Address 1002 Drew Drive	Amount of Each Disbursement this Period 922.32
	City Saint Paul State MN Zip Code 55124-	
	Purpose of Disbursement FEA SALARY Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> MEMO: FEA SALARY

B.	Full Name (Last, First, Middle Initial) Travis Symoniak	Transaction ID: 00320.E22635 Date of Disbursement 01 / 30 / 2009
	Mailing Address 12457 Ilex St NW	Amount of Each Disbursement this Period 333.50
	City Coon Rapids State MN Zip Code 55448-2664	
	Purpose of Disbursement FEA SALARY Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> MEMO: FEA SALARY

C.	Full Name (Last, First, Middle Initial) Robert A. Wills	Transaction ID: 00320.E22636 Date of Disbursement 01 / 30 / 2009
	Mailing Address 1491 Woodview St E	Amount of Each Disbursement this Period 582.72
	City Saint Paul State MN Zip Code 55122-1323	
	Purpose of Disbursement FEA SALARY Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> MEMO: FEA SALARY

<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 3X)  
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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

A.	Full Name (Last, First, Middle Initial) Darren Bearson	Transaction ID: 00320.E22637 Date of Disbursement 01 / 30 / 2009
	Mailing Address 3930 Yellowstone Ln N	Amount of Each Disbursement this Period 2486.95
	City Plymouth State MN Zip Code 55446-2818	
	Purpose of Disbursement FEA SALARY Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> MEMO: FEA SALARY

B.	Full Name (Last, First, Middle Initial) Dorothy Fleming	Transaction ID: 00320.E22639 Date of Disbursement 01 / 30 / 2009
	Mailing Address 3101 Wendhurst Ave	Amount of Each Disbursement this Period 1336.29
	City St Anthony State MN Zip Code 55418-1725	
	Purpose of Disbursement FEA SALARY Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> MEMO: FEA SALARY

C.	Full Name (Last, First, Middle Initial) Thomas W. Hoffman	Transaction ID: 00320.E22770 Date of Disbursement 01 / 30 / 2009
	Mailing Address 6051 Courtyly Alcove Ave	Amount of Each Disbursement this Period 82.53
	City Woodbury State MN Zip Code 55125-	
	Purpose of Disbursement FEA SALARY Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> MEMO: FEA SALARY

<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 3X) ITEMIZED DISBURSEMENTS

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Detailed Summary Page

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

A.	Full Name (Last, First, Middle Initial) Angela Nielsen	Transaction ID: 00320.E22866 Date of Disbursement 01 / 30 / 2009
	Mailing Address 123M McKnight Rd N	Amount of Each Disbursement this Period 1623.30
	City Saint Paul State MN Zip Code 55119-6653	
	Purpose of Disbursement FEA SALARY Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> MEMO: FEA SALARY

B.	Full Name (Last, First, Middle Initial) Martha M. Nichols	Transaction ID: 00320.E22902 Date of Disbursement 01 / 30 / 2009
	Mailing Address 2124 Bates Ave. H4	Amount of Each Disbursement this Period 403.99
	City St. Paul State MN Zip Code 55106-	
	Purpose of Disbursement FEA SALARY Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> MEMO: FEA SALARY

C.	Full Name (Last, First, Middle Initial) Robert A. Wills	Transaction ID: 00320.E22913 Date of Disbursement 01 / 30 / 2009
	Mailing Address 1491 Woodview St E	Amount of Each Disbursement this Period 310.00
	City Saint Paul State MN Zip Code 55122-1323	
	Purpose of Disbursement FEA SALARY Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> MEMO: FEA SALARY

<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 3X) 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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<p><b>A.</b> Full Name (Last, First, Middle Initial) Ronald Wayne Carey</p> <p>Mailing Address 2638 146th Ave NE</p> <p>City Ham Lake State MN Zip Code 55304-6420</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E24540 <b>Date of Disbursement</b> 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 2520.05</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Patty Daugherty</p> <p>Mailing Address 1395 Farrington St Apt A</p> <p>City Saint Paul State MN Zip Code 55117-</p> <p>Purpose of Disbursement FEA PAYROLL</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E24570 <b>Date of Disbursement</b> 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 364.16</p> <p><b>[MEMO ITEM]</b> MEMO: FEA PAYROLL</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bethany Dorobiala</p> <p>Mailing Address 9225 Cornell Bay</p> <p>City Woodbury State MN Zip Code 55125-</p> <p>Purpose of Disbursement FEA SALARY</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E24739 <b>Date of Disbursement</b> 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 355.81</p> <p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>

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

0.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

A.	Full Name (Last, First, Middle Initial) Jeannette Manning	Transaction ID: 00320.E26295 Date of Disbursement 01 / 30 / 2009
	Mailing Address 749 Ottawa Ave	Amount of Each Disbursement this Period 475.91
	City St Paul State MN Zip Code 55104-	
	Purpose of Disbursement FEA SALARY Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> MEMO: FEA SALARY

