

**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

Freedom First PAC

ADDRESS (number and street)

PO BOX 9190

☐Check if different
than previously
reported. (ACC)

ST PAUL

MN

55109

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00467688

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:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

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

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

10

01

2009

through

12

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

Don Stiles

Signature of Treasurer

Electronically Filed by Don Stiles

Date

04

15

2010

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

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 227

Write or Type Committee Name
Freedom First PAC

Report Covering the Period:

From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	9

To:

M	M
1	2

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	2009	0.00
(b) Cash on Hand at Beginning of Reporting Period	0.00	
(c) Total Receipts (from Line 19)	1279906.36	1279906.36
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1279906.36	1279906.36
7. Total Disbursements (from Line 31)	395831.17	395831.17
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	884075.19	884075.19
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	15998.34	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

Freedom First PAC

Report Covering the Period:

From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	9

To:

M	M
1	2

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)	1141260.70	1141260.70
(ii) Unitemized	93782.00	93782.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	1235042.70	1235042.70
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	44700.00	44700.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	1279742.70	1279742.70
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	118.50	118.50
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	45.16	45.16
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))	1279906.36	1279906.36
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	1279906.36	1279906.36

DETAILED SUMMARY PAGE

of Disbursements

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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.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	379031.17	379031.17	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	379031.17	379031.17	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	16800.00	16800.00	
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.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) 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	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	395831.17	395831.17	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	395831.17	395831.17	

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)	1279742.70	1279742.70
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1279742.70	1279742.70
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	379031.17	379031.17
37. Offsets to Operating Expenditures (from Line 15, page 3)	118.50	118.50
38. Net Operating Expenditures (subtract Line 37 from Line 36)	378912.67	378912.67

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 6 / 227

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Freedom First PAC**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
PINNACLE DIRECT INCNature of Debt (Purpose):
PRINTING

Mailing Address 15260 113TH ST NORTH

City State ZIP Code
STILLWATER MN 55082

Outstanding Balance Beginning This Period

0.00

Transaction ID: D10001

Amount Incurred This Period

99297.18

Payment This Period

83298.84

Outstanding Balance at Close of This Period

15998.34

1) **SUBTOTALS** This Period This Page (optional)..... ▶

15998.34

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

15998.34

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

15998.34

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 227

(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

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)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. STEVEN M. ADAMS

Mailing Address 4640 SAINT JAMES GATE

City

EXCELSIOR

State

MN

Zip Code

55331

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.942

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. MAYNARD C. AKKERMAN

Mailing Address 27628 STATE HIGHWAY 56

City

BROWNSDALE

State

MN

Zip Code

55918

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

CONSTRUCTION EQUIPMENT MANUFACTURER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.1761

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. MARILYN ALBRECHT

Mailing Address 30567 LAKEVIEW AVENUE

City

RED WING

State

MN

Zip Code

55066

FEC ID number of contributing
federal political committee.

C

Name of Employer
RED WING PUBLISHING CO.

Occupation

PUBLISHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.1907

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1000.00

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 8 / 227

(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)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. THOMAS W. ALBRECHT

Mailing Address 551 WALKER ROAD

City

HINSDALE

State

IL

Zip Code

60521

FEC ID number of contributing
federal political committee.

C

Name of Employer
SIDLEY AUSTINOccupation
LAWYER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.2043

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. GRANT D. ALDONAS

Mailing Address 2819 N. JEFFERSON STREET

City

ARLINGTON

State

VA

Zip Code

22207

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.225

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. PATRICK ALEXANDER

Mailing Address 16540 GRAYS BAY BLVD.

City

MINNETONKA

State

MN

Zip Code

55391

FEC ID number of contributing
federal political committee.

C

Name of Employer
COLD SPRING GRANITEOccupation
C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.568

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

7000.00

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 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MS. MARY HELEN AMERY

Mailing Address 2038 TROLLEY CROSSING COURT

City State Zip Code
 MONTGOMERY VILLAGE MD 20886

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 ▼

2000.00

Date of Receipt

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

Transaction ID: SA11.329

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. MARY HELEN AMERY

Mailing Address 2038 TROLLEY CROSSING COURT

City State Zip Code
 MONTGOMERY VILLAGE MD 20886

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 ▼

2000.00

Date of Receipt

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

Transaction ID: SA11.330

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. GEORGIANN AMES

Mailing Address 20335 SAWMILL ROAD

City State Zip Code
 JORDAN MN 55352

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 ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.698

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

7000.00

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 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MRS. KAREN AMES

Mailing Address 2321 WILDWOOD COURT

City

BURNSVILLE

State

MN

Zip Code

55306

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 ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.700

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RAYMOND AMES

Mailing Address 2000 AMES DRIVE

City

BURNSVILLE

State

MN

Zip Code

55306-5096

FEC ID number of contributing
federal political committee.

C

Name of Employer
AMES CONSTRUCTION

Occupation

OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.2814

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. RICHARD AMES

Mailing Address 2000 AMES DRIVE

City

BURNSVILLE

State

MN

Zip Code

55306

FEC ID number of contributing
federal political committee.

C

Name of Employer
AMES CONSTRUCTION

Occupation

C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.702

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

15000.00

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 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MS. DEBORAH ANDERSON

Mailing Address 409 G STREET SE

City

WASHINGTON

State

DC

Zip Code

20003-4257

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 ▼

1955.35

Date of Receipt

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

Transaction ID: SA11.3018

Amount of Each Receipt this Period

1955.35

CONTRIBUTION

IN-KIND: CATERING

B.

Full Name (Last, First, Middle Initial)

MR. GEORGE ELI ANDERSON

Mailing Address 11412 MISSISSIPPI DRIVE

City

CHAMPLIN

State

MN

Zip Code

55316

FEC ID number of contributing
federal political committee.

C

Name of Employer
CROWN HOLDINGS

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.566

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. JANET R. ANDERSON

Mailing Address 2250 W. LAKE OF THE ISLES PKWY.

City

MINNEAPOLIS

State

MN

Zip Code

55405

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.541

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

SEE REATTRIBUTION

SUBTOTAL of Receipts This Page (optional)

16955.35

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 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. BRADBURY H. ANDERSON

Mailing Address 2250 W. LAKE OF THE ISLES PKWY.

City

MINNEAPOLIS

State

MN

Zip Code

55405

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.542

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

[MEMO ITEM]

REATTRIBUTION FROM SPOUSE

B.

Full Name (Last, First, Middle Initial)

MRS. JANET R. ANDERSON

Mailing Address 2250 W. LAKE OF THE ISLES PKWY.

City

MINNEAPOLIS

State

MN

Zip Code

55405

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.541B

Amount of Each Receipt this Period

-5000.00

CONTRIBUTION

[MEMO ITEM]

REATTRIBUTION TO SPOUSE

C.

Full Name (Last, First, Middle Initial)

MRS. JAYNE RENEE ANDERSON

Mailing Address 4530 STRAWBERRY LANE

City

GOLDEN VALLEY

State

MN

Zip Code

55416

FEC ID number of contributing
federal political committee.

C

Name of Employer
AMERICAN AGENCY INC.

Occupation
C.S.A.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.845

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

250.00

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 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MRS. JOCELYN ANDERSON

Mailing Address 1901 LINN ROAD

City

WAYZATA

State

MN

Zip Code

55391

FEC ID number of contributing
federal political committee.

C

Name of Employer
TARGET CORPORATION

Occupation
RETAILING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.840

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. PAUL C. ANDERSON

Mailing Address 4530 STRAWBERRY LANE

City

GOLDEN VALLEY

State

MN

Zip Code

55416

FEC ID number of contributing
federal political committee.

C

Name of Employer
AMERICAN AGENCY INC.

Occupation
SALES/OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.842

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. WARREN ANDERSON

Mailing Address 2802 NORTHLAND LANE

City

WALKER

State

MN

Zip Code

56484

FEC ID number of contributing
federal political committee.

C

Name of Employer
ANDERSON FAMILY RESORTS

Occupation
RESORT OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.455

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1000.00

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 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. ALBERT T. ANNEXSTAD

Mailing Address 5325 ELMRIDGE CIRCLE

City

SHOREWOOD

State

MN

Zip Code

55331

FEC ID number of contributing
federal political committee.

C

Name of Employer
FEDERATED INSURANCE

Occupation
CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.156

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. CATHERINE C. ANNEXSTAD

Mailing Address 5325 ELMRIDGE CIRCLE

City

SHOREWOOD

State

MN

Zip Code

55331

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 ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.130

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. EDWARD ARNOLD

Mailing Address 815 TUDOR LANE

City

LEBANON

State

PA

Zip Code

17042

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

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

Transaction ID: SA11.2105

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10250.00

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 15 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. WILLIAM AUSTIN

Mailing Address 5334 HARBOR TOWN DRIVE

City

DALLAS

State

TX

Zip Code

75287

FEC ID number of contributing
federal political committee.

C

Name of Employer
STARKEY LABORATORIES

Occupation
FOUNDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

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

Transaction ID: SA11.1965

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

REATTRIBUTION REQUESTED

B.

Full Name (Last, First, Middle Initial)

MRS. SHARON LEE AVANT

Mailing Address 12930 LOCK BLVD.

City

HASTINGS

State

MN

Zip Code

55033

FEC ID number of contributing
federal political committee.

C

Name of Employer
SMEAD MANUFACTURING CO.

Occupation
PRESIDENT AND CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.761

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DR. THOMAS BACKENSTOSE

Mailing Address 7229 LEWIS RIDGE PARKWAY

City

EDINA

State

MN

Zip Code

55439

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
DENTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.1320

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

15250.00

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 16 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MRS. COLLEEN BAER

Mailing Address 6201 BALDER LANE

City

EDINA

State

MN

Zip Code

55439

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 ▼

500.00

Date of Receipt

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

Transaction ID: SA11.271

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. TIMOTHY R. BAER

Mailing Address 6201 BALDER LANE

City

EDINA

State

MN

Zip Code

55439

FEC ID number of contributing
federal political committee.

C

Name of Employer
TARGET CORPORATION

Occupation

EXECUTIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.287

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DON BAILEY

Mailing Address 415 SUGARLAND MEADOW DRIVE

City

HERNDON

State

VA

Zip Code

20170

FEC ID number of contributing
federal political committee.

C

Name of Employer
HYPERVISTA TECHNOLOGIES

Occupation

SOFTWARE ENGINEER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.397

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1500.00

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 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. DOUGLAS M. BAKER, JR.

Mailing Address 4613 EDINA BLVD.

City

EDINA

State

MN

Zip Code

55424

FEC ID number of contributing
federal political committee.

C

Name of Employer
ECOLAB, INC.

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.1750

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. JULIE BAKER

Mailing Address 4613 EDINA BLVD.

City

EDINA

State

MN

Zip Code

55424

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 ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.1742

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. LARRY A. BARDEN

Mailing Address 1334 EDGEWOOD LANE

City

NORTHBROOK

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
SIDLEY AUSTIN, L.L.P.

Occupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.2051

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

11000.00

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 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. MICHAEL E. BARRY

Mailing Address 2020 DWIGHT LANE

City

MINNETONKA

State

MN

Zip Code

55305

FEC ID number of contributing
federal political committee.

C

Name of Employer
TWIN CITY FAN COMPANY

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: SA11.2122

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RAYMOND BARTON

Mailing Address 5915 CHRISTMAS LAKE ROAD

City

SHOREWOOD

State

MN

Zip Code

55331

FEC ID number of contributing
federal political committee.

C

Name of Employer
GREAT CLIPS INC.

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.434

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. GAY LYNN BAUKOL

Mailing Address 70 SPRUCE STREET

City

MAHTOMEDI

State

MN

Zip Code

55115

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 ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.757

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

12500.00

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 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. RONALD O. BAUKOL

Mailing Address 70 SPRUCE STREET

City

MAHTOMEDI

State

MN

Zip Code

55115

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 ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.758

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. WILLIAM H. BAUMGARTNER, JR.

Mailing Address 321 W. WISCONSIN STREET

City

CHICAGO

State

IL

Zip Code

60614

FEC ID number of contributing
federal political committee.

C

Name of Employer
SIDLEY AUSTIN, L.L.P.

Occupation
LAWYER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.2042

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ALEC J. BECK

Mailing Address 611 LYMAN PLACE

City

EXCELSIOR

State

MN

Zip Code

55331

FEC ID number of contributing
federal political committee.

C

Name of Employer
SEATON BECK & PETERS

Occupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.1732

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6250.00

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 / 227

(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)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MS. BROOKE L. BEEBE

Mailing Address 603 BASHFORD LANE #4

City

ALEXANDRIA

State

VA

Zip Code

22314

FEC ID number of contributing
federal political committee.

C

Name of Employer
DOW CHEMICALOccupation
LAWYER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.169

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DAVID BEITO

Mailing Address 1401 BIRCH LANE DR

City

THIEF RIVER FALLS

State

MN

Zip Code

56701

FEC ID number of contributing
federal political committee.

C

Name of Employer
NORTHERN STATE BANKOccupation
BANKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.815

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. CRAIG E. BENTDAHL

Mailing Address 4505 WOODDALE AVENUE

City

EDINA

State

MN

Zip Code

55436

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
PRIVATE INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: SA11.557

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

3500.00

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 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. CARL R. BERGQUIST

Mailing Address 21050 OAK LANE

City

GREENWOOD

State

MN

Zip Code

55331

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE BERQUIST COMPANY

Occupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.1740

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. TIM BERKNESS

Mailing Address 15260 113TH STREET N.

City

STILLWATER

State

MN

Zip Code

55082

FEC ID number of contributing
federal political committee.

C

Name of Employer
PINNACLE DIRECT INC.

Occupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: SA11.703

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. CHARLES BOBRINSKOY

Mailing Address 200 E. RANDOLPH DRIVE #2900

City

CHICAGO

State

IL

Zip Code

60601

FEC ID number of contributing
federal political committee.

C

Name of Employer
ARIEL INVESTMENTS

Occupation
ASSET MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.2049

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

4000.00

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 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

DR. ROBERT L. BODIN

Mailing Address 425 FERNDAL WOODS ROAD

City

WAYZATA

State

MN

Zip Code

55391

FEC ID number of contributing
federal political committee.

C

Name of Employer
FAMILY & COSMETIC GENTLE
DENTISTRY

Occupation
D.D.S./C.C.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.713

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

SEE REATTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. LYND A BODIN

Mailing Address 425 FERNDAL WOODS ROAD

City

WAYZATA

State

MN

Zip Code

55391-1542

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.3105

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

[MEMO ITEM]
REATTRIBUTION FROM SPOUSE

C.

Full Name (Last, First, Middle Initial)

DR. ROBERT L. BODIN

Mailing Address 425 FERNDAL WOODS ROAD

City

WAYZATA

State

MN

Zip Code

55391

FEC ID number of contributing
federal political committee.

C

Name of Employer
FAMILY & COSMETIC GENTLE
DENTISTRY

Occupation
D.D.S./C.C.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.713B

Amount of Each Receipt this Period

-5000.00

CONTRIBUTION

[MEMO ITEM]
REATTRIBUTION TO SPOUSE

SUBTOTAL of Receipts This Page (optional)

10000.00

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 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. CHRISTOPHER D. BOESEN

Mailing Address 309 10TH STREET NE

City

WASHINGTON

State

DC

Zip Code

20002

FEC ID number of contributing
federal political committee.

C

Name of Employer
TIBER CREEK ASSOCIATES

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.101

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. STEVEN R. BOUCHARD

Mailing Address 4170 E. LINDEN LANE

City

GREENWOOD VILLAGE

State

CO

Zip Code

80121

FEC ID number of contributing
federal political committee.

C

Name of Employer
COMCAST

Occupation

SR. VICE PRESIDENT MARKETING & SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID: SA11.2393

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DR. BARBARA J. BOWERS

Mailing Address 2601 W. LAFAYETTE ROAD

City

ORONO

State

MN

Zip Code

55331

FEC ID number of contributing
federal political committee.

C

Name of Employer
FAIRVIEW HOSPITAL

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.579

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

7000.00

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 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. DAN BRADY

Mailing Address 112 S. MERCER AVENUE

City

BLOOMINGTON

State

IL

Zip Code

61701

FEC ID number of contributing
federal political committee.

C

Name of Employer
STATE OF ILLINOIS

Occupation

STATE REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6000.00

Date of Receipt

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

Transaction ID: SA11.2003

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

REATTRIBUTION REQUESTED

B.

Full Name (Last, First, Middle Initial)

MR. DAN BRADY

Mailing Address 112 S. MERCER AVENUE

City

BLOOMINGTON

State

IL

Zip Code

61701

FEC ID number of contributing
federal political committee.

C

Name of Employer
STATE OF ILLINOIS

Occupation

STATE REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6000.00

Date of Receipt

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

Transaction ID: SA11.681

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

REATTRIBUTION REQUESTED

C.

Full Name (Last, First, Middle Initial)

MRS. JULIE A. BRADY

Mailing Address 4N752 WARE WOODS DRIVE

City

ST. CHARLES

State

IL

Zip Code

60175

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 ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.2038

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

SEE REATTRIBUTION

SUBTOTAL of Receipts This Page (optional)

16000.00

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 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MRS. JULIE A. BRADY

Mailing Address 4N752 WARE WOODS DRIVE

City

ST. CHARLES

State

IL

Zip Code

60175

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 ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.2038B

Amount of Each Receipt this Period

-5000.00

CONTRIBUTION

[MEMO ITEM]

REATTRIBUTION TO SPOUSE

B.

Full Name (Last, First, Middle Initial)

MR. PATRICK M. BRADY

Mailing Address 4N752 WARE WOODS DRIVE

City

ST. CHARLES

State

IL

Zip Code

60175

FEC ID number of contributing
federal political committee.

C

Name of Employer
BARNES & THORNBURG

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.2039

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

[MEMO ITEM]

REATTRIBUTION FROM SPOUSE

C.

Full Name (Last, First, Middle Initial)

MR. FRANCIS BERNARD BROGAN, III

Mailing Address 2401 PENNSYLVANIA AVENUE NW
SUITE 601

City

WASHINGTON

State

DC

Zip Code

20003

FEC ID number of contributing
federal political committee.

C

Name of Employer
SUNSET POINT HOLDINGS

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.335

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

500.00

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 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. BRIAN BROOKS

Mailing Address 6818 WEMBERLY WAY

City

MCLEAN

State

VA

Zip Code

22101

FEC ID number of contributing
federal political committee.

C

Name of Employer
O'MELVENY & MYERS LLP

Occupation

ATTORNEY

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.494

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JAMES M. BROWN

Mailing Address 2660 STONE ARCH ROAD

City

WAYZATA

State

MN

Zip Code

55391

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

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

Transaction ID: SA11.964

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. BARBARA E. BURWELL

Mailing Address 1100 MILLSTON ROAD

City

WAYZATA

State

MN

Zip Code

55391

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 ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.759

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5750.00

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 27 / 227

(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)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. RODNEY P. BURWELL

Mailing Address 1100 MILLSTON ROAD

City

WAYZATA

State

MN

Zip Code

55391

FEC ID number of contributing
federal political committee.

C

Name of Employer
BURWELL ENTERPRISESOccupation
CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.760

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. SARAH L. BUXTON

Mailing Address 4000 GLENWOOD AVENUE

City

GOLDEN VALLEY

State

MN

Zip Code

55422

FEC ID number of contributing
federal political committee.

C

Name of Employer
FEDERATED INSURANCE COMPA-
NYOccupation
INSURANCE EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.714

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DR. BRIAN BYER

Mailing Address 1890 LESTER RIVER RD

City

DULUTH

State

MN

Zip Code

55804

FEC ID number of contributing
federal political committee.

C

Name of Employer
SMDCOccupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.378

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

11000.00

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 28 / 227

(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)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

DR. STEVEN CALVIN

Mailing Address 3216 EDMUND BLVD

City

MINNEAPOLIS

State

MN

Zip Code

55406

FEC ID number of contributing
federal political committee.

C

Name of Employer
PERINATAL CARE CONSULTANTSOccupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.445

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

TERRY CAMPBELL

Mailing Address 25282 BOLDNESS COURT

City

ALDIE

State

VA

Zip Code

20105

FEC ID number of contributing
federal political committee.

C

Name of Employer
NASDAQ OMXOccupation
ASSOCIATE VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.366

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JOHN A. CANNING, JR.

Mailing Address 1650 DUBLIN COURT

City

INVERNESS

State

IL

Zip Code

60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
MADISON DEARBORN PARTNERSOccupation
CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.2045

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6500.00

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 29 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

KEVIN CANNON

Mailing Address 6850 STARLEDGE CT

City

SPRING

State

TX

Zip Code

77389

FEC ID number of contributing
federal political committee.

C

Name of Employer
CANNON ENTERPRISES INCOccupation
BUILDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.644

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS MEGAN IVORY CARR

Mailing Address 1425 K. STREET NW.

City

WASHINGTON

State

DC

Zip Code

20005-3500

FEC ID number of contributing
federal political committee.

C

Name of Employer
3MOccupation
GOVERNMENT AFFAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.217

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JEFFREY R. CARTER

Mailing Address 1448 N. LAKE SHORE DRIVE
APARTMENT 7C

City

CHICAGO

State

IL

Zip Code

60610

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
COMMODITY TRADER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.2030

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1750.00

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 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. ROBERT CHAMBERLIN

Mailing Address 3646 CUMBERLAND

City

WASHINGTON

State

DC

Zip Code

20008

FEC ID number of contributing
federal political committee.

C

Name of Employer
MCBEE STRATEGIC

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.347

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. CONNI CHAPIN

Mailing Address 623 19TH STREET SE

City

WILLMAR

State

MN

Zip Code

56201

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 ▼

500.00

Date of Receipt

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

Transaction ID: SA11.1744

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JOHN E. CHAPIN

Mailing Address 623 19TH STREET SE

City

WILLMAR

State

MN

Zip Code

56201

FEC ID number of contributing
federal political committee.