B.	Full Name (Last, First, Middle Initial) Terese Emberson	Transaction ID: 00320.E28641 Date of Disbursement 01 / 30 / 2009
	Mailing Address 165 County Road B2 E Apt 211	Amount of Each Disbursement this Period 472.93
	City Saint Paul State MN Zip Code 55117-1510	
	Purpose of Disbursement FEA SALARY Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> MEMO: FEA SALARY

C.	Full Name (Last, First, Middle Initial) Timothy Gould	Transaction ID: 00320.E29211 Date of Disbursement 01 / 30 / 2009
	Mailing Address 192 Linden Circle	Amount of Each Disbursement this Period 922.32
	City Apple Valley State MN Zip Code 55124-	
	Purpose of Disbursement FEA SALARY Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> MEMO: FEA SALARY

<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 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<p><b>A.</b> Full Name (Last, First, Middle Initial) Paychex</p> <p>Mailing Address 1210 Northland Dr Ste 100</p> <p>City Saint Paul State MN Zip Code 55120-1181</p> <p>Purpose of Disbursement SEE BELOW: FEA Payroll Taxes</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22555 <b>Date of Disbursement</b> 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 15551.38</p> <p>SEE BELOW: FEA PAYROLL TAXES</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) MN Dept of Revenue</p> <p>Mailing Address 658 Cedar St Ste 400</p> <p>City Saint Paul State MN Zip Code 55155-1603</p> <p>Purpose of Disbursement FEA PAYROLL TAXES</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22900 <b>Date of Disbursement</b> 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 1935.27</p> <p><b>[MEMO ITEM]</b> MEMO: FEA PAYROLL TAXES</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) MN State Unemployment</p> <p>Mailing Address 332 Minnesota St</p> <p>City Saint Paul State MN Zip Code 55101-1314</p> <p>Purpose of Disbursement PAYROLL TAXES-FEA STATE UN</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22926 <b>Date of Disbursement</b> 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 921.19</p> <p><b>[MEMO ITEM]</b> MEMO: PAYROLL TAXES-FEA STATE UN</p>

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

15551.38

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



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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<p><b>A.</b> Full Name (Last, First, Middle Initial) Internal Revenue Service</p> <p>Mailing Address P.O. BOX 43251</p> <p>City Ogden State UT Zip Code 84201-0001</p> <p>Purpose of Disbursement FEA PAYROLL TAXES</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E25041 <b>Date of Disbursement</b> 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 12694.92</p> <p><b>[MEMO ITEM]</b> MEMO: FEA PAYROLL TAXES</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Paychex</p> <p>Mailing Address 1210 Northland Dr Ste 100</p> <p>City Saint Paul State MN Zip Code 55120-1181</p> <p>Purpose of Disbursement SEE BELOW: Garnishments</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22556 <b>Date of Disbursement</b> 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 949.34</p> <p>SEE BELOW: GARNISHMENTS</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) MN Child Support Center</p> <p>Mailing Address PO Box 64306</p> <p>City Saint Paul State MN Zip Code 55164-0306</p> <p>Purpose of Disbursement WITHOLDINGS-MN CHILD SUPPO</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22894 <b>Date of Disbursement</b> 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 686.65</p> <p><b>[MEMO ITEM]</b> MEMO: WITHOLDINGS-MN CHILD SUPPO</p>

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

949.34

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<b>A.</b> Full Name (Last, First, Middle Initial) Osi Education Services, Inc. <hr/> Mailing Address PO Box 929 <hr/> City Brookfield State WI Zip Code 53008-0929 <hr/> Purpose of Disbursement GARNISHMENTS-OSI EDUCATION Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00320.E22895 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 68.03 <hr/> <b>[MEMO ITEM]</b> MEMO: GARNISHMENTS-OSI ED-UCATION
<b>B.</b> Full Name (Last, First, Middle Initial) Wi Spt Collections Trust Fund <hr/> Mailing Address PO Box 74400 <hr/> City Milwaukee State WI Zip Code 53274-0001 <hr/> Purpose of Disbursement GARNISHMENTS- WI SPT COL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00320.E22897 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 60.00 <hr/> <b>[MEMO ITEM]</b> MEMO: GARNISHMENTS- WI SPT COL
<b>C.</b> Full Name (Last, First, Middle Initial) MN Dept of Revenue <hr/> Mailing Address 658 Cedar St Ste 400 <hr/> City Saint Paul State MN Zip Code 55155-1603 <hr/> Purpose of Disbursement GARNISHMENTS Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00320.E22898 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 134.66 <hr/> <b>[MEMO ITEM]</b> MEMO: GARNISHMENTS

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	0.00

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<p><b>A.</b> Full Name (Last, First, Middle Initial) Popp.com</p> <p>Mailing Address PO Box 27110</p> <p>City Minneapolis State MN Zip Code 55427-</p> <p>Purpose of Disbursement Party Telephone/FEA</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22457 <b>Date of Disbursement</b> 01 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 1040.20</p> <p>PARTY TELEPHONE/FEA</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Principal Financial Group</p> <p>Mailing Address 711 High St</p> <p>City Des Moines State IA Zip Code 50392-0001</p> <p>Purpose of Disbursement FEA Employee Benefits-Dental</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22505 <b>Date of Disbursement</b> 01 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 613.33</p> <p>FEA EMPLOYEE BENEFITS-DENTAL</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Southwest Publishing</p> <p>Mailing Address 2600 NW Topeka Blvd</p> <p>City Topeka State KS Zip Code 66617-1160</p> <p>Purpose of Disbursement Party Mailhouse Printing</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00320.E22452 <b>Date of Disbursement</b> 01 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 4386.57</p> <p>PARTY MAILHOUSE PRINTING</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	6040.10
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 132 / 154

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

A.

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

Transaction ID: 00320.E22508

Date of Disbursement

Mailing Address 70205 Ameriprise Financial Ctr

<sup>M</sup> 0	<sup>M</sup> 1	/	<sup>D</sup> 2	<sup>D</sup> 6	/	<sup>Y</sup> 2	<sup>Y</sup> 0	<sup>Y</sup> 0	<sup>Y</sup> 9
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City State Zip Code  
Minneapolis MN 55474-0702

Amount of Each Disbursement this Period

1862.31
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Purpose of Disbursement  
FEA Employees IRA Contribution

Category/ Type
-------------------

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

FEA EMPLOYEES IRA CONTRIB-  
UTION

State: District:

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

1862.31
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TOTAL This Period (last page this line number only) ..... ►

131912.73
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**SCHEDULE C (FEC Form 3X)**

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

**LOANS**

NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**Transaction ID:** LS00320.C685325

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Alliance Bank	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 444 Cedar St	
City Saint Paul State MN ZIP Code 55101-2179	

Original Amount of Loan 240101.14	Cumulative Payment To Date 19614.26	Balance Outstanding at Close of This Period 220486.88
--------------------------------------	--	--

**TERMS**

Date Incurred MM DD YYYY 08 09 2008	Date Due 20100809	Interest Rate 8.25 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---	----------------------	-------------------------------	---

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional) .....	<input style="width: 100%;" type="text" value="220486.88"/>
<b>TOTALS</b> This Period (last page in this line only) .....	<input style="width: 100%;" type="text" value="220486.88"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

METHOD OF ALLOCATION FOR:

- SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS
- SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)
- ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)(Seperate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

USE ONLY ONE SECTION, A or B

**A. State and Local Party Committees**

Fixed Percentage (select one)

- \_\_\_\_\_ Presidential-Only Election Year (28% Federal)
- \_\_\_\_\_ Presidential and Senate Election Year (36% Federal)
- \_\_\_\_\_ Senate-Only Election Year (21% Federal)
- X  Non-Presidential and Non-Senate Election Year (15% Federal)

**B. Separate Segregated Funds and Nonconnected Committees**

Flat Minimum Federal Percentage

If the committee will allocate using the flat minimum percentage of 50% federal funds, check

or

If the committee is spending more than 50% federal funds, indicate ratio below

Federal.....  %

Nonfederal.....  %

This ratio applies to (check all that apply):

Administrative  Generic Voter Drive  Public Communications Referencing Party Only

**METHOD OF ALLOCATION FOR:**

- **SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)**(Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)  
 Republican Party of Minnesota

USE ONLY ONE SECTION, A or B

**A. State and Local Party Committees**

**Fixed Percentage (select one)**

- \_\_\_\_\_ Presidential-Only Election Year (28% Federal)
- \_\_\_\_\_ Presidential and Senate Election Year (36% Federal)
- \_\_\_\_\_ Senate-Only Election Year (21% Federal)
- X  Non-Presidential and Non-Senate Election Year (15% Federal)

**B. Separate Segregated Funds and Nonconnected Committees**

**Flat Minimum Federal Percentage**

If the committee will allocate using the flat minimum percentage of 50% federal funds, check

**or**

If the committee is spending more than 50% federal funds, indicate ratio below

Federal.....  %

Nonfederal.....  %

This ratio applies to (check all that apply):

Administrative  Generic Voter Drive  Public Communications Referencing Party Only

**METHOD OF ALLOCATION FOR:**

- **SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)**(Seperate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)  
 Republican Party of Minnesota

USE ONLY ONE SECTION, A or B

**A. State and Local Party Committees**

**Fixed Percentage (select one)**

- \_\_\_\_\_ Presidential-Only Election Year (28% Federal)
- \_\_\_\_\_ Presidential and Senate Election Year (36% Federal)
- \_\_\_\_\_ Senate-Only Election Year (21% Federal)
- X  Non-Presidential and Non-Senate Election Year (15% Federal)

**B. Separate Segregated Funds and Nonconnected Committees**

**Flat Minimum Federal Percentage**

If the committee will allocate using the flat minimum percentage of 50% federal funds, check

**or**

If the committee is spending more than 50% federal funds, indicate ratio below

Federal.....  %

Nonfederal.....  %

This ratio applies to (check all that apply):

Administrative  Generic Voter Drive  Public Communications Referencing Party Only



METHOD OF ALLOCATION FOR:

- SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS
- SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)
- ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)(Seperate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)  
 Republican Party of Minnesota