C

Name of Employer
CHAPIN ENTERPRISES

Occupation

ELECTRICAL CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.1751

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1500.00

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 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. BENJAMIN D. CHERESKIN

Mailing Address 1448 N. LAKE SHORE DRIVE
APARTMENT 7A-8A

City State Zip Code
CHICAGO IL 60610

FEC ID number of contributing
federal political committee.

C

Name of Employer
PROFILE CAPITAL MANAGEMENT

Occupation
PRIVATE EQUITY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.2032

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

SEE REATTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. BENJAMIN D. CHERESKIN

Mailing Address 1448 N. LAKE SHORE DRIVE
APARTMENT 7A-8A

City State Zip Code
CHICAGO IL 60610

FEC ID number of contributing
federal political committee.

C

Name of Employer
PROFILE CAPITAL MANAGEMENT

Occupation
PRIVATE EQUITY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.2032B

Amount of Each Receipt this Period

-5000.00

CONTRIBUTION

[MEMO ITEM]
REATTRIBUTION TO SPOUSE

C.

Full Name (Last, First, Middle Initial)

MRS. CYNTHIA M. CHERESKIN

Mailing Address 1448 N. LAKE SHORE DRIVE
APARTMENT 7A-8A

City State Zip Code
CHICAGO IL 60610

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 ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.2033

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

[MEMO ITEM]
REATTRIBUTION FROM SPOUSE

SUBTOTAL of Receipts This Page (optional)

10000.00

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 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MS. ELIZABETH K. CHRISTIE

Mailing Address 2019 N. KENMORE AVENUE

City

CHICAGO

State

IL

Zip Code

60614

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 ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.2607

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

SEE REATTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. ELIZABETH K. CHRISTIE

Mailing Address 2019 N. KENMORE AVENUE

City

CHICAGO

State

IL

Zip Code

60614

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 ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.2607B

Amount of Each Receipt this Period

-5000.00

CONTRIBUTION

[MEMO ITEM]
REATTRIBUTION TO SPOUSE

C.

Full Name (Last, First, Middle Initial)

MR. WILLIAM E. GUCCIARD

Mailing Address 2019 N. KENMORE AVENUE

City

CHICAGO

State

IL

Zip Code

60614

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.2608

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

[MEMO ITEM]
REATTRIBUTION FROM SPOUSE

SUBTOTAL of Receipts This Page (optional)

10000.00

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 / 227

(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)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MS. ALICE CLARK

Mailing Address 26919 MILES RIVER ROAD

City

EASTON

State

MD

Zip Code

21601

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 ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.2499

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ELLIOTT A. COBB

Mailing Address 10509 PURDEY ROAD

City

EDEN PRAIRIE

State

MN

Zip Code

55347

FEC ID number of contributing
federal political committee.

C

Name of Employer
E.C.A. MARKETING F.N.C.

Occupation

C.E.O.

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.591

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. JEAN E. COBB

Mailing Address 10509 PURDEY ROAD

City

EDEN PRAIRIE

State

MN

Zip Code

55347

FEC ID number of contributing
federal political committee.

C

Name of Employer
E.C.A. MARKETING F.N.C.

Occupation

C.O.O.

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.561

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

11000.00

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 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. DOUGLAS S. COLEMAN, JR.

Mailing Address 140 S. BROWN ROAD

City

LONG LAKE

State

MN

Zip Code

55356

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

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

Transaction ID: SA11.263

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. TERRY COLEMAN

Mailing Address 3026 S. BUCHANAN STREET

City

ARLINGTON

State

VA

Zip Code

22206

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

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

Transaction ID: SA11.307

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DANIEL P. COMMERS

Mailing Address 2575 FAIRVIEW AVENUE N.
SUITE 250

City

ROSEVILLE

State

MN

Zip Code

55113

FEC ID number of contributing
federal political committee.

C

Name of Employer
SWEENEY DEVELOPMENT

Occupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID: SA11.1713

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2250.00

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 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. JAMES F. CONLAN

Mailing Address 1 SOUTH DEARBORN

City

CHICAGO

State

IL

Zip Code

60603

FEC ID number of contributing
federal political committee.

C

Name of Employer
SIDLEY AUSTIN

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.2041

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. DIANE COOK

Mailing Address 10793 MOUNT CURVE ROAD

City

EDEN PRAIRIE

State

MN

Zip Code

55347

FEC ID number of contributing
federal political committee.

C

Name of Employer
INVESTMENT RARITIES, INC.

Occupation

SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.1554

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. JUDY COOK

Mailing Address 415 IDAHO AVENUE N.

City

GOLDEN VALLEY

State

MN

Zip Code

55427

FEC ID number of contributing
federal political committee.

C

Name of Employer
LOOK HILL GIRARD

Occupation

LOBBYIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.705

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2250.00

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 36 / 227

(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)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MRS. ANITA COOPER

Mailing Address 1508 PINETREE TRAIL

City

EAGAN

State

MN

Zip Code

55122

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 ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.294

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. PAT COOPER

Mailing Address 1508 PINETREE TRAIL

City

EAGAN

State

MN

Zip Code

55122

FEC ID number of contributing
federal political committee.

C

Name of Employer
FEDERATED INSURANCE

Occupation

FIRST VP DIR. OF MARKETING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.298

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. WILLIAM COOPER

Mailing Address 801 MARQUETTE AVENUE

City

MINNEAPOLIS

State

MN

Zip Code

55402

FEC ID number of contributing
federal political committee.

C

Name of Employer
T.C.F. BANK

Occupation

C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

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

Transaction ID: SA11.694

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

REFUND TO BE ISSUED

SUBTOTAL of Receipts This Page (optional)

12000.00

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 37 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. PETER D. CRIST

Mailing Address 306 N. GRANT

City

HINSDALE

State

IL

Zip Code

60521

FEC ID number of contributing
federal political committee.

C

Name of Employer
CRIST/KOLDER ASSOCIATES

Occupation
CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.2046

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. JOAN CUMMINS

Mailing Address 18850 NORTHOME BLVD.

City

WAYZATA

State

MN

Zip Code

55391-2610

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 ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.2606

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ROBERT P. CUMMINS

Mailing Address 18850 NORTHOME BLVD.

City

DEEPAVEN

State

MN

Zip Code

55391

FEC ID number of contributing
federal political committee.

C

Name of Employer
PRIMERA TECHNOLOGY

Occupation
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.327

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10500.00

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 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. TIMOTHY W. CUROE

Mailing Address 2849 TIMBERVIEW TRAIL

City

CHASKA

State

MN

Zip Code

55318

FEC ID number of contributing
federal political committee.

C

Name of Employer
TARGET

Occupation
RETAIL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.837

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. MARK DAVIS

Mailing Address P.O. BOX 558

City

ST. PETER

State

MN

Zip Code

56082

FEC ID number of contributing
federal political committee.

C

Name of Employer
CAMBRIA

Occupation
CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

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

Transaction ID: SA11.695

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

REATTRIBUTION REQUESTED

C.

Full Name (Last, First, Middle Initial)

MR. EDWARD N. DAYTON

Mailing Address 686 W. FERNDAL

City

WAYZATA

State

MN

Zip Code

55391

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

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

Transaction ID: SA11.124

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

11250.00

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 / 227

(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)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. JAMES J. DE MAY

Mailing Address 4900 DREW AVENUE S.

City

MINNEAPOLIS

State

MN

Zip Code

55410

FEC ID number of contributing
federal political committee.

C

Name of Employer
CITIGROUP

Occupation

GOVERNMENT RELATIONS

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.748

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. THEODORE DEIKEL

Mailing Address 1001 CALIFORNIA STREET

City

SAN FRANCISCO

State

CA

Zip Code

94108

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 ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.2103

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JEFF DEKKO

Mailing Address 4703 WHITE OAKS ROAD

City

EDINA

State

MN

Zip Code

55424

FEC ID number of contributing
federal political committee.

C

Name of Employer
WEALTH ENHANCEMENT GROUP

Occupation

C.E.O.FINANCIAL ADVISORY FIRM

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: SA11.535

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

8000.00

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 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. RICK DESLAURIES

Mailing Address 5003 CLEAR SPRING ROAD

City

MINNETONKA

State

MN

Zip Code

55345-3310

FEC ID number of contributing
federal political committee.

C

Name of Employer
RECRUITERS OF MINNESOTA

Occupation
RECRUITER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.532

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. TIMOTHY C. DEVRIES

Mailing Address 3125 FOX STREET

City

LONG LAKE

State

MN

Zip Code

55356

FEC ID number of contributing
federal political committee.

C

Name of Employer
NORWEST EQUITY PARTNERS

Occupation
PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.573

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DR. JEFFREY CLAYTON DICK

Mailing Address 18709 RIDGEWOOD ROAD

City

WAYZATA

State

MN

Zip Code

55391

FEC ID number of contributing
federal political committee.

C

Name of Employer
TWIN CITIES ORTHOPEDICS

Occupation
SURGEON

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.1559

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6500.00

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 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. CHARLES W. DOUGLAS

Mailing Address 21 IVY LANE

City

OAK BROOK

State

IL

Zip Code

60523

FEC ID number of contributing
federal political committee.

C

Name of Employer
SIDLEY AUSTIN, L.L.P.Occupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.2052

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JAMES F. DOYLE

Mailing Address 608 GOLFPARK DRIVE

City

KISSIMMEE

State

FL

Zip Code

34747

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
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
1 2 / 0 8 / 2 0 0 9

Transaction ID: SA11.1830

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. MEGAN A. DOYLE

Mailing Address 9924 DELL ROAD

City

EDEN PRAIRIE

State

MN

Zip Code

55347

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOPE FOR THE CITYOccupation
FOUNDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: SA11.704

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

4000.00

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 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MS. ELIZABETH S. DRISCOLL

Mailing Address 357 SALEM CHURCH ROAD

City

SAINT PAUL

State

MN

Zip Code

55118

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 ▼

500.00

Date of Receipt

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

Transaction ID: SA11.2500

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. PAUL DROHER

Mailing Address 880 OLD CRYSTAL BAY RD

City

ORONO

State

MN

Zip Code

55391

FEC ID number of contributing
federal political committee.

C

Name of Employer
FEDERATED INSURANCE

Occupation

EXECUTIVE VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.427

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

PHYLLIS DROHER

Mailing Address 880 OLD CRYSTAL BAY RD

City

ORONO

State

MN

Zip Code

55391

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

ARTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.432

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10500.00

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 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. MATTHEW B. DUDLEY

Mailing Address 1424 SARGENT AVENUE

City

SAINT PAUL

State

MN

Zip Code

55105

FEC ID number of contributing
federal political committee.

C

Name of Employer

THE LEUTHOLD GROUP, L.L.C.

Occupation

FINANCIAL SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.1767

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. CYNTHIA DYSTE

Mailing Address 2800 CABALINE TRAIL

City

HAMEL

State

MN

Zip Code

55340

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 ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.523

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DR. GREGG DYSTE

Mailing Address 2800 CABALINE TRAIL

City

HAMEL

State

MN

Zip Code

55340

FEC ID number of contributing
federal political committee.

C

Name of Employer

METROPOLITAN NEUROSURGERY

Occupation

NEUROSURGEON

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.538

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2250.00

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 / 227

(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)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. PETER E. ECKERLINE

Mailing Address 1520 GREEN TREES ROAD

City

WAYZATA

State

MN

Zip Code

55391

FEC ID number of contributing
federal political committee.

C

Name of Employer
MERRILL LYNCH

Occupation

SENIOR VICE PRESIDENT OF INVESTMENTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.1771

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MIKE EDWARDS

Mailing Address 3533 WINDSOR DR

City

CHARLOTTE

State

NC

Zip Code

28209

FEC ID number of contributing
federal political committee.

C

Name of Employer
STATE OF NORTH CAROLINA

Occupation

REHABILITATION ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.2254

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. BONNIE M. EGGLESTON

Mailing Address 15837 GARDEN VIEW DRIVE

City

APPLE VALLEY

State

MN

Zip Code

55124

FEC ID number of contributing
federal political committee.

C

Name of Employer
TARGET CORPORATION

Occupation

MARKETING VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.558

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1000.00

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 45 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. GARY ELLIS

Mailing Address 10082 POWERS LAKE TRAIL

City

WOODBURY

State

MN

Zip Code

55129

FEC ID number of contributing
federal political committee.

C

Name of Employer
MEDTRONIC, INC.

Occupation
FINANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.678

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. SUE ELLIS

Mailing Address 10082 POWERS LAKE TRAIL

City

WOODBURY

State

MN

Zip Code

55129

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 ▼

500.00

Date of Receipt

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

Transaction ID: SA11.671

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DR. ROBERT EMERY

Mailing Address 317 GOVELAND AVENUE
UNIT 103

City

MINNEAPOLIS

State

MN

Zip Code

55403

FEC ID number of contributing
federal political committee.

C

Name of Employer
HEALTHPARTNERS

Occupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.1692

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1250.00

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 46 / 227

(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)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. BRUCE W. ENGELSMA

Mailing Address 990 PARTENWOOD ROAD

City

ORONO

State

MN

Zip Code

55356

FEC ID number of contributing
federal political committee.

C

Name of Employer

KRAUS-ANDERSON COMPANIES,
INC.

Occupation

CEO

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.248

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RONALD A. ERICKSON

Mailing Address 5123 LAKE RIDGE ROAD

City

EDINA

State

MN

Zip Code

55436

FEC ID number of contributing
federal political committee.

C

Name of Employer

HOLIDAY COS.

Occupation

C.E.O.

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.1754

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JACK W. EUGSTER

Mailing Address 2655 KELLY AVENUE

City

EXCELSIOR

State

MN

Zip Code

55331

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

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

Transaction ID: SA11.726

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

7000.00

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 47 / 227

(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)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MRS. SARA GOURLEY EULER

Mailing Address 1030 FOREST AVENUE

City

RIVER FOREST

State

IL

Zip Code

60305

FEC ID number of contributing
federal political committee.

C

Name of Employer
SIDLEY AUSTIN, L.L.P.Occupation
LAWYER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.2040

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. BARRY FABIA

Mailing Address 713 MEADOWVIEW DR

City

NORTHFIELD

State

MN

Zip Code

55057

FEC ID number of contributing
federal political committee.

C

Name of Employer
COMPELLENT TECHNOLOGIESOccupation
SOFTWARE ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.2248

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. MICHAEL FABER

Mailing Address P.O. BOX 806

City

SAINT CLOUD

State

MN

Zip Code

56302

FEC ID number of contributing
federal political committee.

C

Name of Employer
FIRST CHOICE FOODOccupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.2407

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1500.00

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 48 / 227

(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)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MRS. DIANE FAGEN

Mailing Address 108 MILLER CIRCLE

City

GRANITE FALLS

State

MN

Zip Code

56241

FEC ID number of contributing
federal political committee.

C

Name of Employer
FAGEN, INC.

Occupation

SECRETARY/TREASURER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.114

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RON FAGEN

Mailing Address 108 MILLER CIRCLE

City

GRANITE FALLS

State

MN

Zip Code

56241

FEC ID number of contributing
federal political committee.

C

Name of Employer
FAGEN, INC.

Occupation

PRESIDENT & C.E.O.

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.152

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. TYRONE C. FAHNER

Mailing Address 71 S. WACKER DRIVE

City

CHICAGO

State

IL

Zip Code

60606

FEC ID number of contributing
federal political committee.

C

Name of Employer
MAYER BROWN, L.L.P.

Occupation

ATTORNEY

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.2028

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

11000.00

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 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. SIMON FALIC

Mailing Address 150 HARBOUR WAY

City

BAL HARBOUR

State

FL

Zip Code

33154-1333

FEC ID number of contributing
federal political committee.

C

Name of Employer
DUTY FREE AMERICAS

Occupation

BUSINESSMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.219

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JACK F. FARRELL, JR.

Mailing Address 1785 EMERSON S.

City

MINNEAPOLIS

State

MN

Zip Code

55403

FEC ID number of contributing
federal political committee.

C

Name of Employer
HASKELLS

Occupation

WINE MERCHANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: SA11.723

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JOHN A. FERGUSON

Mailing Address 551 GREENWAY DRIVE

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
GOLUB & COMPANY

Occupation

COMMERCIAL REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.2055

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

7500.00

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 50 / 227

(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)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. JEFFREY E. FETTERS

Mailing Address 1185 RIDGE ROAD

City

OWATONNA

State

MN

Zip Code

55060

FEC ID number of contributing
federal political committee.

C

Name of Employer
FEDERATED INSURANCE

Occupation

PRESIDENT & C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.157

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. MARCIA L. FETTERS

Mailing Address 1185 RIDGE ROAD

City

OWATONNA

State

MN

Zip Code

55060

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 ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.132

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. MARK FILIP

Mailing Address 300 N. LASALLE

City

CHICAGO

State

IL

Zip Code

60654

FEC ID number of contributing
federal political committee.

C

Name of Employer
KIRKLAND & ELLIS

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: SA11.2036

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

12500.00

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 51 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. CAMERON FINDLAY

Mailing Address 656 SHERIDAN ROAD

City

WINNETKA

State

IL

Zip Code

60093

FEC ID number of contributing
federal political committee.

C

Name of Employer
MEDTRONIC, INC.

Occupation
LAWYER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

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

Transaction ID: SA11.2006

Amount of Each Receipt this Period

4000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. D. CAMERON FINDLAY

Mailing Address 656 SHERIDAN ROAD

City

WINNETKA

State

IL

Zip Code

60093

FEC ID number of contributing
federal political committee.

C

Name of Employer
MEDTRONIC, INC.

Occupation
LAWYER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.669

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. KENNETH M. FINK

Mailing Address 4215 CEDARWOOD ROAD

City

ST. LOUIS PARK

State

MN

Zip Code

55416

FEC ID number of contributing
federal political committee.

C

Name of Employer
TAMAR-FINK INC.

Occupation
FINANCIAL PLANNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.2123

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10000.00

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 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. MICHAEL B. FITERMAN

Mailing Address 2200 ISENGARD

City

MINNETONKA

State

MN

Zip Code

55305

FEC ID number of contributing
federal political committee.

C

Name of Employer
LIBERTY DIVERSIFIED

Occupation

C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.743

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. PETER FLANIGAN

Mailing Address 299 PARK AVENUE

City

NEW YORK

State

NY

Zip Code

10171

FEC ID number of contributing
federal political committee.

C

Name of Employer
UBS SECURITIES L.L.C.

Occupation

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
1 2 / 0 8 / 2 0 0 9

Transaction ID: SA11.1916

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. MARK C. FORTIN

Mailing Address 12 NORMAND CIRCLE

City

BEDFORD

State

NH

Zip Code

03110

FEC ID number of contributing
federal political committee.

C

Name of Employer
COMCAST

Occupation

VP FINANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.1302

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6000.00

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 / 227

(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)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. MICHAEL R. FRANCIS

Mailing Address 2995 WATERTOWN ROAD

City

ORONO

State

MN

Zip Code

55356

FEC ID number of contributing
federal political committee.

C

Name of Employer
TARGET CORPORATION

Occupation

EXECUTIVE VICE PRESIDENT & C.M.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.585

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. HARRY ANDREW FRANKMAN

Mailing Address 220 SOUTH 6TH STREET

City

MINNEAPOLIS

State

MN

Zip Code

55402-4502

FEC ID number of contributing
federal political committee.

C

Name of Employer
FRANKMAN LAW

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.737

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DAVID R. FRAUENSHUH

Mailing Address 7101 WEST 78TH STREET

City

MINNEAPOLIS

State

MN

Zip Code

55439

FEC ID number of contributing
federal political committee.

C

Name of Employer
FRAUENSHUH, INC.

Occupation

C.E.O. CHAIRMAN & FOUNDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.618

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6500.00

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

SANDRA L. FRAUENSHUH

Mailing Address 7101 WEST 78TH STREET

City

MINNEAPOLIS

State

MN

Zip Code

55439

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 ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.619

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. BRUNO FREDERIC

Mailing Address 5500 WAYZATA BLVD.
SUITE 1450

City

MINNEAPOLIS

State

MN

Zip Code

55416

FEC ID number of contributing
federal political committee.

C

Name of Employer
BRUNO & NELSON ATTORNEYS
AT LAW

Occupation

ATTORNEY AT LAW

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.1283

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. EUGENE U. FREY

Mailing Address 4351 GULF SHORES BLVD. N.

City

NAPLES

State

FL

Zip Code

34103

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 ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.1712

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

11000.00

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 55 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. IAN FRIENDLY

Mailing Address 19825 CHARTWELL HILL

City

SHOREWOOD

State

MN

Zip Code

55331

FEC ID number of contributing
federal political committee.

C

Name of Employer
GENERAL MILLS INC.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.115

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. JANE FULCHER

Mailing Address P.O. BOX 31189

City

SEA ISLAND

State

GA

Zip Code

31561

FEC ID number of contributing
federal political committee.

C

Name of Employer
S.F.A.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.2493

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JOSEPH M. FUSARO, JR.

Mailing Address 16600 45TH AVENUE N.

City

PLYMOUTH

State

MN

Zip Code

55446

FEC ID number of contributing
federal political committee.

C

Name of Employer
TARGET

Occupation

BUYER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.340

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1750.00

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 56 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. EDWIN C. GAGE

Mailing Address 301 CARLSON PKWY.
SUITE 275

City State Zip Code
MINNETONKA MN 55305

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 ▼

2000.00

Date of Receipt

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

Transaction ID: SA11.764

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JOHN S. GARDNER

Mailing Address 110 W. BELLFONTE AVENUE

City State Zip Code
ALEXANDRIA VA 22301

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.512

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. THOMAS J. GARNCARZ

Mailing Address 19112 ITERI AVENUE

City State Zip Code
LAKEVILLE MN 55044

FEC ID number of contributing
federal political committee.

C

Name of Employer
FLINT HILLS RESOURCES L.P.

Occupation
MARKETING MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.297

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

3500.00

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 57 / 227

(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)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. EDWARD GARVEY

Mailing Address 32 LAWTON STREET

City

SAINT PAUL

State

MN

Zip Code

55102

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

CONSULTANT

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.2806

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. NATHAN K. GARVIS

Mailing Address 2119 FREMONT AVENUE S.