USE ONLY ONE SECTION, A or B

A. State and Local Party Committees

Fixed Percentage (select one)

- \_\_\_\_\_ Presidential-Only Election Year (28% Federal)
- \_\_\_\_\_ Presidential and Senate Election Year (36% Federal)
- \_\_\_\_\_ Senate-Only Election Year (21% Federal)
- X  Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees

Flat Minimum Federal Percentage

If the committee will allocate using the flat minimum percentage of 50% federal funds, check

or

If the committee is spending more than 50% federal funds, indicate ratio below

Federal.....  %

Nonfederal.....  %

This ratio applies to (check all that apply):

Administrative  Generic Voter Drive  Public Communications Referencing Party Only

**METHOD OF ALLOCATION FOR:**

- **SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)**(Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)  
 Republican Party of Minnesota

USE ONLY ONE SECTION, A or B

**A. State and Local Party Committees**

**Fixed Percentage (select one)**

- \_\_\_\_\_ Presidential-Only Election Year (28% Federal)
- \_\_\_\_\_ Presidential and Senate Election Year (36% Federal)
- \_\_\_\_\_ Senate-Only Election Year (21% Federal)
- X  Non-Presidential and Non-Senate Election Year (15% Federal)

**B. Separate Segregated Funds and Nonconnected Committees**

**Flat Minimum Federal Percentage**

If the committee will allocate using the flat minimum percentage of 50% federal funds, check

**or**

If the committee is spending more than 50% federal funds, indicate ratio below

Federal.....  %

Nonfederal.....  %

This ratio applies to (check all that apply):

Administrative  Generic Voter Drive  Public Communications Referencing Party Only

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<b>A. Full Name (Last, First, Middle Initial)</b> Business Data Records			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 201 9th Ave SW			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">20418.45</div>	
City	State	Zip Code	Category/ Type	
Saint Paul	MN	55112-3211		
Purpose of Disbursement: Business Data Storage			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 0 1 / 1 5 / 2 0 0 9	
Activity or Event Identifier: ADMINISTRATION B 4			Transaction ID: H400320.E22456	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
95.40		540.60		636.00

<b>B. Full Name (Last, First, Middle Initial)</b> Popp.com			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 27110			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">19782.45</div>	
City	State	Zip Code	Category/ Type	
Minneapolis	MN	55427-		
Purpose of Disbursement: Party Telephone/Non-FEA			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 0 1 / 1 5 / 2 0 0 9	
Activity or Event Identifier: ADMINISTRATION B 4			Transaction ID: H400320.E22458	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
104.35		591.30		695.65

<b>C. Full Name (Last, First, Middle Initial)</b> Dicks/Lakeville Sanitation			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 769			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">20501.25</div>	
City	State	Zip Code	Category/ Type	
Lakeville	MN	55044-0769		
Purpose of Disbursement: Trash Pick-Up Service			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 0 1 / 1 5 / 2 0 0 9	
Activity or Event Identifier: ADMINISTRATION B 4			Transaction ID: H400320.E22459	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.17		23.65		27.82

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
203.92		1155.55		1359.47

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<b>A. Full Name (Last, First, Middle Initial)</b> SMD Copy Systems			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 6520 W Lake St			Allocated Activity or Event Year-To-Date 16824.80		
City Minneapolis	State MN	Zip Code 55408-	Date <input type="text" value="01"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: Equipment Maintenance			Transaction ID: H400320.E22462		
Activity or Event Identifier: ADMINISTRATION B 4					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.77		72.34		85.11

<b>B. Full Name (Last, First, Middle Initial)</b> Onvoy			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Po Box 1450			Allocated Activity or Event Year-To-Date 19086.80		
City Minneapolis	State MN	Zip Code 55485-	Date <input type="text" value="01"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: Office Computer Services			Transaction ID: H400320.E22463		
Activity or Event Identifier: ADMINISTRATION B 4					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
339.30		1922.70		2262.00

<b>C. Full Name (Last, First, Middle Initial)</b> Advantage Paper			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 310 Congress St Nw			Allocated Activity or Event Year-To-Date 16739.69		
City Maple Lake	State MN	Zip Code 55358-	Date <input type="text" value="01"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: General Office Supplies			Transaction ID: H400320.E22464		
Activity or Event Identifier: ADMINISTRATION B 4					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.69		145.60		171.29

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
377.76		2140.64		2518.40

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A. Full Name (Last, First, Middle Initial)**  
Advantage Paper  
Mailing Address  
310 Congress St Nw  
City State Zip Code  
Maple Lake MN 55358-  
Purpose of Disbursement:  
General Office Supplies  
Activity or Event Identifier:  
ADMINISTRATION B 4

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
Allocated Activity or Event Year-To-Date  
16514.90  
Date 01 / 08 / 2009  
Transaction ID: H400320.E22469

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.41		81.63		96.04

**B. Full Name (Last, First, Middle Initial)**  
Crown Lift Trucks  
Mailing Address  
860 Vandalia St  
City State Zip Code  
Saint Paul MN 55114-1305  
Purpose of Disbursement:  
Hand Cart Rentals  
Activity or Event Identifier:  
ADMINISTRATION B 4

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
Allocated Activity or Event Year-To-Date  
16568.40  
Date 01 / 08 / 2009  
Transaction ID: H400320.E22470

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.03		45.47		53.50

**C. Full Name (Last, First, Middle Initial)**  
Staples Business Advantage  
Mailing Address  
PO Box 83689  
City State Zip Code  
Chicago IL 60696-0001  
Purpose of Disbursement:  
General Office Supplies  
Activity or Event Identifier:  
ADMINISTRATION B 4

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
Allocated Activity or Event Year-To-Date  
58633.15  
Date 01 / 26 / 2009  
Transaction ID: H400320.E22504

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.21		86.22		101.43

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.65		213.32		250.97

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<b>A. Full Name (Last, First, Middle Initial)</b> Comcast			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 3002			Allocated Activity or Event Year-To-Date 58531.72		
City	State	Zip Code	Category/Type		
Southeastern	PA	19398-3002			
Purpose of Disbursement: On Line Service			Date		
Activity or Event Identifier: ADMINISTRATION B 4			M M / D D / Y Y Y Y 0 1 / 2 6 / 2 0 0 9		
Transaction ID: H400320.E22506					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.55		48.45		57.00

<b>B. Full Name (Last, First, Middle Initial)</b> SMD Copy Systems			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 6520 W Lake St			Allocated Activity or Event Year-To-Date 29247.97		
City	State	Zip Code	Category/Type		
Minneapolis	MN	55408-			
Purpose of Disbursement: Equipment Maintenance			Date		
Activity or Event Identifier: ADMINISTRATION B 4			M M / D D / Y Y Y Y 0 1 / 2 2 / 2 0 0 9		
Transaction ID: H400320.E22515					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
297.57		1686.25		1983.82

<b>C. Full Name (Last, First, Middle Initial)</b> Southwest Publishing			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2600 NW Topeka Blvd			Allocated Activity or Event Year-To-Date 57639.48		
City	State	Zip Code	Category/Type		
Topeka	KS	66617-1160			
Purpose of Disbursement: Party Mailhouse Printing			Date		
Activity or Event Identifier: ADMINISTRATION B 4			M M / D D / Y Y Y Y 0 1 / 2 2 / 2 0 0 9		
Transaction ID: H400320.E22516					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4006.69		22704.59		26711.28

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4312.81		24439.29		28752.10

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A. Full Name (Last, First, Middle Initial)**  
Whatever Services

Mailing Address  
240 Wyndham Circle W.

City State Zip Code  
New Brighton MN 55112-

Purpose of Disbursement:  
Party Accounting Services

Category/  
Type

Activity or Event Identifier:  
ADMINISTRATION B 4

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

27264.15

Date 01 / 19 / 2009

Transaction ID: H400320.E22517

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
363.75		2061.25		2425.00

**B. Full Name (Last, First, Middle Initial)**  
Verizon Wireless

Mailing Address  
P.O. Box 790422

City State Zip Code  
St. Louis MO 63179-

Purpose of Disbursement:  
Party Telephone Expense

Category/  
Type

Activity or Event Identifier:  
ADMINISTRATION B 4

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

30672.20

Date 01 / 22 / 2009

Transaction ID: H400320.E22518

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
213.63		1210.60		1424.23

**C. Full Name (Last, First, Middle Initial)**  
Staples Business Advantage

Mailing Address  
PO Box 83689

City State Zip Code  
Chicago IL 60696-0001

Purpose of Disbursement:  
General Office Supplies

Category/  
Type

Activity or Event Identifier:  
ADMINISTRATION B 4

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

58016.75

Date 01 / 22 / 2009

Transaction ID: H400320.E22519

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
27.04		153.22		180.26

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
604.42		3425.07		4029.49

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A. Full Name (Last, First, Middle Initial)**  
Hub Properties Trust

Mailing Address  
Reit Management Research330 2nd. Ave. S Suite 110

City	State	Zip Code
Minneapolis	MN	55401-

Purpose of Disbursement:  
Office Rent

Activity or Event Identifier:  
ADMINISTRATION B 4

Type of Allocated Activity:  
 Administrative     Fundraising     Exempt  
 Voter Drive     Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
12671.29

Date 

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

  
**Transaction ID:** H400320.E22524

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1900.69		10770.60		12671.29

**B. Full Name (Last, First, Middle Initial)**  
Ian L. Alexander

Mailing Address  
3637 Emerson Ave N

City	State	Zip Code
Minneapolis	MN	55412-2007

Purpose of Disbursement:  
SEE BELOW: Reimburse for Cell Phon

Activity or Event Identifier:  
ADMINISTRATION B 4

Type of Allocated Activity:  
 Administrative     Fundraising     Exempt  
 Voter Drive     Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
20473.43