City

MINNEAPOLIS

State

MN

Zip Code

55405

FEC ID number of contributing
federal political committee.

C

Name of Employer
TARGET CORPORATION

Occupation

GOVERNMENT RELATIONS

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.1284

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. SAM GEDULDIG

Mailing Address 1519 PATHFINDER LANE

City

MCLEAN

State

VA

Zip Code

22101

FEC ID number of contributing
federal political committee.

C

Name of Employer
CLARK, LYTLE & GEDULDIG

Occupation

SENIOR PARTNER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.543

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6250.00

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 58 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. PHILIP GEIER

Mailing Address 10 GRACIE SQ.

City

NEW YORK

State

NY

Zip Code

10028

FEC ID number of contributing
federal political committee.

C

Name of Employer
GEIER GROUP, LLC.

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.2149

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. SHAWN GENSCH

Mailing Address 720 N. 4TH STREET #704

City

MINNEAPOLIS

State

MN

Zip Code

55401

FEC ID number of contributing
federal political committee.

C

Name of Employer
TARGET CORPORATION

Occupation

MARKETING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.1738

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JOHN GIBBS

Mailing Address 9533 VIRGINIA AV S

City

BLOOMINGTON

State

MN

Zip Code

55438

FEC ID number of contributing
federal political committee.

C

Name of Employer
COMCAST CORPORATION

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.825

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6250.00

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 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. RYAN R. GILBERTSON

Mailing Address 4716 W. ARM ROAD

City

SPRING PARK

State

MN

Zip Code

55384

FEC ID number of contributing
federal political committee.

C

Name of Employer
NORTHERN GAS & OIL

Occupation

C.F.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.699

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JAMES L. GIRARD

Mailing Address 7677 NOTTINGHAM PARKWAY

City

MAPLE GROVE

State

MN

Zip Code

55311

FEC ID number of contributing
federal political committee.

C

Name of Employer
LOOK HILL GIRARD

Occupation

LOBBYIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.730

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. ELIZABETH L. GORMAN

Mailing Address 5100 MIRROR LAKES DRIVE

City

EDINA

State

MN

Zip Code

55436

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 ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.121

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

11000.00

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 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. MICHAEL BRIAN GORMAN

Mailing Address 5100 MIRROR LAKES DRIVE

City

EDINA

State

MN

Zip Code

55436

FEC ID number of contributing
federal political committee.

C

Name of Employer
SPLIT ROCK PARTNERS

Occupation
FINANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.154

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. SHERRY A. GORMAN

Mailing Address 3695 BIRCHPOND ROAD

City

EAGAN

State

MN

Zip Code

55122

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.2640

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. FRED GRAFFAM, III

Mailing Address 3517 OLD TRAIL ROAD

City

EDGEWATER

State

MD

Zip Code

21037

FEC ID number of contributing
federal political committee.

C

Name of Employer
COMCAST CABLE

Occupation
SENIOR VICE PRESIDENT - FINANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.1730

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. ROBERT T. GRAND

Mailing Address 11 S. MERIDIAN STREET

City

INDIANAPOLIS

State

IN

Zip Code

46204

FEC ID number of contributing
federal political committee.

C

Name of Employer
BARNES & THORNBURG

Occupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.2610

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. PAUL D. GRANGAARD

Mailing Address 6927 MARK TERRACE CIRCLE

City

EDINA

State

MN

Zip Code

55439

FEC ID number of contributing
federal political committee.

C

Name of Employer
ALLEN EDMONDS SHOE COPRPO-
RATION

Occupation
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: SA11.1964

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. PETER M. GRANT

Mailing Address 1245 COUNTY ROAD 6

City

LONG LAKE

State

MN

Zip Code

55356

FEC ID number of contributing
federal political committee.

C

Name of Employer
STONE ARCH CAPITOL, L.L.C.

Occupation
PRIVATE EQUITY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.716

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

8000.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. JEFFREY PETER GREINER

Mailing Address 4760 LODGE LANE

City

GREENWOOD

State

MN

Zip Code

55331

FEC ID number of contributing
federal political committee.

C

Name of Employer

NORWEST EQUITY PARTNERS

Occupation

PRIVATE EQUITY INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.531

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

SEE REATTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JEFFREY PETER GREINER

Mailing Address 4760 LODGE LANE

City

GREENWOOD

State

MN

Zip Code

55331

FEC ID number of contributing
federal political committee.

C

Name of Employer

NORWEST EQUITY PARTNERS

Occupation

PRIVATE EQUITY INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 9

Transaction ID: SA11.531B

Amount of Each Receipt this Period

-5000.00

CONTRIBUTION

[MEMO ITEM]
REATTRIBUTION TO SPOUSE

C.

Full Name (Last, First, Middle Initial)

MRS. THERESA GREINER

Mailing Address 4760 LODGE LANE

City

GREENWOOD

State

MN

Zip Code

55331-9287

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 ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 9

Transaction ID: SA11.2382

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

[MEMO ITEM]
REATTRIBUTION FROM SPOUSE

SUBTOTAL of Receipts This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. JOHN DAVID GRIFFITH

Mailing Address 7624 ZANZIBAR LANE N.

City

MAPLE GROVE

State

MN

Zip Code

55311

FEC ID number of contributing
federal political committee.

C

Name of Employer
TARGET CORPORATION

Occupation

REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.595

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. LISA ANN GRIFFITH

Mailing Address 7624 ZANZIBAR LANE N.

City

MAPLE GROVE

State

MN

Zip Code

55311

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.584

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. WILLIAM GUIDERA

Mailing Address 1085 WILLOW VIEW DRIVE

City

ORONO

State

MN

Zip Code

55356

FEC ID number of contributing
federal political committee.

C

Name of Employer
NEWS CORPORATION

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: SA11.658

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

12500.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. TODD GURSTEL

Mailing Address 9609 OAK RIDGE TRAIL

City

MINNETONKA

State

MN

Zip Code

55305

FEC ID number of contributing
federal political committee.

C

Name of Employer
GURSTEL, STALLOCH & CHARGO

Occupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.744

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JAMES T. HACKETT

Mailing Address 3372 DEL MONTE DRIVE

City

HOUSTON

State

TX

Zip Code

77019

FEC ID number of contributing
federal political committee.

C

Name of Employer
ANADARKO PETROLEUM

Occupation
OIL & GAS EXPLORATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.611

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

JAMES E. HAGLUND

Mailing Address 4330 BASSETT CREEK DRIVE

City

GOLDEN VALLEY

State

MN

Zip Code

55422

FEC ID number of contributing
federal political committee.

C

Name of Employer
CENTRAL CONTAINER CORP

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.599

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

SEE REATTRIBUTION

SUBTOTAL of Receipts This Page (optional)

16000.00

TOTAL This Period (last page this line number only)

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

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

JAMES E. HAGLUND

Mailing Address 4330 BASSETT CREEK DRIVE

City

GOLDEN VALLEY

State

MN

Zip Code

55422

FEC ID number of contributing
federal political committee.

C

Name of Employer
CENTRAL CONTAINER CORP

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.599B

Amount of Each Receipt this Period

-5000.00

CONTRIBUTION

[MEMO ITEM]

REATTRIBUTION TO SPOUSE

B.

Full Name (Last, First, Middle Initial)

MRS. KATHLEEN M. HAGLUND

Mailing Address 4330 BASSETT CREEK DRIVE

City

GOLDEN VALLEY

State

MN

Zip Code

55422-3611

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 ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.625

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

[MEMO ITEM]

REATTRIBUTION FROM SPOUSE

C.

Full Name (Last, First, Middle Initial)

MR. BRIAN HALEY

Mailing Address 1801 LAVACA STREET
APARTMENT 13B

City

AUSTIN

State

TX

Zip Code

78701

FEC ID number of contributing
federal political committee.

C

Name of Employer
FREEDOM FIRST PAC

Occupation
FINANCE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.336

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. HAROLD E. HAMILTON

Mailing Address 1142 97TH LANE NW

City

COON RAPIDS

State

MN

Zip Code

55433

FEC ID number of contributing
federal political committee.

C

Name of Employer
MICRO CONTROL COMPANY

Occupation
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.552

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. HARRY HAMMERLY

Mailing Address 4501 GULF SHORE BLVD. N.
APARTMENT 1404

City

NAPLES

State

FL

Zip Code

34103

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

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

Transaction ID: SA11.1342

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JAMES HARMAN

Mailing Address 2820 COX NECK ROAD

City

CHESTER

State

MD

Zip Code

21619

FEC ID number of contributing
federal political committee.

C

Name of Employer
RESPONSE AMERICA

Occupation
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.508

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. MARK A. HARRIS

Mailing Address 329 CHESTNUT STREET

City

WINNETKA

State

IL

Zip Code

60093

FEC ID number of contributing
federal political committee.

C

Name of Employer
MCDERMOTT WILL & EMERY,
L.L.P.

Occupation

LAWYER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.2021

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ROBERT M. HARRISON

Mailing Address 5749 SUNNYBROOK LANE

City

MINNETRISTA

State

MN

Zip Code

55364

FEC ID number of contributing
federal political committee.

C

Name of Employer
TARGET CORPORATION

Occupation

VICE PRESIDENT CONTROLLER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.269

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. MICHAEL F. HARRON

Mailing Address 400 N. MICHIGAN AVENUE
SUITE 620

City

CHICAGO

State

IL

Zip Code

60611

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

INVESTMENTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.2034

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2250.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MRS. JUSTINE HASELOW

Mailing Address 6408 INTERLACHEN BLVD.

City

EDINA

State

MN

Zip Code

55436

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 ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.581

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. ROBERT HASELOW

Mailing Address 6408 INTERLACHEN BLVD.

City

EDNA

State

MN

Zip Code

55436

FEC ID number of contributing
federal political committee.

C

Name of Employer
MINNEAPOLIS RADIATION ONC-
OLOGY

Occupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.569

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. MIKE HASSLINGER

Mailing Address 709 HAVENHILL RD

City

EAGAN

State

MN

Zip Code

55123

FEC ID number of contributing
federal political committee.

C

Name of Employer
CRAIG-HALLUM

Occupation
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.822

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10250.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. WILLIAM A. HAWKINS

Mailing Address 2750 WOOLSEY LANE

City

WAYZATA

State

MN

Zip Code

55391

FEC ID number of contributing
federal political committee.

C

Name of Employer
MEDTRONIC

Occupation

CHAIRMAN & C.E.O.

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: SA11.125

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. MICHAEL R. HAYDEN

Mailing Address 6704 PARKWOOD LANE

City

EDINA

State

MN

Zip Code

55436

FEC ID number of contributing
federal political committee.

C

Name of Employer
STAGING CONCEPTS INC.

Occupation

MANAGEMENT

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.570

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. VERNON HEATH

Mailing Address 7900 XERXES AVENUE S.
SUITE 930

City

BLOOMINGTON

State

MN

Zip Code

55431

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

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

Transaction ID: SA11.571

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

8500.00

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 70 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MRS. ANN HEIDER

Mailing Address 776 FAIRMOUNT AVENUE

City

SAINT PAUL

State

MN

Zip Code

55105

FEC ID number of contributing
federal political committee.

C

Name of Employer

U.S. BANCORP

Occupation

PARALEGAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.1747

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DAVID A. HEIDER

Mailing Address 776 FAIRMOUNT AVENUE

City

SAINT PAUL

State

MN

Zip Code

55105

FEC ID number of contributing
federal political committee.

C

Name of Employer

UNITED HARDWARE DISTRIBUT-
ING

Occupation

BUSINESSMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.1752

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. MICHAEL HELGESON

Mailing Address 3054 RIVERA ROAD

City

SARTELL

State

MN

Zip Code

56377-9756

FEC ID number of contributing
federal political committee.

C

Name of Employer

GOLDEN PLUMP POULTRY

Occupation

MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.1682

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

750.00

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 71 / 227

(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)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. MARK HENDERSON

Mailing Address 1207 SUMMIT MEADOWS

City

FENTON

State

MO

Zip Code

63026

FEC ID number of contributing
federal political committee.

C

Name of Employer
CREATIVE AUTOMATION

Occupation

SYSTEMS ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.416

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. BRUCE HENDRY

Mailing Address 100 3RD AVENUE S. #3104

City

MINNEAPOLIS

State

MN

Zip Code

55401

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

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

Transaction ID: SA11.123

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. CHUCK HENGEL

Mailing Address 3005 MAPLEWOOD RD

City

WOODLAND

State

MN

Zip Code

55391

FEC ID number of contributing
federal political committee.

C

Name of Employer
MARKETING ARCHITECTS, INC.

Occupation

ADVERTISING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: SA11.2243

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

3750.00

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 72 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. TODD A. HILL

Mailing Address 8924 WILLOWBY CROSSING

City

MAPLE GROVE

State

MN

Zip Code

55311

FEC ID number of contributing
federal political committee.

C

Name of Employer
COOK HILL GIRARD ASSOCIAT-
ES

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.765

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. WILLIAM A. HODDER

Mailing Address 11 CIRCLE W.

City

EDINA

State

MN

Zip Code

55436

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 ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.718

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. EDWIN H. HODGE

Mailing Address 111 OXFORD ROAD

City

KENILWORTH

State

IL

Zip Code

60043

FEC ID number of contributing
federal political committee.

C

Name of Employer
MORGAN STANLEY

Occupation
SALES/MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.2004

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

11000.00

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 73 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

RANDALL J. HOGAN

Mailing Address 2260 FOX STREET

City

ORONO

State

MN

Zip Code

55356

FEC ID number of contributing
federal political committee.

C

Name of Employer
PENTAIR, INC.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.622

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JAMES A. HOLMQUIST

Mailing Address 2310 OAK GLEN COURT

City

STILLWATER

State

MN

Zip Code

55082

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOLMQUIST CONSULTING

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.735

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DOUGLAS J. HOLTZ-EAKIN

Mailing Address 901 N. POLLARD STREET
APARTMENT 2307

City

ARLINGTON

State

VA

Zip Code

22203

FEC ID number of contributing
federal political committee.

C

Name of Employer
DICE CONSULTING LLC

Occupation

ECONOMIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.218

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6500.00

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 74 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. J. DAVID HOPPE

Mailing Address 5444 MARLSTONE LANE

City

FAIRFAX

State

VA

Zip Code

22030

FEC ID number of contributing
federal political committee.

C

Name of Employer
QUINN GILLESPIE & ASSOCIA-
TES L.L.C.

Occupation
LOBBYIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.74

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. KAREN H. HUBBARD

Mailing Address 3415 UNIVERSITY AVENUE W.

City

SAINT PAUL

State

MN

Zip Code

55114

FEC ID number of contributing
federal political committee.

C

Name of Employer
HUBBARD BROADCASTING

Occupation
DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.247

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

STANLEY S. HUBBARD

Mailing Address 3415 UNIVERSITY AVENUE

City

ST. PAUL

State

MN

Zip Code

55114

FEC ID number of contributing
federal political committee.

C

Name of Employer
HUBBARD BROADCASTING, INC.

Occupation
BROADCASTING EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.609

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10500.00

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 75 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. THOMAS HULL

Mailing Address 459 FERNDAL WOODS ROAD

City

WAYZATA

State

MN

Zip Code

55391

FEC ID number of contributing
federal political committee.

C

Name of Employer
LOWRY HILL (WELLS FARGO)

Occupation

INVESTMENT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.818

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. STEVEN HUNSICKER

Mailing Address 3083 ORDWAY ST NW

City

WASHINGTON

State

DC

Zip Code

20008

FEC ID number of contributing
federal political committee.

C

Name of Employer
BAKER BOTTS

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.446

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. LELAND E. HUTCHINSON

Mailing Address 399 W. FULLERTON PARKWAY
APARTMENT 17E

City

CHICAGO

State

IL

Zip Code

60614

FEC ID number of contributing
federal political committee.

C

Name of Employer
MORGAN STANLEY

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.2611

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2500.00

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 76 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. ALFRED A. IVERSEN

Mailing Address 2216 HUNTINGTON POINT W.

City

WAYZATA

State

MN

Zip Code

55391

FEC ID number of contributing
federal political committee.

C

Name of Employer
PMT CORPORATION

Occupation
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.1734

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. BRUCE P. JACKSON

Mailing Address 3312 ROWLAND PLACE NW

City

WASHINGTON

State

DC

Zip Code

20008

FEC ID number of contributing
federal political committee.

C

Name of Employer
PROJECT ON TRANSITIONAL
DEMOCRACIES

Occupation
NON-PROFIT EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.1756

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. BETH M. JACOB

Mailing Address 885 NAVAJO ROAD

City

MEDINA

State

MN

Zip Code

55340

FEC ID number of contributing
federal political committee.

C

Name of Employer
TARGET

Occupation
CIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.290

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1750.00

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 77 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. JOHN JACOB

Mailing Address 885 NAVAJO ROAD

City

MEDINA

State

MN

Zip Code

55340

FEC ID number of contributing
federal political committee.

C

Name of Employer
FCX PERFORMANCE

Occupation
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.277

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. FRANCIS CRAIG JILK

Mailing Address 4101 GULF SHORES BLVD. N. #10S

City

NAPLES

State

FL

Zip Code

34103

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

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

Transaction ID: SA11.1718

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. PATRICIA JILK

Mailing Address 4101 GULF SHORES BLVD. N. #10S

City

NAPLES

State

FL

Zip Code

34103

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 ▼

500.00

Date of Receipt

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

Transaction ID: SA11.1715

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1500.00

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 78 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. GREGORY D. JOHNSON

Mailing Address 9633 N. 223RD STREET

City

FOREST LAKE

State

MN

Zip Code

55025

FEC ID number of contributing
federal political committee.

C

Name of Employer
WEBER JOHNSON P.A.

Occupation
PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.693

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JOEL W. JOHNSON

Mailing Address 10831 E. WINDGATE PASS DRIVE

City

SCOTTSDALE

State

AZ

Zip Code

85255

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 ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.2997

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ORVILLE D. JOHNSON

Mailing Address 1085 NENA COURT

City

STILLWATER

State

MN

Zip Code

55082

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

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

Transaction ID: SA11.264

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

7000.00

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. DOUGLAS C. JONES

Mailing Address P.O. BOX 26

City

NERSTRAND

State

MN

Zip Code

55053

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

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

Transaction ID: SA11.153

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. MARY STAUGHTON JONES

Mailing Address P.O. BOX 26

City

NERSTRAND

State

MN

Zip Code

55053

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 ▼

250.00

Date of Receipt

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

Transaction ID: SA11.118

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. JULIE JORGENSEN

Mailing Address 519 FERNDAL ROAD N.

City

WAYZATA

State

MN

Zip Code

53391

FEC ID number of contributing
federal political committee.

C

Name of Employer
EXCELSIOR ENERGY

Occupation
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.250

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1500.00

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 80 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MRS. BARBARA M. JUDD

Mailing Address 1465 SPRINGWOOD PLACE NE

City

OWATONNA

State

MN

Zip Code

55060

FEC ID number of contributing
federal political committee.

C

Name of Employer
RIVERLAND COMMUNITY COLLEGE

Occupation

INSTRUCTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.134

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. STEVEN W. JUDD

Mailing Address 1465 SPRINGWOOD PLACE NE

City

OWATONNA

State

MN

Zip Code

55060

FEC ID number of contributing
federal political committee.

C

Name of Employer
FEDERATED INSURANCE COMPANY

Occupation

ACTUARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.158

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. DORENE KAINZ

Mailing Address 570 ASBURY STREET #201

City

ST. PAUL

State

MN

Zip Code

55104

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 ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.796

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

15000.00

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 81 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. ALEXANDER KAPLAN

Mailing Address 1602 BELMONT ST NW
UNIT D

City State Zip Code
WASHINGTON DC 20009

FEC ID number of contributing
federal political committee.

C

Name of Employer
SWISS RE

Occupation
GOVERNMENT AFFAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.374

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RONALD KARKELA

Mailing Address 820 RECLUSE CT.

City State Zip Code
CASPER WY 82609

FEC ID number of contributing
federal political committee.

C

Name of Employer
NEW YORK LIFE

Occupation
MANAGING PARTNER WYOMING G. O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.1324

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. JENNIFER KARR

Mailing Address 1711 PRELUDE DRIVE

City State Zip Code
VIENNA VA 22182

FEC ID number of contributing
federal political committee.

C

Name of Employer
AMERICAN MEDICAL ASSOCIATION

Occupation
REG. POLITICAL DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.509

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1000.00

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 82 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. ALEXANDER KEITH

Mailing Address 5225 MEADOW CROSSING ROAD SW

City

ROCHESTER

State

MN

Zip Code

55902

FEC ID number of contributing
federal political committee.

C

Name of Employer
DUNLAP & SEEGER

Occupation

ATTORNEY AT LAW

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.1584

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. MICHAEL NORMAN KELLER

Mailing Address 1745 DENMARK PLACE NE

City

OWATONNA

State

MN

Zip Code

55060

FEC ID number of contributing
federal political committee.

C

Name of Employer
FEDERATED INSURANCE

Occupation

INSURANCE EXECUTIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.159

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. NANCY G. KELLER

Mailing Address 1745 DENMARK PLACE NE

City

OWATONNA

State

MN

Zip Code

55060

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 ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.136

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10250.00

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 83 / 227

(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)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

ROBIN KELLEHER

Mailing Address 800 BLUEBILL BAY ROAD

City

BURNSVILLE

State

MN

Zip Code

55306

FEC ID number of contributing
federal political committee.

C

Name of Employer
SEATON BECK & PETERS P.A.Occupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.440

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. ESTHER KELLOGG

Mailing Address 339 MT. CURVE BLVD.

City

ST. PAUL

State

MN

Zip Code

55105

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.733

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. MARTIN KELLOGG

Mailing Address 339 MT. CURVE BLVD.

City

ST. PAUL

State

MN

Zip Code

55105

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.753

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1500.00

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 84 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MS. ANN KELLY

Mailing Address 930 M. STREET NW
APARTMENT 133

City State Zip Code
WASHINGTON DC 20001

FEC ID number of contributing
federal political committee.