Date 

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

  
**Transaction ID:** H400320.E22528

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.25		46.73		54.98

**C. Full Name (Last, First, Middle Initial)**  
T-Mobile Phone Service

Mailing Address  
PO Box 790047

City	State	Zip Code
Saint Louis	MO	63179-0047

Purpose of Disbursement:  
ITEMIZE: Alexander-Phone

Activity or Event Identifier:  
ADMINISTRATION B 4  
[MEMO ITEM]ITEMIZE: Alexander-Phone

Type of Allocated Activity:  
 Administrative     Fundraising     Exempt  
 Voter Drive     Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
54.98

Date 

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

  
**Transaction ID:** H400320.E22529

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.25		46.73		54.98

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1908.94		10817.33		12726.27

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<b>A. Full Name (Last, First, Middle Initial)</b> All American Self Storage			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 1500 Marshall Ave			Allocated Activity or Event Year-To-Date 30928.20																						
City	State	Zip Code	Date <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></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y										
M	M	/	D	D	/	Y	Y	Y	Y																
St Paul	MN	55104-	Transaction ID: H400320.E22530																						
Purpose of Disbursement: Storage Rent			Category/ Type																						
Activity or Event Identifier: ADMINISTRATION B 4			Date <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>1</td><td>/</td><td>2</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	2	2	/	2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y																
0	1	/	2	2	/	2	0	0	9																

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
38.40		217.60		256.00

<b>B. Full Name (Last, First, Middle Initial)</b> Comcast			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 3002			Allocated Activity or Event Year-To-Date 57836.49																						
City	State	Zip Code	Date <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></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y										
M	M	/	D	D	/	Y	Y	Y	Y																
Southeastern	PA	19398-3002	Transaction ID: H400320.E22531																						
Purpose of Disbursement: On Line Service			Category/ Type																						
Activity or Event Identifier: ADMINISTRATION B 4			Date <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>1</td><td>/</td><td>2</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	2	2	/	2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y																
0	1	/	2	2	/	2	0	0	9																

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
29.55		167.46		197.01

<b>C. Full Name (Last, First, Middle Initial)</b> Paychex			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 1210 Northland Dr Ste 100			Allocated Activity or Event Year-To-Date 23866.20																						
City	State	Zip Code	Date <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></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y										
M	M	/	D	D	/	Y	Y	Y	Y																
Saint Paul	MN	55120-1181	Transaction ID: H400320.E22543																						
Purpose of Disbursement: SEE BELOW: Non-FEA Salary			Category/ Type																						
Activity or Event Identifier: ADMINISTRATION B 4			Date <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>1</td><td>/</td><td>1</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	1	6	/	2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y																
0	1	/	1	6	/	2	0	0	9																

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
504.74		2860.21		3364.95

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
572.69		3245.27		3817.96

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

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

Mailing Address  
4282 Braddock Trl

City State Zip Code  
Eagan MN 55123-1941

Purpose of Disbursement:  
ITEMIZE: Non-FEA Salary

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

830.20

Activity or Event Identifier:  
ADMINISTRATION B 4

**[MEMO ITEM]** ITEMIZE: Non-FEA Salary

Date 01 / 16 / 2009

Transaction ID: H400320.E22415

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
124.53		705.67		830.20

**B. Full Name (Last, First, Middle Initial)**  
Christy A. McGill

Mailing Address  
902 Ashland Ave

City State Zip Code  
Saint Paul MN 55104-7013

Purpose of Disbursement:  
Itemize: Non-FEA Salary

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

810.67

Activity or Event Identifier:  
ADMINISTRATION B 4

**[MEMO ITEM]** Itemize: Non-FEA Salary

Date 01 / 16 / 2009

Transaction ID: H400320.E22418

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
121.60		689.07		810.67

**C. Full Name (Last, First, Middle Initial)**  
Alicia Long

Mailing Address  
242 Humboldt Ave N

City State Zip Code  
Minneapolis MN 55405-1435

Purpose of Disbursement:  
Itemize: Non-FEA Salary

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

291.58

Activity or Event Identifier:  
ADMINISTRATION B 4

**[MEMO ITEM]** Itemize: Non-FEA Salary

Date 01 / 16 / 2009

Transaction ID: H400320.E22416

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
43.74		247.84		291.58

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

**A. Full Name (Last, First, Middle Initial)**  
Robert D. Schultz III

Mailing Address  
23780 Smithtown Rd

City State Zip Code  
Excelsior MN 55331-1770

Purpose of Disbursement:  
ITEMIZE: Non-FEA Salary

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

138.52

Activity or Event Identifier:  
ADMINISTRATION B 4

**[MEMO ITEM]** ITEMIZE: Non-FEA Salary

Date  /  /

Transaction ID: H400320.E22420

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20.78		117.74		138.52

**B. Full Name (Last, First, Middle Initial)**  
Ian L. Alexander

Mailing Address  
3637 Emerson Ave N

City State Zip Code  
Minneapolis MN 55412-2007

Purpose of Disbursement:  
ITEMIZE: Non-FEA Salary

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

922.32

Activity or Event Identifier:  
ADMINISTRATION B 4

**[MEMO ITEM]** ITEMIZE: Non-FEA Salary

Date  /  /

Transaction ID: H400320.E22414

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
138.35		783.97		922.32

**C. Full Name (Last, First, Middle Initial)**  
Brenton W. Haack

Mailing Address  
316 River St N

City State Zip Code  
Delano MN 55328-9381

Purpose of Disbursement:  
ITEMIZE: Non-FEA Salary

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

371.66

Activity or Event Identifier:  
ADMINISTRATION B 4

**[MEMO ITEM]** ITEMIZE: Non-FEA Salary

Date  /  /

Transaction ID: H400320.E22417

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
55.75		315.91		371.66

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

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

Mailing Address  
1210 Northland Dr Ste 100

City State Zip Code  
Saint Paul MN 55120-1181

Purpose of Disbursement:  
SEE BELOW: Non-FEA Payroll Taxes

Activity or Event Identifier:  
ADMINISTRATION B 4

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
24839.15

Date 01 / 16 / 2009  
Transaction ID: H400320.E22545

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
145.94		827.01		972.95

**B. Full Name (Last, First, Middle Initial)**  
Internal Revenue Service

Mailing Address  
P.O. BOX 43251

City State Zip Code  
Ogden UT 84201-0001

Purpose of Disbursement:  
ITEMIZE: Non-FEA Payroll

Activity or Event Identifier:  
ADMINISTRATION B 4  
[MEMO ITEM] ITEMIZE: Non-FEA Payroll

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
860.46

Date 01 / 16 / 2009  
Transaction ID: H400320.E25038

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
129.07		731.39		860.46

**C. Full Name (Last, First, Middle Initial)**  
MN Dept of Revenue

Mailing Address  
658 Cedar St Ste 400

City State Zip Code  
Saint Paul MN 55155-1603

Purpose of Disbursement:  
ITEMIZE: Non-FEA Payroll Taxes

Activity or Event Identifier:  
ADMINISTRATION B 4  
[MEMO ITEM] ITEMIZE: Non-FEA Payroll Taxes

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
112.49

Date 01 / 16 / 2009  
Transaction ID: H400320.E22540

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.87		95.62		112.49

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
145.94		827.01		972.95

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

<b>A. Full Name (Last, First, Middle Initial)</b> Paychex			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1210 Northland Dr Ste 100			Allocated Activity or Event Year-To-Date 61345.84		
City	State	Zip Code	Date <input type="text" value="01"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>		
Saint Paul	MN	55120-1181	Transaction ID: H400320.E22552		
Purpose of Disbursement: SEE BELOW: Non-FEA Salary			Category/ Type		
Activity or Event Identifier: ADMINISTRATION B 4					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
406.90		2305.79		2712.69

<b>B. Full Name (Last, First, Middle Initial)</b> Barbara Linert			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4282 Braddock Trl			Allocated Activity or Event Year-To-Date 830.20		
City	State	Zip Code	Date <input type="text" value="01"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>		
Eagan	MN	55123-1941	Transaction ID: H400320.E22608		
Purpose of Disbursement: ITEMIZE: Non-FEA Salary			Category/ Type		
Activity or Event Identifier: ADMINISTRATION B 4 [MEMO ITEM] ITEMIZE: Non-FEA Salary					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
124.53		705.67		830.20

<b>C. Full Name (Last, First, Middle Initial)</b> Christy A. McGill			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 902 Ashland Ave			Allocated Activity or Event Year-To-Date 810.67		
City	State	Zip Code	Date <input type="text" value="01"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>		
Saint Paul	MN	55104-7013	Transaction ID: H400320.E22611		
Purpose of Disbursement: ITEMIZE: Non-FEA Salary			Category/ Type		
Activity or Event Identifier: ADMINISTRATION B 4 [MEMO ITEM] ITEMIZE: Non-FEA Salary					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
121.60		689.07		810.67