C

Name of Employer
FREEDOM FIRST PAC

Occupation
DIRECTOR OF OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.514

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. ANN KELLY

Mailing Address 930 M. STREET NW
APARTMENT 133

City State Zip Code
WASHINGTON DC 20001

FEC ID number of contributing
federal political committee.

C

Name of Employer
FREEDOM FIRST PAC

Occupation
DIRECTOR OF OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.985

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. MARK S. KELLY

Mailing Address 3 LEE ROAD

City State Zip Code
MAPLE GLEN PA 19002

FEC ID number of contributing
federal political committee.

C

Name of Employer
KELLY & PARTNERS

Occupation
DIRECTOR OF SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.52

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

500.00

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 85 / 227

(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)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. MICHAEL A. KELLY

Mailing Address 11 SCOTCH PINE ROAD

City

NORTH OAKS

State

MN

Zip Code

55127

FEC ID number of contributing
federal political committee.

C

Name of Employer
3M

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.119

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ROBERT A. KERBELL

Mailing Address 3827 HOUSE ROAD

City

EAU CLAIRE

State

WI

Zip Code

54701

FEC ID number of contributing
federal political committee.

C

Name of Employer
LORMAN EDUCATION SERVICES

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.2615

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ROBERT A. KIERLIN

Mailing Address P.O. BOX 302

City

WINONA

State

MN

Zip Code

55987

FEC ID number of contributing
federal political committee.

C

Name of Employer
FASTENAL COMPANY

Occupation

BOARD CHAIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: SA11.145

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

8000.00

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 86 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. PETER T. KINNEY

Mailing Address 27 E. OAKS

City

NORTH OAKS

State

MN

Zip Code

55127

FEC ID number of contributing
federal political committee.

C

Name of Employer
QUEST ENGINEERING INC.

Occupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.749

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ROBERT KLAS

Mailing Address 1685 MARTHALER LANE

City

MENDOTA HEIGHTS

State

MN

Zip Code

55118

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE TAPEMARK COMPANY

Occupation
CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.1782

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. CARL R. KLEIN

Mailing Address 200 S. MICHIGAN AVENUE
SUITE 1100

City

CHICAGO

State

IL

Zip Code

60604

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOWARD & HOWARD, P.L.C.

Occupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.2027

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2000.00

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 87 / 227

(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)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

JOHN A. KNAPP

Mailing Address 2193 SARGENT AVENUE

City

ST. PAUL

State

MN

Zip Code

55105

FEC ID number of contributing
federal political committee.

C

Name of Employer
WINTHROP & WEINSTINEOccupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.620

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. MARK L. KNIFF

Mailing Address 529 S. 10TH STREET

City

MINNEAPOLIS

State

MN

Zip Code

55404

FEC ID number of contributing
federal political committee.

C

Name of Employer
CARGILL, INC.Occupation
GENERAL MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.1016

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. LES H. KNOKE, JR.

Mailing Address 8911 LEGENDS CLUB DRIVE

City

PRIOR LAKE

State

MN

Zip Code

55372

FEC ID number of contributing
federal political committee.

C

Name of Employer
KNOKE & ASSOCIATESOccupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: SA11.746

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

3250.00

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 88 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. PAUL KOCH

Mailing Address 700 SHADYVIEW LANE N.

City

PLYMOUTH

State

MN

Zip Code

55447

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.B.S. FINANCIAL SERVICES

Occupation

SENIOR VICE PRESIDENT/WEALTH MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.659

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. SHALOM L. KOHN

Mailing Address 9223 N. HAMLIN

City

EVANSTON

State

IL

Zip Code

60603

FEC ID number of contributing
federal political committee.

C

Name of Employer
SIDLEY AUSTIN, L.L.P.

Occupation

LAWYER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.2050

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. STEVEN KOHNER

Mailing Address 4980 6TH STREET

City

WINONA

State

MN

Zip Code

55987

FEC ID number of contributing
federal political committee.

C

Name of Employer
MODERN READY MIX

Occupation

OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.770

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. PETER M. KRAMER

Mailing Address 4308 BRIDGOOR DRIVE

City

SHOREVIEW

State

MN

Zip Code

55126

FEC ID number of contributing
federal political committee.

C

Name of Employer
UNIVERSITY OF MINNESOTA

Occupation
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.262

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. WILFRED W. KRECH

Mailing Address 9574 INVER GROVE TRAIL

City

INVER GROVE HEIGHT

State

MN

Zip Code

55076

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
ELECTRICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.1280

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. PAIGE V. LANCE

Mailing Address 2015 FREEDOM LANE

City

FALLS CHURCH

State

VA

Zip Code

22043

FEC ID number of contributing
federal political committee.

C

Name of Employer
HAHN GROUP

Occupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.25

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

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

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. C. KEVIN LANDRY

Mailing Address 250 BOYLSTON

City

BOSTON

State

MA

Zip Code

02116

FEC ID number of contributing
federal political committee.

C

Name of Employer
T.A. ASSETS MANAGEMENT,
L.L.C.

Occupation

INVESTMENT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.2054

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

RICHARD LANG

Mailing Address 662 MALIN RD

City

NEWTOWN SQUARE

State

PA

Zip Code

19073

FEC ID number of contributing
federal political committee.

C

Name of Employer
COMCAST CABLE COMMUNICATI-
ONS, INC.

Occupation

SVP, MARKETING & SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID: SA11.637

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ROBERT M. LANIGAN

Mailing Address 24 SHAWNEE

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
MORGAN STANLEY

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: SA11.2609

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

8500.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MRS. NORMA LANNERS

Mailing Address 11772 VALLEY CREEK ROAD

City

WOODBURN

State

MN

Zip Code

55129

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 ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.553

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. HEATHER LARRISON

Mailing Address P.O. BOX 33045

City

WASHINGTON

State

DC

Zip Code

20033-0045

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE LARRISON GROUP

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.351

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JEFF T. LARSON

Mailing Address 570 ASBURY STREET #201

City

ST. PAUL

State

MN

Zip Code

55104

FEC ID number of contributing
federal political committee.

C

Name of Employer
F.L.S. CONNECT

Occupation

SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.810

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6500.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MS. MEGHAN LATCOVICH

Mailing Address 1526 COLONIAL TERRACE

City

ARLINGTON

State

VA

Zip Code

22209

FEC ID number of contributing
federal political committee.

C

Name of Employer
F.O.J.M.

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.511

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. TIMOTHY LEAFBLAD

Mailing Address 9500 OXBOROUGH CURVE

City

BLOOMINGTON

State

MN

Zip Code

55437

FEC ID number of contributing
federal political committee.

C

Name of Employer
TIMOTHY LEAFBLAD

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.2250

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JAMES LEMKE

Mailing Address 4135 TRILLIUM LANE E.

City

MINNETRISTA

State

MN

Zip Code

55364

FEC ID number of contributing
federal political committee.

C

Name of Employer
C.H. ROBINSON WORLDWIDE

Occupation

MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.2926

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. EDWARD C. LEVY, JR.

Mailing Address 711 S. BATES STREET

City

BIRMINGHAM

State

MI

Zip Code

48009

FEC ID number of contributing
federal political committee.

C

Name of Employer

EDWARD C. LEVY COMPANY

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.722

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. A. DANIEL LEWIS

Mailing Address 11067 BRANCHING HORN

City

EDEN PRAIRIE

State

MN

Zip Code

55347

FEC ID number of contributing
federal political committee.

C

Name of Employer

FEDERATED INSURANCE

Occupation

ADMINISTRATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.160

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. BONITA E. LEWIS

Mailing Address 11067 BRANCHING HORN

City

EDEN PRAIRIE

State

MN

Zip Code

55347

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 ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.138

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. STEVEN B. LIEFSCHULTZ

Mailing Address 2660 WOOLSEY LANE

City

WAYZATA

State

MN

Zip Code

55391

FEC ID number of contributing
federal political committee.

C

Name of Employer
EQUITY BANK

Occupation

CHAIRMAN & C.E.O.

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.728

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

JOHN E. LINDAHL

Mailing Address 3222 ROBINSON BAY ROAD

City

DEEPHAVEN

State

MN

Zip Code

55391

FEC ID number of contributing
federal political committee.

C

Name of Employer
NORTHWEST ENERGY PARTNERS

Occupation

INVESTOR

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.612

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

NANCY E. LINDAHL

Mailing Address 3222 ROBINSON BAY ROAD

City

DEEPHAVEN

State

MN

Zip Code

55391

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation

VOLUNTEER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.613

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. PHILIP LINDAU

Mailing Address 2825 MEDICINE RIDGE ROAD

City

MINNEAPOLIS

State

MN

Zip Code

55441

FEC ID number of contributing
federal political committee.

C

Name of Employer

COMMODITY SPECIALISTS COM-
PANY

Occupation

CO-PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.1368

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. GARY L. LINDSTROM

Mailing Address 13345 SCANDIA TRAIL N.

City

SCANDIA

State

MN

Zip Code

55073

FEC ID number of contributing
federal political committee.

C

Name of Employer

FRAVENSHUH

Occupation

PRINCIPAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: SA11.245

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

CAITLIN FRANCES LONG

Mailing Address 3 MEADOW WOOD DRIVE

City

GREENWICH

State

CT

Zip Code

06830

FEC ID number of contributing
federal political committee.

C

Name of Employer

MORGAN STANLEY

Occupation

BANKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.2604

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

8000.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. RODRIGO LOPEZ

Mailing Address 13954 ARROW CREEK

City

DRAPER

State

UT

Zip Code

84020

FEC ID number of contributing
federal political committee.

C

Name of Employer
COMCAST

Occupation

REGIONAL VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.1317

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. THOMAS P. LOWE

Mailing Address 2630 W. LAFAYETTE ROAD

City

EXCELSIOR

State

MN

Zip Code

55331

FEC ID number of contributing
federal political committee.

C

Name of Employer
LYMAN LUMBER COMPANY

Occupation

CORPORATE EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.1281

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. FREDERICK C. LOWINGER

Mailing Address 950 HILL ROAD

City

WINNETKA

State

IL

Zip Code

60093

FEC ID number of contributing
federal political committee.

C

Name of Employer
SIDLEY AUSTIN, L.L.P.

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.2053

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. H. WILLIAM LURTON

Mailing Address P.O. BOX 408

City

LONG LAKE

State

MN

Zip Code

55356

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

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

Transaction ID: SA11.1879

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. PATRICK E. LYNCH

Mailing Address 1616 BLACKBERRY CIRCLE

City

SARTELL

State

MN

Zip Code

56377

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.261

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

HARVEY B. MACKAY

Mailing Address 2100 ELM STREET SE

City

MINNEAPOLIS

State

MN

Zip Code

55414

FEC ID number of contributing
federal political committee.

C

Name of Employer
MACKAY, MITCHELL ENVELOPE
COMPANY

Occupation
CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.602

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6500.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MRS. KAREN MAGUIRE

Mailing Address 4605 MEDINA LAKE DRIVE

City

MEDINA

State

MN

Zip Code

55340

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
ARTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.273

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RICHARD N. MAGUIRE

Mailing Address 4605 MEDINA LAKE DRIVE

City

MEDINA

State

MN

Zip Code

55340

FEC ID number of contributing
federal political committee.

C

Name of Employer
TARGET

Occupation
SENIOR VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.288

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ANDREW MAHONEY

Mailing Address 19390 WALDEN TRAIL

City

DEEP HAVEN

State

MN

Zip Code

55391

FEC ID number of contributing
federal political committee.

C

Name of Employer
WILLIS

Occupation
REINSURANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.537

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1500.00

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 99 / 227

(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)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. TIMOTHY A. MANTEL

Mailing Address 100 3RD AVENUE S.
UNIT 3103

City	State	Zip Code
MINNEAPOLIS	MN	55401

FEC ID number of contributing
federal political committee.

C

Name of Employer
TARGET CORPORATIONOccupation
VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.788

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

BRIAN MARK

Mailing Address 1820 BERKSHIRE LANE NORTH

City	State	Zip Code
MINNEAPOLIS	MN	55441

FEC ID number of contributing
federal political committee.

C

Name of Employer
RBC TILE AND STONEOccupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.657

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. PAIGE MARRIOTT

Mailing Address 5056 KILBURN STREET

City	State	Zip Code
ALEXANDRIA	VA	22304

FEC ID number of contributing
federal political committee.

C

Name of Employer
MARRIOTT GROUPOOccupation
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.331

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5750.00

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 100 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

SUSAN I. MARVIN

Mailing Address 600 S 2ND ST APT 403

City

MINNEAPOLIS

State

MN

Zip Code

55401

FEC ID number of contributing
federal political committee.

C

Name of Employer
MARVIN WINDOWS & DOORS

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.600

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. HELEN MATHEWS

Mailing Address 425 8TH STREET NW #833

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing
federal political committee.

C

Name of Employer
MARRIOTT GROUP

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.339

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. RANDALL B. MAYS

Mailing Address 12525 N. LABELLE COURT

City

MEQUON

State

WI

Zip Code

53092

FEC ID number of contributing
federal political committee.

C

Name of Employer
DYNAMIC GRAPE

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.727

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2000.00

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 101 / 227

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MRS. STACY MAYS

Mailing Address 12525 N. LABELLE COURT

City

MEQUON

State

WI

Zip Code

53092

FEC ID number of contributing
federal political committee.

C

Name of Employer
CLEAR CHANNEL

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.752

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. BRIAN J. MCCLUNG

Mailing Address 126 BERNARD STREET E.

City

WEST ST. PAUL

State

MN

Zip Code

55118

FEC ID number of contributing
federal political committee.

C

Name of Employer
STATE OF MINNESOTA

Occupation

COMMUNICATIONS DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.708

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JOHN D. MCCLUNG

Mailing Address 683 ARCADIA DRIVE

City

SAINT PAUL

State

MN

Zip Code

55118

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

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

Transaction ID: SA11.751

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1750.00

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 102 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MRS. PAULA E. MCCLUNG

Mailing Address 683 ARCADIA DRIVE

City

SAINT PAUL

State

MN

Zip Code

55118

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

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

Transaction ID: SA11.721

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ROBERT MCCREA, JR.

Mailing Address 2610 KELLER ROAD

City

LONG LAKE

State

MN

Zip Code

55356

FEC ID number of contributing
federal political committee.

C

Name of Employer
MORGAN STANLEY

Occupation
FINANCIAL ADVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.664

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. MARVIN MCDANIEL

Mailing Address 17950 E. 136TH AVENUE

City

BRIGHTON

State

CO

Zip Code

80601

FEC ID number of contributing
federal political committee.

C

Name of Employer
XCEL ENERGY

Occupation
VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.1733

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

7000.00

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 103 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MRS. ANN D. MCDONALD

Mailing Address 2358 FIELD STONE COURT

City

MENDOTA HEIGHTS

State

MN

Zip Code

55120

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 ▼

2500.00

Date of Receipt

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

Transaction ID: SA11.112

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JOHN J. MCDONALD, JR.

Mailing Address 2358 FIELD STONE COURT

City

MENDOTA HEIGHTS

State

MN

Zip Code

55120

FEC ID number of contributing
federal political committee.

C

Name of Employer
MEAGHER & GEER

Occupation

LAWYER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: SA11.151

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. KEITH MCDONALD

Mailing Address 95 TIMBER ISLAND TRAIL

City

INDEPENDENCE

State

MN

Zip Code

55359

FEC ID number of contributing
federal political committee.

C

Name of Employer
SHINGOBEE BUILDERS

Occupation

OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.1729

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6000.00

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 104 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. DENNIS D. MCGILL

Mailing Address 4281 QUAKER TRAIL NE

City

PRIOR LAKE

State

MN

Zip Code

55372

FEC ID number of contributing
federal political committee.

C

Name of Employer
AMES CONSTRUCTION

Occupation
C.F.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.745

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. BERT J. MCKASY

Mailing Address 5830 S. ROBERT TRAIL

City

INVER GROVE HEIGHT

State

MN

Zip Code

55077

FEC ID number of contributing
federal political committee.

C

Name of Employer
LINDQUIST & VENNUM

Occupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.149

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. CAROLYN MCKASY

Mailing Address 5830 S. ROBERT TRAIL

City

INVER GROVE HEIGHT

State

MN

Zip Code

55077

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 ▼

250.00

Date of Receipt

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

Transaction ID: SA11.150

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5500.00

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 105 / 227

(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)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MRS. MARY MCKOSKEY

Mailing Address 9987 ARCOLA COURT N.

City

STILLWATER

State

MN

Zip Code

55082

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.1501

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

ROBERT G. MCMAHON

Mailing Address 1371 MEDORA ROAD

City

MENDOTA HEIGHTS

State

MN

Zip Code

55118

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.616

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

TERESA MCMAHON

Mailing Address 1371 MEDORA ROAD

City

MENDOTA HEIGHTS

State

MN

Zip Code

55118

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKEROccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.617

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10500.00

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 106 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MRS. ANN MCMILLAN

Mailing Address 707 GOODRICH AVENUE

City

ST. PAUL

State

MN

Zip Code

55105

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 ▼

500.00

Date of Receipt

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

Transaction ID: SA11.575

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DOUGLAS D. MCMILLAN

Mailing Address 707 GOODRICH AVENUE

City

ST. PAUL

State

MN

Zip Code

55105

FEC ID number of contributing
federal political committee.

C

Name of Employer
MCMILLAN ELECTRIC

Occupation

SELF-EMPLOYED BUSINESS OWNER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.593

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ALVIN E. MCQUINN

Mailing Address 1551 GULF SHORE BLVD. S.

City

NAPLES

State

FL

Zip Code

34102

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

INVESTMENTS

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.567

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6000.00

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 107 / 227

(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)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. JONATHAN MEEKS

Mailing Address 220 KATAMA DRIVE

City

EDGARTON

State

MA

Zip Code

02539

FEC ID number of contributing
federal political committee.

C

Name of Employer
T.A. ASSOCIATES

Occupation

PRIVATE INVESTMENTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.2008

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. MARY M. MENTZER

Mailing Address 2126 GLENHURST ROAD

City

SAINT LOUIS PARK

State

MN

Zip Code

55416

FEC ID number of contributing
federal political committee.

C

Name of Employer
MARY MENTZER CREATIVE, L.-
L.C.

Occupation

MANAGING MEMBER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.144

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DANIEL P. MEYER

Mailing Address 2506 DUXBURY PLACE

City

ALEXANDRIA

State

VA

Zip Code

22308

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE DUBERSTEIN GROUP, INC.

Occupation

SENIOR VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: SA11.2394

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

12500.00

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
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. THOMAS A. MICHELETTI

Mailing Address 519 FERNDAL ROAD N.

City

WAYZATA

State

MN

Zip Code

53391

FEC ID number of contributing
federal political committee.

C

Name of Employer
EXCELSIOR ENERGY, INC.

Occupation
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.283

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. MARGUERITE MIELKE

Mailing Address 15290 113TH STREET N.

City

STILLWATER

State

MN

Zip Code

55082

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 ▼

250.00

Date of Receipt

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

Transaction ID: SA11.2460

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. LOWELL MILKEN

Mailing Address 1250 FOURTH STREET

City

SANTA MONICA

State

CA

Zip Code

90401

FEC ID number of contributing
federal political committee.

C

Name of Employer
KNOWLEDGE UNIVERSE LTD.

Occupation
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.719

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6250.00

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 109 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MRS. ANNETTE L. MILLER

Mailing Address 10159 PHAETON DRIVE

City

EDEN PRAIRIE

State

MN

Zip Code

55347

FEC ID number of contributing
federal political committee.

C

Name of Employer

TARGET SOURCING SERVICES

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.844

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. ELLEN V. MILLER

Mailing Address 23088 COUNTY ROAD 17

City

WINONA

State

MN

Zip Code

55987

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 ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.763

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. HUGH L. MILLER

Mailing Address 23088 COUNTY ROAD 17

City

WINONA

State

MN

Zip Code

55987

FEC ID number of contributing
federal political committee.

C

Name of Employer

R.T.P. COMPANY

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.798

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2250.00

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 110 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. JAMES RAYMOND MILLER

Mailing Address 2435 JEWEL LANE

City

PLYMOUTH

State

MN

Zip Code

55447

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.284

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. PATRICIA MILLER

Mailing Address 2435 JEWEL LANE

City

PLYMOUTH

State

MN

Zip Code

55447

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 ▼

500.00

Date of Receipt

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

Transaction ID: SA11.254

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. WILLIAM L. MILLER

Mailing Address 10159 PHAETON DRIVE

City

EDEN PRAIRIE

State

MN

Zip Code

55347

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.839

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1250.00

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 111 / 227

(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)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. JOHN MILNE

Mailing Address 409 G STREET SE

City

WASHINGTON

State

DC

Zip Code

20003-4257

FEC ID number of contributing
federal political committee.

C

Name of Employer
MCAPITOLMANAGEMENTOccupation
LOBBYIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1955.35

Date of Receipt

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

Transaction ID: SA11.3019

Amount of Each Receipt this Period

1955.35

CONTRIBUTION

IN-KIND: CATERING

B.

Full Name (Last, First, Middle Initial)

MR. LOREN L. MONROE

Mailing Address 1733 FAIRVIEW AVENUE

City

MC LEAN

State

VA

Zip Code

22101

FEC ID number of contributing
federal political committee.

C

Name of Employer
BARBOUR GRIFFITH ROGERSOccupation
PRINCIPAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.337

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. RICHARD G. MORGAN

Mailing Address 7323 HAMES WAY

City

EDEN PRAIRIE

State

MN

Zip Code

55346

FEC ID number of contributing
federal political committee.

C

Name of Employer
BOWMAN AND BROOKEOccupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: SA11.559

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

4455.35

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 112 / 227

(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)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. JOHN M. MORRISON

Mailing Address 3093 FT. CHARLES DRIVE

City

NAPLES

State

FL

Zip Code

34102

FEC ID number of contributing
federal political committee.