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
406.90		2305.79		2712.69

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

**A. Full Name (Last, First, Middle Initial)**  
Alicia Long

Mailing Address  
242 Humboldt Ave N

City State Zip Code  
Minneapolis MN 55405-1435

Purpose of Disbursement:  
ITEMIZE: Non-FEA Salary

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

326.06

Activity or Event Identifier:  
ADMINISTRATION B 4

**[MEMO ITEM]** ITEMIZE: Non-FEA Salary

Date  /  /

Transaction ID: H400320.E22609

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
48.91		277.15		326.06

**B. Full Name (Last, First, Middle Initial)**  
Robert D. Schultz III

Mailing Address  
23780 Smithtown Rd

City State Zip Code  
Excelsior MN 55331-1770

Purpose of Disbursement:  
ITEMIZE: Non-FEA Salary

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

193.81

Activity or Event Identifier:  
ADMINISTRATION B 4

**[MEMO ITEM]** ITEMIZE: Non-FEA Salary

Date  /  /

Transaction ID: H400320.E22613

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
29.07		164.74		193.81

**C. Full Name (Last, First, Middle Initial)**  
Brenton W. Haack

Mailing Address  
316 River St N

City State Zip Code  
Delano MN 55328-9381

Purpose of Disbursement:  
ITEMIZE: Non-FEA Salary

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

551.95

Activity or Event Identifier:  
ADMINISTRATION B 4

**[MEMO ITEM]** ITEMIZE: Non-FEA Salary

Date  /  /

Transaction ID: H400320.E22610

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
82.79		469.16		551.95

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

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

Mailing Address  
1210 Northland Dr Ste 100

City State Zip Code  
Saint Paul MN 55120-1181

Purpose of Disbursement:  
SEE BELOW: Non-FEA Payroll Taxes

Activity or Event Identifier:  
ADMINISTRATION B 4

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
62015.96

Date 01 / 30 / 2009  
Transaction ID: H400320.E22554

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
100.52		569.60		670.12

**B. Full Name (Last, First, Middle Initial)**  
Internal Revenue Service

Mailing Address  
P.O. BOX 43251

City State Zip Code  
Ogden UT 84201-0001

Purpose of Disbursement:  
ITEMIZE: Non-FEA Payroll Taxes

Activity or Event Identifier:  
ADMINISTRATION B 4  
[MEMO ITEM] ITEMIZE: Non-FEA Payroll Taxes

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
587.24

Date 01 / 30 / 2009  
Transaction ID: H400320.E25045

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
88.09		499.15		587.24

**C. Full Name (Last, First, Middle Initial)**  
MN Dept of Revenue

Mailing Address  
658 Cedar St Ste 400

City State Zip Code  
Saint Paul MN 55155-1603

Purpose of Disbursement:  
ITEMIZE: Non-FEA Payroll Taxes

Activity or Event Identifier:  
ADMINISTRATION B 4  
[MEMO ITEM] ITEMIZE: Non-FEA Payroll Taxes

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
82.88

Date 01 / 30 / 2009  
Transaction ID: H400320.E22904

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.43		70.45		82.88

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
100.52		569.60		670.12

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A. Full Name (Last, First, Middle Initial)**  
Visa Elan

Mailing Address  
7300 Chapman Hwy

City State Zip Code  
Knoxville TN 37920-

Purpose of Disbursement:  
Credit Card Processing Fee

Category/  
Type

Activity or Event Identifier:  
ADMINISTRATION B 4

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

16191.92

Date 01 / 07 / 2009

Transaction ID: H400320.E22644

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
528.09		2992.54		3520.63

**B. Full Name (Last, First, Middle Initial)**  
Visa Elan

Mailing Address  
7300 Chapman Hwy

City State Zip Code  
Knoxville TN 37920-

Purpose of Disbursement:  
Credit Card Processing Fees

Category/  
Type

Activity or Event Identifier:  
ADMINISTRATION B 4

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

16418.86

Date 01 / 07 / 2009

Transaction ID: H400320.E22645

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
34.04		192.90		226.94

**C. Full Name (Last, First, Middle Initial)**  
Assurant Employee Benefits

Mailing Address  
2323 Grand Blvd

City State Zip Code  
Kansas City MO 64108-

Purpose of Disbursement:  
Employee Life & Disab Ben-Non FEA

Category/  
Type

Activity or Event Identifier:  
ADMINISTRATION B 4

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

58474.72

Date 01 / 26 / 2009

Transaction ID: H400320.E22653

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.24		29.70		34.94

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
567.37		3215.14		3782.51

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A. Full Name (Last, First, Middle Initial)**  
Blue Cross Blue Shield of Minnesota

Mailing Address  
P.o. Box 64338

City	State	Zip Code
St. Paul	MN	55164-0179

Purpose of Disbursement:  
Employees Health Bene-Not FEA

Activity or Event Identifier:  
ADMINISTRATION B 4

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
58439.78

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	6	/	2	0	0	9

  
**Transaction ID:** H400320.E22654

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
51.90		294.10		346.00

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

Mailing Address  
1210 Northland Dr Ste 100

City	State	Zip Code
Saint Paul	MN	55120-1181

Purpose of Disbursement:  
Payroll Processing Fee

Activity or Event Identifier:  
ADMINISTRATION B 4

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
63654.83

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	3	0	/	2	0	0	9

  
**Transaction ID:** H400320.E22920

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
245.83		1393.04		1638.87

**C. Full Name (Last, First, Middle Initial)**  
Joel Cary

Mailing Address  
12809 44th PI NE

City	State	Zip Code
Saint Michael	MN	55376-3030

Purpose of Disbursement:  
SEE BELOW: Reimburse for DSL

Activity or Event Identifier:  
ADMINISTRATION B 4

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
58093.78

Date 

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

  
**Transaction ID:** H400320.E22921

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.55		65.48		77.03

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
309.28		1752.62		2061.90

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

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

Mailing Address  
PO Box 660068

City	State	Zip Code
Dallas	TX	75266-0068

Purpose of Disbursement:  
ITEMIZE: Cary-Computer Serv

Activity or Event Identifier:  
ADMINISTRATION B 4  
**[MEMO ITEM]** ITEMIZE: Cary-Computer Serv

Type of Allocated Activity:

- Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

77.03

Date 

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

Transaction ID: H400320.E22922

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.55		65.48		77.03

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
9548.20	54106.63	63654.83