C

Name of Employer
CENTRAL BANK GROUPOccupation
BANKING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.849

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. EMMA CHRISTINA MUEDEKING

Mailing Address 122 7TH STREET SE

City

WASHINGTON

State

DC

Zip Code

20003

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKEROccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.203

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. PATRICK MULLARKEY

Mailing Address 17543 BEARPATH TRAIL

City

EDEN PRAIRIE

State

MN

Zip Code

55347

FEC ID number of contributing
federal political committee.

C

Name of Employer
TARGET CORPORATIONOccupation
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.1737

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5750.00

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 113 / 227

(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)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. KENNETH R. MURRAY

Mailing Address 8665 BAY COLONY DRIVE #403

City

NAPLES

State

FL

Zip Code

34108

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.2121

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. MARY MURRAY

Mailing Address 11520 51ST AVENUE N.

City

PLYMOUTH

State

MN

Zip Code

55442

FEC ID number of contributing
federal political committee.

C

Name of Employer
M&I BANKOccupation
PRIVATE BROKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.772

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

PHILIP MUSSER

Mailing Address 315 KENTUCKY AVENUE

City

ALEXANDRIA

State

VA

Zip Code

22305

FEC ID number of contributing
federal political committee.

C

Name of Employer
NEW FRONTIER STRATEGYOccupation
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.478

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5750.00

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 114 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. STEVEN M. NAPOLITANO

Mailing Address ONE BERKSHIRE ROAD

City

ROCKVILLE CENTRE

State

NY

Zip Code

11570

FEC ID number of contributing
federal political committee.

C

Name of Employer
FIRST AMERICAN TITLE INSU-
RANCE COMPANY

Occupation

PRESIDENT, CHAIRMAN & C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

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

Transaction ID: SA11.88

Amount of Each Receipt this Period

750.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JOHN NASSEFF

Mailing Address 59 4TH STREET W.

City

SAINT PAUL

State

MN

Zip Code

55102

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 ▼

2000.00

Date of Receipt

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

Transaction ID: SA11.2170

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. CURTIS NELSON

Mailing Address 1555 LINN ROAD

City

WAYZATA

State

MN

Zip Code

55391

FEC ID number of contributing
federal political committee.

C

Name of Employer
CURTIS CO.'S ONE

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.1748

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

7750.00

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 115 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MRS. DIANE NELSON

Mailing Address 4170 EMPIRE LANE N.

City

PLYMOUTH

State

MN

Zip Code

55446

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 ▼

250.00

Date of Receipt

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

Transaction ID: SA11.773

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. GLEN NELSON

Mailing Address 301 CARLSON PARKWAY
SUITE 275

City

MINNETONKA

State

MN

Zip Code

55305

FEC ID number of contributing
federal political committee.

C

Name of Employer
GDN HOLDINGS, INC.

Occupation

INVESTMENTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.258

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. KEITH NELSON

Mailing Address 2397 GRAYSTONE DR

City

KINGMAN

State

AZ

Zip Code

86409

FEC ID number of contributing
federal political committee.

C

Name of Employer
KINGMAN TRANSPORTATION CO.

Occupation

CAB COMPANY OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.1326

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5750.00

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 116 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)
MRS. MARILYN CARLSON NELSON

Mailing Address 301 CARLSON PARKWAY
SUITE 275

City State Zip Code
MINNETONKA MN 55305

FEC ID number of contributing
federal political committee.

C

Name of Employer
CARLSON COMPANIES

Occupation
C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.285

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. SCOTT A. NELSON

Mailing Address 4170 EMPIRE LANE N.

City State Zip Code
PLYMOUTH MN 55446

FEC ID number of contributing
federal political committee.

C

Name of Employer
TARGET

Occupation
S.V.P. REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.797

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. STEVE NEWMAN

Mailing Address 200 SOUTH SIXTH STREET
SUITE 650

City State Zip Code
MINNEAPOLIS MN 55402

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.816

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5750.00

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 117 / 227

(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)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. FORD J. NICHOLSON

Mailing Address 54 PENINSULA ROAD

City

DELLWOOD

State

MN

Zip Code

55110

FEC ID number of contributing
federal political committee.

C

Name of Employer
PAN, INC.

Occupation

PRIVATE INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: SA11.577

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. TODD S. NICHOLSON

Mailing Address 76 DELLWOOD AVENUE

City

DELLWOOD

State

MN

Zip Code

55110

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

PRIVATE INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.521

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JEFF NODDLE

Mailing Address 4833 Highbury Lane

City

MINNETONKA

State

MN

Zip Code

55345

FEC ID number of contributing
federal political committee.

C

Name of Employer
SUPERVALU

Occupation

CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.767

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

4000.00

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 118 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

JENNIFER NORD MALLARD

Mailing Address 1723 BRIAR RIDGE ROAD

City

MCLEAN

State

VA

Zip Code

22101

FEC ID number of contributing
federal political committee.

C

Name of Employer
AMERICAN HOSPITAL ASSOCIA-
TION

Occupation

FEDERAL RELATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.461

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. EUGENE NUGENT

Mailing Address 8960 BAY COLONY DRIVE

City

NAPLES

State

FL

Zip Code

34108

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

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

Transaction ID: SA11.1343

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

SHANNON O'KEEFE

Mailing Address 1008 CONSTITUTION AVENUE NE

City

WASHINGTON

State

DC

Zip Code

20002

FEC ID number of contributing
federal political committee.

C

Name of Employer
MCBEE STRATEGIC

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.221

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1000.00

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 119 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MRS. SHIRLEY OBERTON

Mailing Address 121 JAY BEE DRIVE

City

WINONA

State

MN

Zip Code

55987

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation

VOLUNTEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.675

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. WILL OBERTON

Mailing Address 121 JAY BEE DRIVE

City

WINONA

State

MN

Zip Code

55987

FEC ID number of contributing
federal political committee.

C

Name of Employer
FASTENAL COMPANY

Occupation

MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.663

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DR. DOUGLAS J. OLSON

Mailing Address 2601 W. LAFAYETTE ROAD

City

ORONO

State

MN

Zip Code

55331

FEC ID number of contributing
federal political committee.

C

Name of Employer
FAIRVIEW HOSPITAL

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.582

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

7000.00

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 120 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. CRAIG P. OMTVEDT

Mailing Address 730 N. MAYFLOWER ROAD

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
FORTUNE BRANDS

Occupation
C.F.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.2035

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

BEVERLY J. OREN

Mailing Address 3105 SANDY HOOK DRIVE

City

ROSEVILLE

State

MN

Zip Code

55113

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 ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.606

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DONALD G. OREN

Mailing Address 3105 SANDY HOOK DRIVE

City

ROSEVILLE

State

MN

Zip Code

55113

FEC ID number of contributing
federal political committee.

C

Name of Employer
DART TRANSIT COMPANY

Occupation
TRUCKING EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.605

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

15000.00

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 121 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

ROSITA M. OWENS

Mailing Address 1070 FERNDAL ROAD W

City

WAYZATA

State

MN

Zip Code

55391

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 ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.597

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

TIMOTHY P. OWENS

Mailing Address 1070 FERNDAL ROAD W

City

WAYZATA

State

MN

Zip Code

55391

FEC ID number of contributing
federal political committee.

C

Name of Employer
VOYAGER FINANCIAL SERVICES
CORP

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.596

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

CYNTHIA M. PAGE

Mailing Address 512 HARRINGTON ROAD

City

WAYZATA

State

MN

Zip Code

55391

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 ▼

2500.00

Date of Receipt

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

Transaction ID: SA11.615

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

12500.00

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 122 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

GREGORY R. PAGE

Mailing Address 512 HARRINGTON ROAD

City

WAYZATA

State

MN

Zip Code

55391

FEC ID number of contributing
federal political committee.

C

Name of Employer
CARGILL

Occupation
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: SA11.614

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JERRY PAPENFUSS

Mailing Address 276 PLEASANT HILL DRIVE

City

WINONA

State

MN

Zip Code

55987

FEC ID number of contributing
federal political committee.

C

Name of Employer
K.A.G.E. INC.

Occupation
RADIO STATION OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.164

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. PAT PAPENFUSS

Mailing Address 276 PLEASANT HILL DRIVE

City

WINONA

State

MN

Zip Code

55987

FEC ID number of contributing
federal political committee.

C

Name of Employer
K.A.G.E., INC.

Occupation
OPERATIONS MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.148

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

12500.00

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
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. ANDREW D. PARKER

Mailing Address 300 FIRST AVENUE N.
SUITE 200

City State Zip Code
MINNEAPOLIS MN 55401

FEC ID number of contributing
federal political committee.

C

Name of Employer
PARKER ROSEN L.L.C.

Occupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5100.00

Date of Receipt

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

Transaction ID: SA11.2124

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

REATTRIBUTION REQUESTED

B.

Full Name (Last, First, Middle Initial)

MR. ANDREW D. PARKER

Mailing Address 300 FIRST AVENUE N.
SUITE 200

City State Zip Code
MINNEAPOLIS MN 55401

FEC ID number of contributing
federal political committee.

C

Name of Employer
PARKER ROSEN L.L.C.

Occupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5100.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 9

Transaction ID: SA11.3016

Amount of Each Receipt this Period

100.00

CONTRIBUTION

IN-KIND: ROOM CHARGE

C.

Full Name (Last, First, Middle Initial)

MR. JAMES N. PERRY, JR.

Mailing Address 2465 N. BURLING

City State Zip Code
CHICAGO IL 60614

FEC ID number of contributing
federal political committee.

C

Name of Employer
MADISON DEARBORN PARTNERS

Occupation
PRIVATE EQUITY INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.2029

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6100.00

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
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. GREGG PETERSON

Mailing Address 250 PEAVEY LANE

City

WAYZATA

State

MN

Zip Code

55391

FEC ID number of contributing
federal political committee.

C

Name of Employer
NASCENT CAPITAL, INC.

Occupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.819

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. GREGORY L. PETERS

Mailing Address 7410 BUSH LAKE DRIVE

City

BLOOMINGTON

State

MN

Zip Code

55438

FEC ID number of contributing
federal political committee.

C

Name of Employer
SEATON, BECK & PETERS, PA

Occupation
PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.732

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. CHRISTOPHER POLICINSKI

Mailing Address 450 OLD LONG LAKE ROAD

City

WAYZATA

State

MN

Zip Code

55391

FEC ID number of contributing
federal political committee.

C

Name of Employer
LAND O. LAKES

Occupation
C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.706

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

3000.00

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 125 / 227

(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)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MRS. TERIE E. POPP

Mailing Address 620 MENDELSSOHN AVENUE N.

City

GOLDEN VALLEY

State

MN

Zip Code

55427

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.128

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. WILLIAM JOSEPH POPP

Mailing Address 620 MENDELSSOHN AVENUE N.

City

GOLDEN VALLEY

State

MN

Zip Code

55427

FEC ID number of contributing
federal political committee.

C

Name of Employer
POPP.COMOccupation
TELECOM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.155

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. KENDALL POWELL

Mailing Address 1625 BRIDGEWATER ROAD

City

MINNEAPOLIS

State

MN

Zip Code

55422

FEC ID number of contributing
federal political committee.

C

Name of Employer
GENERAL MILLSOccupation
C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.696

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

15000.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

GERARD L. PRERADOVIC

Mailing Address 8320 174TH AVENUE NW

City

RAMSEY

State

MN

Zip Code

55303

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 ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.607

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

JO ELLEN PRERADOVIC

Mailing Address 8320 174TH AVENUE NW

City

RAMSEY

State

MN

Zip Code

55303

FEC ID number of contributing
federal political committee.

C

Name of Employer
MIM

Occupation
EXECUTIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.608

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DAVID T. PRITIKIN

Mailing Address 505 MADISON AVENUE

City

GLENCOE

State

IL

Zip Code

60022

FEC ID number of contributing
federal political committee.

C

Name of Employer
SIDLEY AUSTIN L.L.P.

Occupation
LAWYER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.2005

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

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

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. GREGORY J. PULLES

Mailing Address 4625 XENE LANE N.

City

PLYMOUTH

State

MN

Zip Code

55446

FEC ID number of contributing
federal political committee.

C

Name of Employer
T.C.F. BANK

Occupation

COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.555

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

SEE REATTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. GREGORY J. PULLES

Mailing Address 4625 XENE LANE N.

City

PLYMOUTH

State

MN

Zip Code

55446

FEC ID number of contributing
federal political committee.

C

Name of Employer
T.C.F. BANK

Occupation

COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.555B

Amount of Each Receipt this Period

-5000.00

CONTRIBUTION

[MEMO ITEM]
REATTRIBUTION TO SPOUSE

C.

Full Name (Last, First, Middle Initial)

MRS. MICHELLE S. PULLES

Mailing Address 4625 XENE LANE N.

City

PLYMOUTH

State

MN

Zip Code

55446

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 ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.556

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

[MEMO ITEM]
REATTRIBUTION FROM SPOUSE

SUBTOTAL of Receipts This Page (optional)

10000.00

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 128 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. ROBERT J. RANDALL

Mailing Address 210 WELLINGTON CIRCLE

City

STATESBORO

State

GA

Zip Code

30458

FEC ID number of contributing
federal political committee.

C

Name of Employer
VIRACON

Occupation

VICE PRESIDENT BUSINESS DEVELOPMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.266

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. GERALD A. RAUENHORST

Mailing Address 274 LITTLE HARBOUR LANE

City

NAPLES

State

FL

Zip Code

34102

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 ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.843

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. HENRIETTA V. RAUENHORST

Mailing Address 274 LITTLE HARBOUR LANE

City

NAPLES

State

FL

Zip Code

34102

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 ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.832

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10250.00

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 129 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MRS. KAREN M. RAUENHORST

Mailing Address 10350 BREN ROAD WEST

City

MINNETONKA

State

MN

Zip Code

55343

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 ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.683

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. MARK H. RAUENHORST

Mailing Address 10350 BREN ROAD WEST

City

MINNETONKA

State

MN

Zip Code

55343

FEC ID number of contributing
federal political committee.

C

Name of Employer
TARRIANCE, L.L.C.

Occupation

BUSINESS EXECUTIVE

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.684

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. PAUL REARDON

Mailing Address 71 CLEVELAND LANE

City

PRINCETON

State

NJ

Zip Code

08540

FEC ID number of contributing
federal political committee.

C

Name of Employer
MORGAN STANLEY

Occupation

WEALTH MANAGEMENT

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.2013

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

15000.00

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
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. MICHAEL L. REGER

Mailing Address 3565 FREDERICK AVENUE

City

WAYZATA

State

MN

Zip Code

55391

FEC ID number of contributing
federal political committee.

C

Name of Employer
NORTHERN OIL & GAS, INC.

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.715

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DAVID K. REHR

Mailing Address 2750 N. QUEBEC STREET

City

ARLINGTON

State

VA

Zip Code

22207

FEC ID number of contributing
federal political committee.

C

Name of Employer
LEADING AUTHORITIES

Occupation
SENIOR ADVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

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

Transaction ID: SA11.104

Amount of Each Receipt this Period

3000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. WILLIAM REILING

Mailing Address 2116 S. STREET DENNIS ROAD

City

ST. PAUL

State

MN

Zip Code

55116

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 ▼

2000.00

Date of Receipt

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

Transaction ID: SA11.1711

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10000.00

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 131 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. JAY PAUL REINHARDT

Mailing Address 1511 PINETREE TRAIL

City

EAGAN

State

MN

Zip Code

55122

FEC ID number of contributing
federal political committee.

C

Name of Employer
FLINT HILLS RESOURCES

Occupation

DIRECTOR OF OPERATIONS

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.292

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. KARLA REINHARDT

Mailing Address 1511 PINETREE TRAIL

City

EAGAN

State

MN

Zip Code

55122

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 ▼

500.00

Date of Receipt

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

Transaction ID: SA11.282

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. THOMAS R. REVNEW

Mailing Address 9056 CAMBRIDGE ROAD

City

WOODBURY

State

MN

Zip Code

55125

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

ATTORNEY

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.1731

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2000.00

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 132 / 227

(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)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. DANIEL P. RICE

Mailing Address 11152 14TH STREET N.

City

LAKE ELMO

State

MN

Zip Code

55042

FEC ID number of contributing
federal political committee.

C

Name of Employer
STRATEGIC FUNDRAISING

Occupation

C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.709

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

SEE REATTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. CHRISTINE RICE

Mailing Address 11152 14TH STREET N.

City

LAKE ELMO

State

MN

Zip Code

55042

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 ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.710

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

[MEMO ITEM]
REATTRIBUTION FROM SPOUSE**C.**

Full Name (Last, First, Middle Initial)

MR. DANIEL P. RICE

Mailing Address 11152 14TH STREET N.

City

LAKE ELMO

State

MN

Zip Code

55042

FEC ID number of contributing
federal political committee.

C

Name of Employer
STRATEGIC FUNDRAISING

Occupation

C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.709B

Amount of Each Receipt this Period

-5000.00

CONTRIBUTION

[MEMO ITEM]
REATTRIBUTION TO SPOUSE

SUBTOTAL of Receipts This Page (optional)

10000.00

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
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MRS. JILL RILEY

Mailing Address 1403 MEDORA ROAD

City

MENDOTA HEIGHTS

State

MN

Zip Code

55118

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.545

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JONATHAN RILEY

Mailing Address 1403 MEDORA ROAD

City

MENDOTA HEIGHTS

State

MN

Zip Code

55118

FEC ID number of contributing
federal political committee.

C

Name of Employer
CONDOR CORPORATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

REAL ESTATE MANAGEMENT

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.587

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. STEVEN W. RILEY

Mailing Address 22935 MISSIONARY POINT DRIVE

City

CABLE

State

WI

Zip Code

54821

FEC ID number of contributing
federal political committee.

C

Name of Employer
TRIPLE CROWN NUTRITION IN-
C.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

OWNER

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.1217

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2250.00

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

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(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)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

JEANNINE M. RIVET

Mailing Address 4305 TRILLIUM WAY

City

MINNETRISTA

State

MN

Zip Code

55364

FEC ID number of contributing
federal political committee.

C

Name of Employer
UNITED HEALTH GROUP

Occupation

EXECUTIVE VICE-PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.601

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

SEE REATTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. WARREN G. HERRIED, II

Mailing Address 4305 TRILLIUM WAY

City

MINNETRISTA

State

MN

Zip Code

55364-7708

FEC ID number of contributing
federal political committee.

C

Name of Employer
KAHR & ASSOCIATES

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.627

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

[MEMO ITEM]
REATTRIBUTION FROM SPOUSE**C.**

Full Name (Last, First, Middle Initial)

JEANNINE M. RIVET

Mailing Address 4305 TRILLIUM WAY

City

MINNETRISTA

State

MN

Zip Code

55364

FEC ID number of contributing
federal political committee.

C

Name of Employer
UNITED HEALTH GROUP

Occupation

EXECUTIVE VICE-PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.601B

Amount of Each Receipt this Period

-5000.00

CONTRIBUTION

[MEMO ITEM]
REATTRIBUTION TO SPOUSE

SUBTOTAL of Receipts This Page (optional)

10000.00

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 135 / 227

(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)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MRS. NANCY ROETS

Mailing Address 2701 S. BASIN CREEK AVENUE

City

MERIDAN

State

ID

Zip Code

83642

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.3021

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. TIMOTHY J. ROONEY

Mailing Address 5013 CAROLINE AVENUE

City

WESTERN SPRINGS

State

IL

Zip Code

60558

FEC ID number of contributing
federal political committee.

C

Name of Employer
WINSTON & SALEMOccupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.2031

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JOHN CLEMENS RYAN

Mailing Address 111 E. CHESTNUT

City

CHICAGO

State

IL

Zip Code

60611

FEC ID number of contributing
federal political committee.

C

Name of Employer
22 CENTURY MEDIAOccupation
PRESIDENT & C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.2612

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10500.00

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
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. PATRICK G. RYAN

Mailing Address 105 CLAY CLIFFE DRIVE

City

TONKA BAY

State

MN

Zip Code

55331

FEC ID number of contributing
federal political committee.

C

Name of Employer
RYAN COMPANIES

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.255

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. LAWRENCE J. RYBKA

Mailing Address 130 SPRINGSIDE DRIVE #300

City

AKRON

State

OH

Zip Code

44333

FEC ID number of contributing
federal political committee.

C

Name of Employer
VALMARK SECURITIES

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.1739

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ROBERT SALIBA

Mailing Address 311 S. WACKER DRIVE
SUITE 4700

City

CHICAGO

State

IL

Zip Code

60606

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.2062

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

11000.00

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 137 / 227

(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)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MRS. KAREN O. SANGER

Mailing Address 16588 GRAYS BAY BLVD.

City

WAYZATA

State

MN

Zip Code

55391

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.554

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. STEPHEN W. SANGER

Mailing Address 16588 GRAYS BAY LVD.

City

WAYZATA

State

MN

Zip Code

55391

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.589

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JAMES SANKOVITZ

Mailing Address 1242 ADRIAN DRIVE

City

CHASKA

State

MN

Zip Code

55318

FEC ID number of contributing
federal political committee.

C

Name of Employer
BRIGGS & MORGANOccupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.741

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

15000.00

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 138 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. DAVID R. SAWYER

Mailing Address 209 E. LAKE SHORE DRIVE

City

CHICAGO

State

IL

Zip Code

60603

FEC ID number of contributing
federal political committee.

C

Name of Employer
SIDLEY AUSTIN, L.L.P.

Occupation
LAWYER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.2044

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. MILTON J. SCHACHTER

Mailing Address 23313 TIMBERLANE DRIVE

City

BEACHWOOD

State

OH

Zip Code

44122

FEC ID number of contributing
federal political committee.

C

Name of Employer
SUMMIT ORTHOPEDICS

Occupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.697

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. MARK D. SCHARMER

Mailing Address 17683 KINGSWOOD CIRCLE

City

LAKEVILLE

State

MN

Zip Code

55044

FEC ID number of contributing
federal political committee.

C

Name of Employer
FEDERATED INSURANCE

Occupation
INSURANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.161

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

11000.00

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 139 / 227

(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)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MRS. MARGARET E. SCHARMER

Mailing Address 17683 KINGSWOOD CIRCLE

City

LAKEVILLE

State

MN

Zip Code

55044

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 ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.140

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. MARK SCHINDELE

Mailing Address 17303 WEAVER LAKE DRIVE

City

MAPLE GROVE

State

MN

Zip Code

55311

FEC ID number of contributing
federal political committee.

C

Name of Employer
TARGET CORPORATION

Occupation

MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.280

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. HARRY R. SCHLEETER

Mailing Address 1585 MEDINA ROAD

City

LONG LAKE

State

MN

Zip Code

55356

FEC ID number of contributing
federal political committee.

C

Name of Employer
BROADWAY EQUIPMENT

Occupation

SALESPERSON

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.1282

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6500.00

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 140 / 227

(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)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MS. DIANE SCHMIDT

Mailing Address 720 ARCWOOD ROAD

City

MANTOMEDI

State

MN

Zip Code

55115

FEC ID number of contributing
federal political committee.

C

Name of Employer

KOCH COMPANIES PUBLIC SEC-
TOR

Occupation

VICE PRESIDENT

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.564

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. PAUL SCHORR

Mailing Address P.O. BOX-57310

City

LINCOLN

State

NE

Zip Code

68505

FEC ID number of contributing
federal political committee.

C

Name of Employer

COMCOR HOLDING INC

Occupation

CEO

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.429

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ROBERT A. SCHROEDER

Mailing Address 1707 SUMMIT AVENUE

City

MINNEAPOLIS

State

MN

Zip Code

55403

FEC ID number of contributing
federal political committee.

C

Name of Employer

STATE OF MINNESOTA

Occupation

ADMINISTRATOR

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.246

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6250.00

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 141 / 227

(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)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. DENNIS W. SCHULSTAD

Mailing Address 6303 ROSE COURT

City

EDINA

State

MN

Zip Code

55424

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.692

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. JANET JAYNE SCHULTZ

Mailing Address 865 NAVAJO ROAD W.

City

MEDINA

State

MN

Zip Code

55340

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKEROccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.594

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. MAUREEN SCHULZE

Mailing Address 8500 NORMANDALE LAKE BLVD.
SUITE 1750

City

MINNEAPOLIS

State

MN

Zip Code

55437

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.1717

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10500.00

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 142 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. RICHARD M. SCHULZE

Mailing Address 8500 NORMANDALE LAKE BLVD.
SUITE 1750

City State Zip Code
MINNEAPOLIS MN 55437

FEC ID number of contributing
federal political committee.

C

Name of Employer
BEST BUY

Occupation
FOUNDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.1719

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RONALD SCHULTZ

Mailing Address 865 NAVAJO ROAD W.

City State Zip Code
MEDINA MN 55340

FEC ID number of contributing
federal political committee.

C

Name of Employer
ROBINS, KAPLAN, MILLER &
CIRESI

Occupation
LAWYER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.576

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DOUGLAS A. SCOVANNER

Mailing Address 160 SPUR CIRCLE

City State Zip Code
WAYZATA MN 55391

FEC ID number of contributing
federal political committee.

C

Name of Employer
TARGET CORPORATION

Occupation
CHIEF FINANCIAL OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.1966

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

11000.00

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 143 / 227

(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)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. DAVID S. SCOVIL

Mailing Address 1120 BENT TREE HILLS DRIVE

City

NEW BRIGHTON

State

MN

Zip Code

55112

FEC ID number of contributing
federal political committee.

C

Name of Employer
SMURFIT STONE CONTAINER
CORPORATION

Occupation

SALES REP.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.736

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. L. ANN SCOVIL

Mailing Address 1120 BENT TREE HILLS DRIVE

City

NEW BRIGHTON

State

MN

Zip Code

55112

FEC ID number of contributing
federal political committee.

C

Name of Employer
TARGET CORPORATION

Occupation

VICE PRESIDENT, FINANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.754

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. BEVERLY SCULLY

Mailing Address 1901 N. 4TH STREET

City

STILLWATER

State

MN

Zip Code

55082

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.777

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1000.00

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 144 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. TERRENCE J. SCULLY

Mailing Address 1901 N. 4TH STREET

City

STILLWATER

State

MN

Zip Code

55082

FEC ID number of contributing
federal political committee.

C

Name of Employer
TARGET CORPORATION

Occupation

FINANCIAL SERVICES

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.801

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. GEORGE SEAGRAVES

Mailing Address 9801 211TH STREET W

City

LAKEVILLE

State

MN

Zip Code

55044

FEC ID number of contributing
federal political committee.

C

Name of Employer
D.R. HORTON, INC.

Occupation

HOMEBUILDER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.1314

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

ROBERT L. SENKLER

Mailing Address 2531 MANITOU ISLAND

City

WHITE BEAR LAKE

State

MN

Zip Code

55110

FEC ID number of contributing
federal political committee.

C

Name of Employer
SECURIAN FINANCIAL GROUP

Occupation

C.E.O.

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.598

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

SEE REATTRIBUTION

SUBTOTAL of Receipts This Page (optional)

11500.00

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MRS. PAMELA W. SENKLER

Mailing Address 2531 MANITOU ISLAND

City

WHITE BEAR LAKE

State

MN

Zip Code

55110-3901

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 ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.623

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

[MEMO ITEM]

REATTRIBUTION FROM SPOUSE

B.

Full Name (Last, First, Middle Initial)

ROBERT L. SENKLER

Mailing Address 2531 MANITOU ISLAND

City

WHITE BEAR LAKE

State

MN

Zip Code

55110

FEC ID number of contributing
federal political committee.

C

Name of Employer
SECURIAN FINANCIAL GROUP

Occupation

C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.598B

Amount of Each Receipt this Period

-5000.00

CONTRIBUTION

[MEMO ITEM]

REATTRIBUTION TO SPOUSE

C.

Full Name (Last, First, Middle Initial)

MR. TOM O. SEVERSON

Mailing Address 2026 CHERYL COURT

City

WINONA

State

MN

Zip Code

55987

FEC ID number of contributing
federal political committee.

C

Name of Employer
SEVERSON OIL COMPANY

Occupation

OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.146

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1000.00

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 146 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. CRAIG H. SHAVER

Mailing Address 20390 CARSON ROAD

City

DEEPHAVEN

State

MN

Zip Code

55331

FEC ID number of contributing
federal political committee.

C

Name of Employer

R.B.C. WEALTH MANAGEMENT

Occupation

INVESTMENT ADVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.578

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. MAUREEN H. SHAVER

Mailing Address 20390 CARSON ROAD

City

DEEPHAVEN

State

MN

Zip Code

55331

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

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

Transaction ID: SA11.580

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. WILLIAM G. SHEPHERD

Mailing Address 3501 ARMSTRONG DRIVE

City

BLOOMINGTON

State

IL

Zip Code

61704

FEC ID number of contributing
federal political committee.

C

Name of Employer

STATE FARM

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.2037

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

3000.00

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 147 / 227

(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)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. MICHAEL R. SIME

Mailing Address 1592 MEDINA ROAD

City

LONG LAKE

State

MN

Zip Code

55356

FEC ID number of contributing
federal political committee.

C

Name of Employer
RAPID PACKAGING

Occupation

BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.835

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. NORMAN SKALICKY

Mailing Address 4191 2ND STREET S.

City

SAINT CLOUD

State

MN

Zip Code

56301

FEC ID number of contributing
federal political committee.

C

Name of Employer
STEARNS BANK, N.A.

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.1328

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. SAMUEL K. SKINNER

Mailing Address 11 INDIAN HILL ROAD

City

WINNETKA

State

IL

Zip Code

60093

FEC ID number of contributing
federal political committee.

C

Name of Employer
GREENBERG TRAUIG, L.L.P.

Occupation

OFFICIAL COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.2025

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

3000.00

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 148 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. THOMAS D. SKINNER

Mailing Address P.O. BOX 15071

City

WINSTON-SALEM

State

NC

Zip Code

27113

FEC ID number of contributing
federal political committee.

C

Name of Employer
PHOENIX PACKAGING INC.

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.126

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. EMILY SKOR

Mailing Address 2113 12TH STREET NW

City

WASHINGTON

State

DC

Zip Code

20009

FEC ID number of contributing
federal political committee.

C

Name of Employer
DEZENHALL RESOURCES

Occupation
SENIOR VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.332

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. EDWARD B. SMITH

Mailing Address 825 RIDGE STREET

City

ST. PAUL

State

MN

Zip Code

55116

FEC ID number of contributing
federal political committee.

C

Name of Employer
INTEGRATED EQUITY MANAGEM-
ENT, INC.

Occupation
FINANCIAL PLANNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: SA11.1728

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

3500.00

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 149 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. MARSHALL SMITH

Mailing Address 435 PORTLAND AVENUE

City

ST. PAUL

State

MN

Zip Code

55102

FEC ID number of contributing
federal political committee.

C

Name of Employer
3M COMPANY

Occupation
LAWYER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.1745

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JIM SODERBERG

Mailing Address 35 INTERLACHEN PLACE

City

TONKA BAY

State

MN

Zip Code

55331

FEC ID number of contributing
federal political committee.

C

Name of Employer
SODERBERG APARTMENT SPECI-
ALIST

Occupation
APARTMENTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.661

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. CARMEN SPENCE

Mailing Address 5703 27TH STREET N.

City

ARLINGTON

State

VA

Zip Code

22207

FEC ID number of contributing
federal political committee.

C

Name of Employer
MILLER SPENCE GROUP L.L.C.

Occupation
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.513

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2500.00

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 150 / 227

(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)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. DANIEL J. SPIEGEL

Mailing Address P.O. BOX 398078

City

EDINA

State

MN

Zip Code

55439

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

ATTORNEY

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.1311

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. DENISE E. STEINHAFEL

Mailing Address P.O. BOX 67

City

CRYSTAL BAY

State

MN

Zip Code

55323

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 ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.712

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. GREGG W. STEINHAFEL

Mailing Address P.O. BOX 67

City

CRYSTAL BAY

State

MN

Zip Code

55323

FEC ID number of contributing
federal political committee.

C

Name of Employer
TARGET

Occupation

C.E.O.

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.711

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

15000.00

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 151 / 227

(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)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. ADAM STOLL

Mailing Address 142 COVE ROAD

City

OYSTER BAY

State

NY

Zip Code

11771

FEC ID number of contributing
federal political committee.

C

Name of Employer
TARGET ENTERPRISES

Occupation

ADVERTISING EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.338

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ENGINE STORMS

Mailing Address 9178 BRECKENRIDGE LANE

City

EDEN PRAIRIE

State

MN

Zip Code

55347

FEC ID number of contributing
federal political committee.

C

Name of Employer
NORTHWESTERN MUTUAL LIFE

Occupation

PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.739

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. TODD R. STRIKER

Mailing Address 4701 WEDGEWOOD DRIVE

City

MINNETONKA

State

MN

Zip Code

55345

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 ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.717

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6500.00

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 152 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MRS. CECILIA M. STROIK

Mailing Address 918 ST. ANDREWS PLACE

City

OWATONNA

State

MN

Zip Code

55060

FEC ID number of contributing
federal political committee.

C

Name of Employer
MACY'S

Occupation

SALES ASSOCIATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.142

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. GREGORY J. STROIK

Mailing Address 918 ST. ANDREWS PLACE

City

OWATONNA

State

MN

Zip Code

55060

FEC ID number of contributing
federal political committee.

C

Name of Employer
FEDERATED MUTUAL INSURANCE

Occupation

CHIEF FINANCIAL OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.162

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. FLETCHER W. STRONG

Mailing Address 75-25 153RD STREET
APARTMENT 805

City

FLUSHING

State

NY

Zip Code

11367

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation

STUDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.2048

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

15000.00

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 153 / 227

(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)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MS. MEREDITH J.G. STRONG

Mailing Address 904 N. GREEN BAY ROAD

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
F.T.I. CONSULTING

Occupation

CONSULTING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.2047

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RYAN JAMES STRONG

Mailing Address 1456 JONES STREET
APARTMENT 25

City

SAN FRANCISCO

State

CA

Zip Code

94109

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

LAWYER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.2061

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. SANDRA J. STRONG

Mailing Address 904 NORTH GREEN BAY ROAD

City

LAKE FOREST

State

IL

Zip Code

60045

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 ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.2009

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

15000.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. WILLIAM H. STRONG

Mailing Address 904 NORTH GREEN BAY ROAD

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
MORGAN STANLEY

Occupation

INVESTMENT BANKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.2010

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ALEXANDER D. STUART

Mailing Address 506 N. WASHINGTON ROAD

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
NORTH STAR INVESTMENTS

Occupation

INVESTMENT MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.2060

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ALEXANDER SUTTON

Mailing Address 1400 IRVING STREET NW #302

City

WASHINGTON

State

DC

Zip Code

20010

FEC ID number of contributing
federal political committee.

C

Name of Employer
INTERNATIONAL REPUBLICAN
INSTITUTE

Occupation

NON-PROFIT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.510

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10500.00

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 155 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MS. MARYELLEN SWEENEY

Mailing Address 25 WEST 68TH ST.

City

NEW YORK

State

NY

Zip Code

10023

FEC ID number of contributing
federal political committee.

C

Name of Employer
MITSUBISHI UFJ SECURITIES

Occupation

STOCK TRADER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.2602

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. GLEN TAYLOR

Mailing Address 1 TAYLOR LANE

City

MANKATO

State

MN

Zip Code

56001

FEC ID number of contributing
federal political committee.

C

Name of Employer
TAYLOR CORPORATION

Occupation

MANAGER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.251

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. REBECCA TAYLOR

Mailing Address 1 TAYLOR LANE

City

MANKATO

State

MN

Zip Code

56001

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 ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.252

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10500.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MS. SARA M. TAYLOR

Mailing Address 806 MARYLAND AVENUE NE #1

City

WASHINGTON

State

DC

Zip Code

20002

FEC ID number of contributing
federal political committee.

C

Name of Employer
BLUEFRONT STRATEGIES

Occupation
FOUNDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.215

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. KATHRYN TESHA

Mailing Address 5128 SKYLINE DRIVE

City

EDINA

State

MN

Zip Code

55436

FEC ID number of contributing
federal political committee.

C

Name of Employer
TARGET

Occupation
E.V.P. MERCHANDISING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.800

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. MARK TESHA

Mailing Address 5128 SKYLINE DRIVE

City

EDINA

State

MN

Zip Code

55436

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.775

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MRS. ADRIENNE TIETZ

Mailing Address 2805 MAPLEWOOD CIRCLE E.

City

WAYZATA

State

MN

Zip Code

55391

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 ▼

750.00

Date of Receipt

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

Transaction ID: SA11.534

Amount of Each Receipt this Period

750.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. PAUL H. TIETZ

Mailing Address 2805 MAPLEWOOD CIRCLE E.

City

WAYZATA

State

MN

Zip Code

55391

FEC ID number of contributing
federal political committee.

C

Name of Employer
BRIGGS & MORGAN

Occupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

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

Transaction ID: SA11.540

Amount of Each Receipt this Period

750.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JOEL S. TILSNER

Mailing Address 2505 SYLVAN ROAD S.

City

MINNETONKA

State

MN

Zip Code

55305

FEC ID number of contributing
federal political committee.

C

Name of Employer
TILSNER CARTON CO.

Occupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.729

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. JAMES TOMASULO

Mailing Address 520 ST ANDREWS PLACE

City

MANALAPAN

State

NJ

Zip Code

07726

FEC ID number of contributing
federal political committee.

C

Name of Employer
BANK OF AMERICA

Occupation

INVESTMENT BANKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.407

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. WILL TRACHMAN

Mailing Address 207 KING ST #412

City

SAN FRANCISCO

State

CA

Zip Code

94107

FEC ID number of contributing
federal political committee.

C

Name of Employer
O'MELVENY & MYERS

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.457

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JOHN C. TRAUTZ

Mailing Address 4509 EDINA BLVD.

City

EDINA

State

MN

Zip Code

55424

FEC ID number of contributing
federal political committee.

C

Name of Employer
RELIANCE DEVELOPMENT COMP-
ANY

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.766

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. BLAIR TREMERE

Mailing Address 2305 LEE AVENUE N.

City

GOLDEN VALLEY

State

MN

Zip Code

55422

FEC ID number of contributing
federal political committee.

C

Name of Employer
PUBLIC AFFAIRS CONSULTING,
L.L.C.

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.1963

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. TONY TRIMBLE

Mailing Address P.O. BOX 849

City

WALKER

State

MN

Zip Code

56484

FEC ID number of contributing
federal political committee.

C

Name of Employer
TRIMBLE & ASSOCIATES

Occupation

PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.707

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. RONALD A. TSCHETTER

Mailing Address 2645 PARKVIEW DRIVE

City

WHITE BEAR TOWNSHI

State

MN

Zip Code

55110

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.S. PEACE CORPS

Occupation

DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.520

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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(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)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MEGAN E. TUCCI

Mailing Address 1831 SUMMIT AVENUE

City

ST. PAUL

State

MN

Zip Code

55105

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 ▼

500.00

Date of Receipt

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

Transaction ID: SA11.604

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

THOMAS J. TUCCI

Mailing Address 1831 SUMMIT AVENUE

City

ST. PAUL

State

MN

Zip Code

55105

FEC ID number of contributing
federal political committee.

C

Name of Employer
FUBYANSKE LAW FIRM

Occupation

ATTORNEY

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.603

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. RONALD L. TURNER

Mailing Address 16612 GRAYS BAY BLVD.

City

WAYZATA

State

MN

Zip Code

55391

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

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

Transaction ID: SA11.2163

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. JIM ULLAND

Mailing Address 1600 W. 22ND STREET

City

MINNEAPOLIS

State

MN

Zip Code

55405

FEC ID number of contributing
federal political committee.

C

Name of Employer
ULLAND INVESTMENT ADVISOR

Occupation

MONEY MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.536

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

ROBERT ULRICH

Mailing Address 5400 LONDONDERRY ROAD

City

EDINA

State

MN

Zip Code

55436

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 ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.610

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DAVID M. UNDERWOOD

Mailing Address 909 FANNIN STREET
UNIT 1640

City

HOUSTON

State

TX

Zip Code

77010

FEC ID number of contributing
federal political committee.

C

Name of Employer
WELLS FARGO ADVISORS

Occupation

FINANCIAL ADVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.325

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6500.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. STEVE VANDERBOOM

Mailing Address 2290 HOLLYBUSH ROAD

City

MEDINA

State

MN

Zip Code

55340

FEC ID number of contributing
federal political committee.

C

Name of Employer
PACE ANALYTICAL SERVICES,
INC.

Occupation

PRESIDENT/C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.674

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. JULIE VARDA

Mailing Address 15268 FISH POINT ROAD SE

City

PRIOR LAKE

State

MN

Zip Code

55372

FEC ID number of contributing
federal political committee.

C

Name of Employer
A.D. STRATEGIES

Occupation

ADVERTISING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.1307

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. RICHARD TAYLOR VARDA

Mailing Address 15268 FISH POINT ROAD SE

City

PRIOR LAKE

State

MN

Zip Code

55372

FEC ID number of contributing
federal political committee.

C

Name of Employer
TARGET CORPORATION

Occupation

ARCHITECT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.1310

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

15000.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. JOHN D. VARNER

Mailing Address 9330 CLEMENTA AVENUE SW

City

MONTROSE

State

MN

Zip Code

55363

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

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

Transaction ID: SA11.1279

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JEFFREY J. VERGAMINI

Mailing Address 1509 ASBURY

City

WINNETKA

State

IL

Zip Code

60093

FEC ID number of contributing
federal political committee.

C

Name of Employer
MORGAN STANLEY

Occupation
INVESTMENT BANKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.2007

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. MATTHEW T. VOSS

Mailing Address 345 W. FULLERTON PARKWAY #2406

City

CHICAGO

State

IL

Zip Code

60614

FEC ID number of contributing
federal political committee.

C

Name of Employer
MORGAN STANLEY

Occupation
PRIVATE BANKING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: SA11.2026

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. BERNIE WAGNILD

Mailing Address 1201 YALE PLACE
APARTMENT 1102

City State Zip Code
MINNEAPOLIS MN 55403

FEC ID number of contributing
federal political committee.

C

Name of Employer
VALLEY AUTOMOTIVE

Occupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.265

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

SUSAN WALDEN

Mailing Address 5215 BIRDWOOD

City State Zip Code
HOUSTON TX 77096

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.448

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ROBERT F. WALL

Mailing Address 35 W. WACKER DRIVE
SUITE 4700

City State Zip Code
CHICAGO IL 60601

FEC ID number of contributing
federal political committee.

C

Name of Employer
WINSTON & STRAWN, L.L.P.

Occupation
PARTNER/LAWYER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: SA11.2059

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MRS. AMANDA WALSH

Mailing Address 1354 REST POINT CIRCLE

City

ORONO

State

MN

Zip Code

55364

FEC ID number of contributing
federal political committee.

C

Name of Employer
BAUMAN & BROOKE

Occupation

MARKETING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4075.00

Date of Receipt

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

Transaction ID: SA11.673

Amount of Each Receipt this Period

4075.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DAVID WALSH

Mailing Address P.O.BOX 11450

City

JACKSON

State

WY

Zip Code

83002

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 ▼

750.00

Date of Receipt

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

Transaction ID: SA11.2255

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DAVID WALSH

Mailing Address P.O.BOX 11450

City

JACKSON

State

WY

Zip Code

83002

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 ▼

750.00

Date of Receipt

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

Transaction ID: SA11.655

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

4825.00

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 166 / 227

(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)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. DENNIS WALSH

Mailing Address 1354 REST POINT CIRCLE

City

ORONO

State

MN

Zip Code

55364

FEC ID number of contributing
federal political committee.

C

Name of Employer
WALSH PARTNERSOccupation
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4075.00

Date of Receipt

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

Transaction ID: SA11.679

Amount of Each Receipt this Period

4075.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DENNIS F. WALSH

Mailing Address P.O. BOX 2

City

MAIDEN ROCK

State

WI

Zip Code

54769

FEC ID number of contributing
federal political committee.

C

Name of Employer
WALSH BISHOPOccupation
ARCHITECT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.799

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. JOYCE WALSH

Mailing Address P.O. BOX 2

City

MAIDEN ROCK

State

WI

Zip Code

54769

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKEROccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.769

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5075.00

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 167 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MRS. NATALIE A. WEBER

Mailing Address 1353 CHATTERTON COURT

City

EAGAN

State

MN

Zip Code

55123

FEC ID number of contributing
federal political committee.

C

Name of Employer
G.B.W.A. INC.

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.724

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. FRED WEHLING

Mailing Address 9011 WHISPER CREEK TRAIL

City

ROCKFORD

State

MN

Zip Code

55373

FEC ID number of contributing
federal political committee.

C

Name of Employer
AMERILAB TECHNOLOGIES

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.1497

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JOE WEIS

Mailing Address 11761 SANDY POINT LANE NE

City

ROCHESTER

State

MN

Zip Code

55906

FEC ID number of contributing
federal political committee.

C

Name of Employer
WEIS BUILDERS

Occupation

C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.660

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

3000.00

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 168 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

JAMIE WELLIK

Mailing Address 31 MEANDER ROAD

City

GOLDEN VALLEY

State

MN

Zip Code

55422

FEC ID number of contributing
federal political committee.

C

Name of Employer
FACILITIES STRATEGIES LLC

Occupation

REAL ESTATE CONSULTING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.1308

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. GREGORY W. WENDT

Mailing Address 1 MARKET STREET
SUITE 1800

City

SAN FRANCISCO

State

CA

Zip Code

94105

FEC ID number of contributing
federal political committee.

C

Name of Employer
CAPITAL GROUP

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.3022

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. JOAN W. WENDT

Mailing Address 200 S. BRENTWOOD BLVD.
APARTMENT 21D

City

CLAYTON

State

MO

Zip Code

63105

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 ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.3023

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10500.00

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 169 / 227

(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)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MRS. LISA WENDT

Mailing Address 1 MUIR LOOP

City

SAN FRANCISCO

State

CA

Zip Code

94129

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.256

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. STEPHEN G. WENZEL

Mailing Address P.O. BOX 285
415 NORTHEAST THIRD STREET

City

LITTLE FALLS

State

MN

Zip Code

56345

FEC ID number of contributing
federal political committee.

C

Name of Employer
STATE OF MINNESOTA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

COLLEGE INSTRUCTOR

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.546

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ANTHONY WERNER

Mailing Address 1863 MOUNTAIN SAGE RUN

City

HIGHLANDS RANCH

State

CO

Zip Code

80126

FEC ID number of contributing
federal political committee.

C

Name of Employer
COMCAST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

EXECUTIVE VICE PRESIDENT

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.834

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6500.00

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 170 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MRS. ANNETTE WHALEY

Mailing Address 1978 SUMMIT AVENUE

City

ST. PAUL

State

MN

Zip Code

55105

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 ▼

2500.00

Date of Receipt

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

Transaction ID: SA11.548

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JOHN P. WHALEY

Mailing Address 1978 SUMMIT AVENUE

City

ST. PAUL

State

MN

Zip Code

55105

FEC ID number of contributing
federal political committee.

C

Name of Employer
NORWEST EQUITY PARTNERS

Occupation

PRIVATE EQUITY INVESTMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: SA11.588

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

BENSON K. WHITNEY

Mailing Address 121 S. EIGHTH STREET
STE 800

City

MINNEAPOLIS

State

MN

Zip Code

55402

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 ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.621

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10000.00

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 171 / 227

(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)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. WHELOCK WHITNEY

Mailing Address 730 2ND AVENUE S.

City

MAPLE PLAIN

State

MN

Zip Code

55359

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.122

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. DAVID WILLIAMS

Mailing Address 5014 WOODHURST LANE

City

MINNETONKA

State

MN

Zip Code

55345

FEC ID number of contributing
federal political committee.

C

Name of Employer
V.R. SURGERY, P.A.Occupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.1476

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JOHN B. WILLIAMS

Mailing Address 2548 VIOLET STREET

City

GLENVIEW

State

IL

Zip Code

60026

FEC ID number of contributing
federal political committee.

C

Name of Employer
STONE TURN GROUPOccupation
PARTNER/CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.2002

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5750.00

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 172 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. MICHAEL D. WILLIAMS

Mailing Address 2126 GLENHURST ROAD

City

SAINT LOUIS PARK

State

MN

Zip Code

55416

FEC ID number of contributing
federal political committee.

C

Name of Employer
NORTH AMERICAN CONSTRUCTI-
ON SVCS., INC

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.163

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. GLENN R. WILSON, JR.

Mailing Address 5306 RIVER BLUFF CIRCLE

City

BLOOMINGTON

State

MN

Zip Code

55437

FEC ID number of contributing
federal political committee.

C

Name of Employer
STATE OF MINNESOTA

Occupation

COMMISSIONER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: SA11.1604

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. GLENN R. WILSON, JR.

Mailing Address 5306 RIVER BLUFF CIRCLE

City

BLOOMINGTON

State

MN

Zip Code

55437

FEC ID number of contributing
federal political committee.

C

Name of Employer
STATE OF MINNESOTA

Occupation

COMMISSIONER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: SA11.2999

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5350.00

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 173 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. JAMES WILSON

Mailing Address 220 WEXFORD HEIGHTS DRIVE

City

NEW BRIGHTON

State

MN

Zip Code

55112

FEC ID number of contributing
federal political committee.

C

Name of Employer
LABOR ALL PERSONEL

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.747

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. JANE WINDMEIER

Mailing Address 100 LOWELL ROAD

City

CHAMPLAIN

State

MN

Zip Code

55316

FEC ID number of contributing
federal political committee.

C

Name of Employer
TARGET CORP.

Occupation

FINANCE EXEC.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.755

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. SCOTT W. WINE

Mailing Address 18515 8TH AVENUE N.

City

PLYMOUTH

State

MN

Zip Code

55447

FEC ID number of contributing
federal political committee.

C

Name of Employer
POLARIS INDUSTRIES

Occupation

C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.565

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6500.00

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 174 / 227

(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)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. CHAD WINTER

Mailing Address 16451 MCGINTY ROAD W.

City

WAYZATA

State

MN

Zip Code

55391

FEC ID number of contributing
federal political committee.

C

Name of Employer
NORTHERN OIL & GAS, INC.

Occupation

VP OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.680

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. BRAD WUCHERPFENNIG

Mailing Address 1408 MUIR LANE

City

BURNSVILLE

State

MN

Zip Code

55337

FEC ID number of contributing
federal political committee.

C

Name of Employer
PHILLIPS PLASTICS, INC.

Occupation

PRESIDENT/C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.1156

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. MICHAEL G. ZWEIGBAUM

Mailing Address 4615 VINEWOOD LANE N.

City

PLYMOUTH

State

MN

Zip Code

55442

FEC ID number of contributing
federal political committee.

C

Name of Employer
ALLIANCE STEELE

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.742

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10250.00

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 175 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

ARJ FAMILY L.P.

Mailing Address 4365 WILLOW DRIVE

City

MEDINA

State

MN

Zip Code

55340

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: SA11.685

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SEE ATTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ROBERT JACKSON

Mailing Address 4365 WILLOW DRIVE

City

MEDINA

State

MN

Zip Code

55340-9701

FEC ID number of contributing
federal political committee.

C

Name of Employer

ARJ FAMILY L.P.

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: SA11.685B

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

[MEMO ITEM]
PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

1141260.70

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

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

FOR LINE NUMBER: PAGE 176 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)
CITIZENS FOR DURKIN

Mailing Address P.O. BOX 367

City State Zip Code
WESTERN SPRINGS IL 60558

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.2024

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

REFUND TO BE ISSUED

B.

Full Name (Last, First, Middle Initial)
PLUMMER FOR ILLINOIS

Mailing Address P.O. BOX 1025

City State Zip Code
EDWARDSVILLE IL 62025

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

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

Transaction ID: SA11.2023

Amount of Each Receipt this Period

50.00

CONTRIBUTION

CONFIRMED FEDERALLY PERMI-
SSABLE FUNDS

C.

Full Name (Last, First, Middle Initial)
RATOWITZ FOR CONGRESS

Mailing Address 410 S. MICHIGAN AVENUE
SUITE 726

City State Zip Code
CHICAGO IL 60605

FEC ID number of contributing
federal political committee.

C C00467886

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

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

Transaction ID: SA11.2022

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5100.00

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 177 / 227

(check only one)

<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)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

ALTRIA GROUP INC. PAC

Mailing Address 101 CONSTITUTION AVENUE NW

City

WASHINGTON

State

DC

Zip Code

20001

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

C00089136

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.1753

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

ASSOCIATION OF MARYLAND PILOTS FEDERAL PAC

Mailing Address 3720 DILLON STREET

City

BALTIMORE

State

MD

Zip Code

21224

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

C00389601

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

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

Transaction ID: SA11.73

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

AT&T INC. FEDERAL PAC

Mailing Address 208 S. AKARD STREET
SUITE 3521

City

DALLAS

State

TX

Zip Code

75202

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

C00109017

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.690

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6100.00

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 178 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)
BOSTON SCIENTIFIC CORPORATION PAC

Mailing Address ONE BOSTON SCIENTIFIC PLACE

City State Zip Code
NATICK MA 01760

FEC ID number of contributing
federal political committee. **C** C00357863

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.848

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
COMCAST CORPORATION PAC

Mailing Address 1701 J.F.K. BOULEVARD

City State Zip Code
PHILADELPHIA PA 19103-2838

FEC ID number of contributing
federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.689

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
ELECTRICAL CONTRACTORS PAC 'TEC PAC'

Mailing Address 3100 HUMBOLDT AVENUE S.

City State Zip Code
MINNEAPOLIS MN 55408

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

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.686

Amount of Each Receipt this Period

500.00

CONTRIBUTION

CONFIRMED FEDERALLY PERMI-
SSABLE FUNDS

SUBTOTAL of Receipts This Page (optional)

10500.00

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 179 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

ELECTRICAL CONTRACTORS POLITICAL ACTION COMMITTEE

Mailing Address 3 BETHESDA METRO CENTER

City

BETHESDA

State

MD

Zip Code

20814

FEC ID number of contributing
federal political committee.

C

C00113811

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.72

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

ENTERPRISE HOLDINGS, INC. PAC

Mailing Address 600 CORPORATE PARK DRIVE

City

ST. LOUIS

State

MO

Zip Code

63105

FEC ID number of contributing
federal political committee.

C

C00219642

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.846

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MCAPITOL MANAGEMENT/MWH AMERICAS PAC

Mailing Address 380 INTERLOCKEN CRESCENT
SUITE 200

City

BROOMFIELD

State

CO

Zip Code

80021

FEC ID number of contributing
federal political committee.

C

C00242370

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.687

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

11000.00

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 180 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MYPAC MYLAN INC. PAC

Mailing Address 1500 CORPORATE DRIVE

City

CANONSBURG

State

PA

Zip Code

15317

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

C00332395

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.688

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

QWEST PAC

Mailing Address 607 14TH STREET NW
SUITE 950

City

WASHINGTON

State

DC

Zip Code

20005

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

C00237156

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.847

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.Full Name (Last, First, Middle Initial)
TARGETCITIZENS POLITICAL FORUM

Mailing Address 1000 NICOLLET MALL - TPS 3275

City

MINNEAPOLIS

State

MN

Zip Code

55403

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

C00098061

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.691

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

7000.00

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 PageFOR LINE NUMBER:
(check only one)

PAGE 181 / 227

<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)

Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

TRAVELERS COMPANIES, INC. PAC

Mailing Address ONE TOWER SQUARE

City

HARTFORD

State

CT

Zip Code

06183

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

C00376376

Name of Employer

Occupation

Receipt For:

☐
☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.519

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

44700.00

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)

PAGE 182 / 227

<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)
Freedom First PAC

A.

Full Name (Last, First, Middle Initial)
MS. DEBORAH ANDERSON

Mailing Address 409 G STREET SE

City WASHINGTON State DC Zip Code 20003-4257

Purpose of Disbursement
IN-KIND DISBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SA11.3018B

Date of Disbursement

10 / 22 / 2009

Amount of Each Disbursement this Period

1955.35

IN-KIND: CATERING

B.

Full Name (Last, First, Middle Initial)
JEANNE BRAUN

Mailing Address 14350 HARBOUR LANDINGS DR UNIT B

City FORT MYERS State FL Zip Code 33908

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.97

Date of Disbursement

10 / 30 / 2009

Amount of Each Disbursement this Period

898.41

C.

Full Name (Last, First, Middle Initial)
SHELLY CARSON

Mailing Address PO BOX 2443

City COLUMBIA State SC Zip Code 29202

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.98

Date of Disbursement

10 / 30 / 2009

Amount of Each Disbursement this Period

295.30

SUBTOTAL of Disbursements This Page (optional)

3149.06

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 PageFOR LINE NUMBER:
(check only one)

PAGE 183 / 227

<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)
Freedom First PAC**A.**Full Name (Last, First, Middle Initial)
CAITLIN DUNN

Mailing Address PO BOX 9190

City ST PAUL State MN Zip Code 55109

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21.52

Date of Disbursement

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

Amount of Each Disbursement this Period

1228.72

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

Mailing Address 320 23RD ST S#1328

City ARLINGTON State VA Zip Code 22202

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21.99

Date of Disbursement

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

Amount of Each Disbursement this Period

30.00

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

Mailing Address 4101 GULF SHORE BLVD N PH 2

City NAPLES State FL Zip Code 34103

Purpose of Disbursement
CATERING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21.13

Date of Disbursement

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

Amount of Each Disbursement this Period

1334.05

SUBTOTAL of Disbursements This Page (optional)

2592.77

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 184 / 227

<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)
Freedom First PAC

A.

Full Name (Last, First, Middle Initial)
NATE GARVIS

Mailing Address 2119 FREMONT AVE S

City MINNEAPOLIS State MN Zip Code 55405

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.77

Date of Disbursement

/ /

Amount of Each Disbursement this Period

61.60

B.

Full Name (Last, First, Middle Initial)
BRIAN HALEY

Mailing Address 1868 COLUMBIA RD NW APT 511

City WASINGTON State DC Zip Code 20009

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.117

Date of Disbursement

/ /

Amount of Each Disbursement this Period

415.40

C.

Full Name (Last, First, Middle Initial)
BRIAN HALEY

Mailing Address PO BOX 9190

City ST PAUL State MN Zip Code 55109

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.53

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3638.21

SUBTOTAL of Disbursements This Page (optional)

4115.21

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 185 / 227

<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)
Freedom First PAC

A. Full Name (Last, First, Middle Initial) TRISHA HAMM	Transaction ID: SB21.112 Date of Disbursement
Mailing Address 2495 RYAN AVE NORTH ST	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 7 / 2 0 0 9</div> </div>
City ST PAUL State MN Zip Code 55109	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL	<div>525.41</div>
Candidate Name	<div>Category/Type</div>
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) TRISHA HAMM	Transaction ID: SB21.120 Date of Disbursement
Mailing Address 2495 RYAN AVE NORTH ST	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 3 0 / 2 0 0 9</div> </div>
City ST PAUL State MN Zip Code 55109	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL/OFFICE SUPPLIES	<div>921.08</div>
Candidate Name	<div>Category/Type</div>
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) TRISHA HAMM	Transaction ID: SB21.46 Date of Disbursement
Mailing Address PO BOX 9190	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 3 1 / 2 0 0 9</div> </div>
City ST PAUL State MN Zip Code 55109	Amount of Each Disbursement this Period
Purpose of Disbursement PAYROLL	<div>4041.92</div>
Candidate Name	<div>Category/Type</div>
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) ▼

SUBTOTAL of Disbursements This Page (optional)

5488.41

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)
Freedom First PAC

A. Full Name (Last, First, Middle Initial) TRISHA HAMM	Transaction ID: SB21.49 Date of Disbursement																				
Mailing Address PO BOX 9190	<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>1</td><td>1</td><td></td><td>3</td><td>0</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	1	1		3	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	0	9												
City ST PAUL State MN Zip Code 55109	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAYROLL	<table border="1"> <tr> <td colspan="10">4041.92</td> </tr> </table>	4041.92																			
4041.92																					
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. Full Name (Last, First, Middle Initial) TRISHA HAMM	Transaction ID: SB21.54 Date of Disbursement																				
Mailing Address PO BOX 9190	<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>1</td><td>2</td><td></td><td>3</td><td>1</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	1	2		3	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		3	1		2	0	0	9												
City ST PAUL State MN Zip Code 55109	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAYROLL	<table border="1"> <tr> <td colspan="10">7278.59</td> </tr> </table>	7278.59																			
7278.59																					
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) ▼																				
C. Full Name (Last, First, Middle Initial) ANN KELLY	Transaction ID: SB21.109 Date of Disbursement																				
Mailing Address 930 M ST NW APT 133	<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>1</td><td>2</td><td></td><td>0</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	1	2		0	2		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	2		2	0	0	9												
City WASHINGTON State DC Zip Code 20001	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL	<table border="1"> <tr> <td colspan="10">501.44</td> </tr> </table>	501.44																			
501.44																					
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) ▼																				

SUBTOTAL of Disbursements This Page (optional)

11821.95

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 187 / 227

<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)
Freedom First PAC

A.

Full Name (Last, First, Middle Initial)
ANN KELLY

Mailing Address PO BOX 9190

City ST PAUL State MN Zip Code 55109

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.47

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3147.79

B.

Full Name (Last, First, Middle Initial)
ANN KELLY

Mailing Address PO BOX 9190

City ST PAUL State MN Zip Code 55109

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.50

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3147.79

C.

Full Name (Last, First, Middle Initial)
ANN KELLY

Mailing Address PO BOX 9190

City ST PAUL State MN Zip Code 55109

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.55

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3147.79

SUBTOTAL of Disbursements This Page (optional)

9443.37

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 PageFOR LINE NUMBER:
(check only one)

PAGE 188 / 227

<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)
Freedom First PAC**A.**Full Name (Last, First, Middle Initial)
MR. JOHN MILNE

Mailing Address 409 G STREET SE

City WASHINGTON State DC Zip Code 20003-4257

Purpose of Disbursement
IN-KIND DISBURSEMENT

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SA11.3019C

Date of Disbursement

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

Amount of Each Disbursement this Period

1955.35

IN-KIND: CATERING

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

Mailing Address 315 KENTUCKY AVE

City ALEXANDRIA State VA Zip Code 22305

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21.100

Date of Disbursement

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

Amount of Each Disbursement this Period

1372.35

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

Mailing Address 315 KENTUCKY AVE

City ALEXANDRIA State VA Zip Code 22305

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21.105

Date of Disbursement

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

Amount of Each Disbursement this Period

48.01

SUBTOTAL of Disbursements This Page (optional)

3375.71

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)
Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

PHIL MUSSER

Mailing Address 315 KENTUCKY AVE

City
ALEXANDRIA

State
VA

Zip Code
22305

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21.114

Date of Disbursement

12 / 21 / 2009

Amount of Each Disbursement this Period

220.70

B.

Full Name (Last, First, Middle Initial)

RICHARD NELSON

Mailing Address 1975 PORTLAND AVE

City
ST PAUL

State
MN

Zip Code
55104

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21.30

Date of Disbursement

11 / 16 / 2009

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

TERRY NELSON

Mailing Address 1909 K ST NW STE 500

City
WASHINGTON

State
DC

Zip Code
20006

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21.108

Date of Disbursement

11 / 20 / 2009

Amount of Each Disbursement this Period

1213.55

SUBTOTAL of Disbursements This Page (optional)

6434.25

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 190 / 227

<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)
Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MR. ANDREW PARKER

Mailing Address 300 FIRST AVENUE N.
SUITE 200

City
MINNEAPOLIS

State
MN

Zip Code
55401-1600

Purpose of Disbursement
CATERING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21.14

Date of Disbursement

/ /

Amount of Each Disbursement this Period

565.82

B.

Full Name (Last, First, Middle Initial)

MR. ANDREW PARKER

Mailing Address 300 FIRST AVENUE N.
SUITE 200

City
MINNEAPOLIS

State
MN

Zip Code
55401-1600

Purpose of Disbursement
IN-KIND DISBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.3016

Date of Disbursement

/ /

Amount of Each Disbursement this Period

100.00

IN-KIND: ROOM CHARGE

C.

Full Name (Last, First, Middle Initial)

TIM PAWLENTY

Mailing Address PO BOX 9190

City
ST PAUL

State
MN

Zip Code
55109

Purpose of Disbursement
PHONE SERVICE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21.69

Date of Disbursement

/ /

Amount of Each Disbursement this Period

111.00

SUBTOTAL of Disbursements This Page (optional)

776.82

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 191 / 227

<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)
Freedom First PAC

A. Full Name (Last, First, Middle Initial) DON STILES	Transaction ID: SB21.113 Date of Disbursement
Mailing Address 6901 AUTO CLUB RD	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 7 / 2 0 0 9</div> </div>
City BLOOMINGTON State MN Zip Code 55438	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL	<div> <div></div> <div>83.35</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
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) DON STILES	Transaction ID: SB21.121 Date of Disbursement
Mailing Address 6901 AUTO CLUB RD	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 3 0 / 2 0 0 9</div> </div>
City BLOOMINGTON State MN Zip Code 55438	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL/POSTAGE	<div> <div></div> <div>24.10</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
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) DON STILES	Transaction ID: SB21.48 Date of Disbursement
Mailing Address PO BOX 9190	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 3 1 / 2 0 0 9</div> </div>
City ST PAUL State MN Zip Code 55109	Amount of Each Disbursement this Period
Purpose of Disbursement PAYROLL	<div> <div></div> <div>1799.18</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
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) ▼

SUBTOTAL of Disbursements This Page (optional)

1906.63

TOTAL This Period (last page this line number only)

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

NAME OF COMMITTEE (In Full)
Freedom First PAC

1799.18

1799.18

967.79

FEC Schedule B (Form 3X) (Revised 02/2003)

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 193 / 227

<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)
Freedom First PAC

A. Full Name (Last, First, Middle Initial) SARA TAYLOR	Transaction ID: SB21.110 Date of Disbursement																				
Mailing Address 606 N HUDSON ST	<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>1</td><td>2</td><td></td><td>0</td><td>4</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	1	2		0	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	4		2	0	0	9												
City ARLINGTON State VA Zip Code 22201	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL	<table border="1"> <tr> <td>1074.15</td> </tr> </table>	1074.15																			
1074.15																					
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. Full Name (Last, First, Middle Initial) SID VERDOORN	Transaction ID: SB21.116 Date of Disbursement																				
Mailing Address 28210 WOODSIDE DR	<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>1</td><td>2</td><td></td><td>2</td><td>8</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	1	2		2	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	8		2	0	0	9												
City EXCELSIOR State MN Zip Code 55331	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL	<table border="1"> <tr> <td>3792.00</td> </tr> </table>	3792.00																			
3792.00																					
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) ▼																				
C. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS	Transaction ID: SB21.9 Date of Disbursement																				
Mailing Address PO BOX 1270	<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>1</td><td>2</td><td></td><td>0</td><td>7</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	1	2		0	7		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	7		2	0	0	9												
City NEWARK State NJ Zip Code 07101	Amount of Each Disbursement this Period																				
Purpose of Disbursement BANK FEE	<table border="1"> <tr> <td>1069.03</td> </tr> </table>	1069.03																			
1069.03																					
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) ▼																				

SUBTOTAL of Disbursements This Page (optional)

5935.18

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 194 / 227

<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)
Freedom First PAC

A.

Full Name (Last, First, Middle Initial)
BB&T

Mailing Address 300 SOUTH WASHINGTON ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.10

Date of Disbursement

/ /

Amount of Each Disbursement this Period

305.00

B.

Full Name (Last, First, Middle Initial)
BB&T

Mailing Address 300 SOUTH WASHINGTON ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.6

Date of Disbursement

/ /

Amount of Each Disbursement this Period

130.50

C.

Full Name (Last, First, Middle Initial)
BLUE CROSS BLUE SHIELD OF MINNESOTA

Mailing Address 2575 HAMLINE AVE NORTH #C

City ROSEVILLE State MN Zip Code 55113

Purpose of Disbursement
INSURANCE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.38

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1538.00

SUBTOTAL of Disbursements This Page (optional)

1973.50

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)
Freedom First PAC

A. Full Name (Last, First, Middle Initial)
BLUE CROSS BLUE SHIELD OF MINNESOTA

Mailing Address 2575 HAMLINE AVE NORTH #C

City ROSEVILLE State MN Zip Code 55113

Purpose of Disbursement
INSURANCE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.39

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1538.00

B. Full Name (Last, First, Middle Initial)
BLUEFRONT STRATEGIES LLC

Mailing Address 44 CANAL CENTER PLAZA STE G1

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.72

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1919.07

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

Mailing Address 885 2ND AVE 16TH FL

City NEW YORK State NY Zip Code 10017

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.111

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4406.39

SUBTOTAL of Disbursements This Page (optional)

7863.46

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)
Freedom First PAC

A.

Full Name (Last, First, Middle Initial)
BRYAN CAVE LLP

Mailing Address PO BOX 503089

City ST LOUIS State MO Zip Code 63150

Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.40

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5044.15

B.

Full Name (Last, First, Middle Initial)
BRYAN CAVE LLP

Mailing Address PO BOX 503089

City ST LOUIS State MO Zip Code 63150

Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.41

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5043.10

C.

Full Name (Last, First, Middle Initial)
CAPITOL CITY BREWING COMPANY

Mailing Address 2 MASSACHUSETTS AVE NW

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
FACILITY RENTAL/CATERING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.26

Date of Disbursement

/ /

Amount of Each Disbursement this Period

7540.00

SUBTOTAL of Disbursements This Page (optional)

17627.25

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 197 / 227

<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)
Freedom First PAC

A.

Full Name (Last, First, Middle Initial)
CAPITOL DIRECT

Mailing Address 2915 COMMERS DR STE 1000

City EAGAN State MN Zip Code 55121

Purpose of Disbursement
PRINTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.81

Date of Disbursement

/ /

Amount of Each Disbursement this Period

874.12

B.

Full Name (Last, First, Middle Initial)
CAPITOL DIRECT

Mailing Address 2915 COMMERS DR STE 1000

City EAGAN State MN Zip Code 55121

Purpose of Disbursement
PRINTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.82

Date of Disbursement

/ /

Amount of Each Disbursement this Period

424.41

C.

Full Name (Last, First, Middle Initial)
CAPITOL DIRECT

Mailing Address 2915 COMMERS DR STE 1000

City EAGAN State MN Zip Code 55121

Purpose of Disbursement
PRINTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.83

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1561.13

SUBTOTAL of Disbursements This Page (optional)

2859.66

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 PageFOR LINE NUMBER:
(check only one)

PAGE 198 / 227

<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)
Freedom First PAC

A.

Full Name (Last, First, Middle Initial)
CAPITOL DIRECT

Mailing Address 2915 COMMERS DR STE 1000

City EAGAN State MN Zip Code 55121

Purpose of Disbursement
PRINTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21.84

Date of Disbursement

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

Amount of Each Disbursement this Period

178.57

B.

Full Name (Last, First, Middle Initial)
CAPITOL DIRECT

Mailing Address 2915 COMMERS DR STE 1000

City EAGAN State MN Zip Code 55121

Purpose of Disbursement
PRINTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21.85

Date of Disbursement

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

Amount of Each Disbursement this Period

930.90

C.

Full Name (Last, First, Middle Initial)
CAPITOL DIRECT

Mailing Address 2915 COMMERS DR STE 1000

City EAGAN State MN Zip Code 55121

Purpose of Disbursement
PRINTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21.86

Date of Disbursement

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

Amount of Each Disbursement this Period

357.93

SUBTOTAL of Disbursements This Page (optional)

1467.40

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 199 / 227

<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)
Freedom First PAC

A.

Full Name (Last, First, Middle Initial)
CAPITOL DIRECT

Mailing Address 2915 COMMERS DR STE 1000

City EAGAN State MN Zip Code 55121

Purpose of Disbursement
PRINTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.87

Date of Disbursement

12 / 21 / 2009

Amount of Each Disbursement this Period

1704.44

B.

Full Name (Last, First, Middle Initial)
CAPITOL DIRECT

Mailing Address 2915 COMMERS DR STE 1000

City EAGAN State MN Zip Code 55121

Purpose of Disbursement
PRINTING/POSTAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.90

Date of Disbursement

12 / 31 / 2009

Amount of Each Disbursement this Period

5259.44

C.

Full Name (Last, First, Middle Initial)
CHRIS MOTTOLA CONSULTING INC

Mailing Address 1382 LAFAYETTE ST

City CAPE MAY State NJ Zip Code 08204

Purpose of Disbursement
WEB SERVICE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.123

Date of Disbursement

11 / 24 / 2009

Amount of Each Disbursement this Period

7004.00

SUBTOTAL of Disbursements This Page (optional)

13967.88

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 200 / 227

<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)
Freedom First PAC

A.

Full Name (Last, First, Middle Initial)
CMDI

Mailing Address 7704 LEESBURG PIKE

City FALLS CHURCH State VA Zip Code 22043

Purpose of Disbursement
DATABASE MANAGEMENT SVC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.21

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)
CMDI

Mailing Address 7704 LEESBURG PIKE

City FALLS CHURCH State VA Zip Code 22043

Purpose of Disbursement
DATABASE MANAGEMENT SVC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.22

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)
CMDI

Mailing Address 7704 LEESBURG PIKE

City FALLS CHURCH State VA Zip Code 22043

Purpose of Disbursement
DATABASE MANAGEMENT SVC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.23

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

5174.35

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 201 / 227

<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)
Freedom First PAC

A.

Full Name (Last, First, Middle Initial)
CMDI

Mailing Address 7704 LEESBURG PIKE

City FALLS CHURCH State VA Zip Code 22043

Purpose of Disbursement
DATABASE MANAGEMENT SVC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.24

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4030.45

B.

Full Name (Last, First, Middle Initial)
CMDI

Mailing Address 7704 LEESBURG PIKE

City FALLS CHURCH State VA Zip Code 22043

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.76

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1500.00

C.

Full Name (Last, First, Middle Initial)
COMPLIANCE CONSULTING COMPANY OF VA LLC

Mailing Address PO BOX 365

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.17

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

8030.45

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 202 / 227

<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)
Freedom First PAC

A.

Full Name (Last, First, Middle Initial)
COMPLIANCE CONSULTING COMPANY OF VA LLC

Mailing Address PO BOX 365

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Category/
Type

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

Transaction ID: SB21.18

Date of Disbursement

12 / 01 / 2009

Amount of Each Disbursement this Period

308.37

B.

Full Name (Last, First, Middle Initial)
COMPLIANCE CONSULTING COMPANY OF VA LLC

Mailing Address PO BOX 365

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Category/
Type

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

Transaction ID: SB21.19

Date of Disbursement

12 / 02 / 2009

Amount of Each Disbursement this Period

2500.00

C.

Full Name (Last, First, Middle Initial)
COMPLIANCE CONSULTING COMPANY OF VA LLC

Mailing Address PO BOX 365

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Category/
Type

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

Transaction ID: SB21.20

Date of Disbursement

12 / 28 / 2009

Amount of Each Disbursement this Period

88.67

SUBTOTAL of Disbursements This Page (optional)

2897.04

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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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Freedom First PAC

A.

Full Name (Last, First, Middle Initial)
CONANT COMMUNICATIONS LLC

Mailing Address 1813 BILTMORE ST NW #A

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21.15

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)
CONANT COMMUNICATIONS LLC

Mailing Address 1813 BILTMORE ST NW #A

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21.16

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)
CONTINENTAL AIRLINES

Mailing Address 1600 SMITH ST

City HOUSTON State TX Zip Code 77002

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21.103

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1129.20

SUBTOTAL of Disbursements This Page (optional)

11129.20

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 204 / 227

<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)
Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

DALE STUDIOS

Mailing Address 8973 AZTEC DR

City State Zip Code
EDEN PRAIRIE MN 55347

Purpose of Disbursement
PHOTOGRAPHY SERVICE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.71

Date of Disbursement

/ /

Amount of Each Disbursement this Period

209.19

B.

Full Name (Last, First, Middle Initial)

DC TREASURER

Mailing Address PO BOX 96385

City State Zip Code
WASHINGTON DC 20090

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.60

Date of Disbursement

/ /

Amount of Each Disbursement this Period

215.38

C.

Full Name (Last, First, Middle Initial)

DC TREASURER

Mailing Address PO BOX 96385

City State Zip Code
WASHINGTON DC 20090

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.64

Date of Disbursement

/ /

Amount of Each Disbursement this Period

215.38

SUBTOTAL of Disbursements This Page (optional)

639.95

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 205 / 227

<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)
Freedom First PAC

A. Full Name (Last, First, Middle Initial) DC TREASURER	Transaction ID: SB21.66 Date of Disbursement																				
Mailing Address PO BOX 96385	<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>1</td><td>2</td><td></td><td>2</td><td>5</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	1	2		2	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	5		2	0	0	9												
City WASHINGTON State DC Zip Code 20090	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAYROLL TAXES	<table border="1"> <tr> <td colspan="10">549.67</td> </tr> </table>	549.67																			
549.67																					
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. Full Name (Last, First, Middle Initial) ELAVON	Transaction ID: SB21.4 Date of Disbursement																				
Mailing Address 7300 CHAPMAN HWY	<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>1</td><td>1</td><td></td><td>0</td><td>3</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	1	1		0	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	3		2	0	0	9												
City KNOXVILLE State TN Zip Code 37920	Amount of Each Disbursement this Period																				
Purpose of Disbursement BANK FEE	<table border="1"> <tr> <td colspan="10">485.08</td> </tr> </table>	485.08																			
485.08																					
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) ▼																				
C. Full Name (Last, First, Middle Initial) ELAVON	Transaction ID: SB21.8 Date of Disbursement																				
Mailing Address 7300 CHAPMAN HWY	<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>1</td><td>2</td><td></td><td>0</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	1	2		0	2		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	2		2	0	0	9												
City KNOXVILLE State TN Zip Code 37920	Amount of Each Disbursement this Period																				
Purpose of Disbursement BANK FEE	<table border="1"> <tr> <td colspan="10">1710.78</td> </tr> </table>	1710.78																			
1710.78																					
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) ▼																				

SUBTOTAL of Disbursements This Page (optional)

2745.53

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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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
 Freedom First PAC

A. Full Name (Last, First, Middle Initial) ENGAGE LLC	Transaction ID: SB21.122 Date of Disbursement
Mailing Address 707 8TH ST SE STE 200	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 8 / 2 0 0 9</div> </div>
City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
Purpose of Disbursement WEB SERVICE	<div>7179.00</div>
Candidate Name	<div>Category/Type</div>
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) ENGAGE LLC	Transaction ID: SB21.124 Date of Disbursement
Mailing Address 707 8TH ST SE STE 200	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 2 / 2 0 0 9</div> </div>
City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
Purpose of Disbursement WEB SERVICE	<div>4751.71</div>
Candidate Name	<div>Category/Type</div>
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) FLS CONNECT LLC	Transaction ID: SB21.36 Date of Disbursement
Mailing Address 7300 HUDSON BLVD STE 270	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 3 1 / 2 0 0 9</div> </div>
City SAINT PAUL State MN Zip Code 55128	Amount of Each Disbursement this Period
Purpose of Disbursement FUNDRAISING PHONE CALLS	<div>12852.00</div>
Candidate Name	<div>Category/Type</div>
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) ▼

SUBTOTAL of Disbursements This Page (optional)

24782.71

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)
Freedom First PAC

A.

Full Name (Last, First, Middle Initial)
GUERIN INC

Mailing Address PO BOX 2590

City ALEXANDRIA State VA Zip Code 22301

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.119

Date of Disbursement

/ /

Amount of Each Disbursement this Period

167.20

B.

Full Name (Last, First, Middle Initial)
HILTON MINNEAPOLIS

Mailing Address 1001 MARQUETTE AVE SOUTH

City MINNEAPOLIS State MN Zip Code 55403

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.102

Date of Disbursement

/ /

Amount of Each Disbursement this Period

213.31

C.

Full Name (Last, First, Middle Initial)
HILTON MINNEAPOLIS

Mailing Address 1001 MARQUETTE AVE SOUTH

City MINNEAPOLIS State MN Zip Code 55403

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.107

Date of Disbursement

/ /

Amount of Each Disbursement this Period

237.01

SUBTOTAL of Disbursements This Page (optional)

617.52

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)
Freedom First PAC

A. Full Name (Last, First, Middle Initial) HILTON MINNEAPOLIS	Transaction ID: SB21.27 Date of Disbursement																				
Mailing Address 1001 MARQUETTE AVE SOUTH	<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>1</td><td>1</td><td></td><td>1</td><td>0</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	1	1		1	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	0		2	0	0	9												
City MINNEAPOLIS State MN Zip Code 55403	Amount of Each Disbursement this Period																				
Purpose of Disbursement FACILITY RENTAL/CATERING	<table border="1"> <tr> <td>3</td><td>8</td><td>8</td><td>4</td><td>4</td><td>.</td><td>5</td><td>7</td> </tr> </table>	3	8	8	4	4	.	5	7												
3	8	8	4	4	.	5	7														
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. Full Name (Last, First, Middle Initial) HILTON MINNEAPOLIS	Transaction ID: SB21.94 Date of Disbursement																				
Mailing Address 1001 MARQUETTE AVE SOUTH	<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>1</td><td>0</td><td></td><td>2</td><td>3</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	1	0		2	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	3		2	0	0	9												
City MINNEAPOLIS State MN Zip Code 55403	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL	<table border="1"> <tr> <td>6</td><td>3</td><td>9</td><td>.</td><td>9</td><td>2</td> </tr> </table>	6	3	9	.	9	2														
6	3	9	.	9	2																
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) ▼																				
C. Full Name (Last, First, Middle Initial) HILTON MINNEAPOLIS	Transaction ID: SB21.95 Date of Disbursement																				
Mailing Address 1001 MARQUETTE AVE SOUTH	<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>1</td><td>0</td><td></td><td>2</td><td>3</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	1	0		2	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	3		2	0	0	9												
City MINNEAPOLIS State MN Zip Code 55403	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL	<table border="1"> <tr> <td>4</td><td>2</td><td>6</td><td>.</td><td>6</td><td>1</td> </tr> </table>	4	2	6	.	6	1														
4	2	6	.	6	1																
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) ▼																				

SUBTOTAL of Disbursements This Page (optional)

39911.10

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)
Freedom First PAC

A. Full Name (Last, First, Middle Initial)
HYNES COMMUNICATIONS LLC

Mailing Address 121 BOW ST STE 6

City PORTSMOUTH State NH Zip Code 03801

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.118

Date of Disbursement

12 / 31 / 2009

Amount of Each Disbursement this Period

2205.73

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

Mailing Address PO 8522

City FALLS CHURCH State VA Zip Code 22041

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.11

Date of Disbursement

12 / 31 / 2009

Amount of Each Disbursement this Period

221.52

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

Mailing Address PO 8522

City FALLS CHURCH State VA Zip Code 22041

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.3

Date of Disbursement

10 / 29 / 2009

Amount of Each Disbursement this Period

1553.55

SUBTOTAL of Disbursements This Page (optional)

3980.80

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 PageFOR LINE NUMBER:
(check only one)

PAGE 210 / 227

<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)
Freedom First PAC

A.

Full Name (Last, First, Middle Initial)
ICONTRIBUTE LLC

Mailing Address PO 8522

City FALLS CHURCH State VA Zip Code 22041

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21.7

Date of Disbursement

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

Amount of Each Disbursement this Period

1010.25

B.

Full Name (Last, First, Middle Initial)
INTERNAL REVENUE SERVICE

Mailing Address 1111 CONSTITUTION AVE NW

City WASHINGTON State DC Zip Code 20224

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21.62

Date of Disbursement

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

Amount of Each Disbursement this Period

2581.17

C.

Full Name (Last, First, Middle Initial)
INTERNAL REVENUE SERVICE

Mailing Address 1111 CONSTITUTION AVE NW

City WASHINGTON State DC Zip Code 20224

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21.65

Date of Disbursement

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

Amount of Each Disbursement this Period

2581.17

SUBTOTAL of Disbursements This Page (optional)

6172.59

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)
Freedom First PAC

A.

Full Name (Last, First, Middle Initial)
INTERNAL REVENUE SERVICE

Mailing Address 1111 CONSTITUTION AVE NW

City WASHINGTON State DC Zip Code 20224

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.68

Date of Disbursement

12 / 30 / 2009

Amount of Each Disbursement this Period

6125.68

B.

Full Name (Last, First, Middle Initial)
INTUIT PAYCYCLE

Mailing Address 2800 E COMMERCE CENTER PL

City TUCSON State AZ Zip Code 85706

Purpose of Disbursement
PAYROLL SVC/INSURANCE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.57

Date of Disbursement

12 / 24 / 2009

Amount of Each Disbursement this Period

21.99

C.

Full Name (Last, First, Middle Initial)
INTUIT PAYCYCLE

Mailing Address 2800 E COMMERCE CENTER PL

City TUCSON State AZ Zip Code 85706

Purpose of Disbursement
PAYROLL SVC/INSURANCE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.59

Date of Disbursement

11 / 24 / 2009

Amount of Each Disbursement this Period

21.99

SUBTOTAL of Disbursements This Page (optional)

6169.66

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Freedom First PAC

A.

Full Name (Last, First, Middle Initial)
KDS INC

Mailing Address 1900 CAMPUS COMMONS DR STE 100

City RESTON State VA Zip Code 20191

Purpose of Disbursement
PRINTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21.88

Date of Disbursement

/ /

Amount of Each Disbursement this Period

212.50

B.

Full Name (Last, First, Middle Initial)
KENNY PRODUCTS INC

Mailing Address 13309 S NORMANDIE AVE

City GARDENA State CA Zip Code 90249

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21.45

Date of Disbursement

/ /

Amount of Each Disbursement this Period

137.72

C.

Full Name (Last, First, Middle Initial)
LINDSKOOG FLORIST

Mailing Address 920 2ND AVE SOUTH STE 210

City MINNEAPOLIS State MN Zip Code 55402

Purpose of Disbursement
FLORAL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21.34

Date of Disbursement

/ /

Amount of Each Disbursement this Period

819.04

SUBTOTAL of Disbursements This Page (optional)

1169.26

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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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Freedom First PAC

A.

Full Name (Last, First, Middle Initial)
LINDSKOOG FLORIST

Mailing Address 920 2ND AVE SOUTH STE 210

City MINNEAPOLIS State MN Zip Code 55402

Purpose of Disbursement
FLORAL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.35

Date of Disbursement

/ /

Amount of Each Disbursement this Period

53.89

B.

Full Name (Last, First, Middle Initial)
MARRIOTT GROUP

Mailing Address 211 NORTH UNION ST STE 220

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.31

Date of Disbursement

/ /

Amount of Each Disbursement this Period

6969.00

C.

Full Name (Last, First, Middle Initial)
MCGILL CONSULTING LLC

Mailing Address 7643 SOUTH BAY DR

City BLOOMINGTON State MN Zip Code 55438

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.28

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

12022.89

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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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Freedom First PAC

A.

Full Name (Last, First, Middle Initial)
MCGILL CONSULTING LLC

Mailing Address 7643 SOUTH BAY DR

City BLOOMINGTON State MN Zip Code 55438

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21.32

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)
MINNEAPOLIS CLUB

Mailing Address 729-2ND AVE SOUTH

City MINNEAPOLIS State MN Zip Code 55402

Purpose of Disbursement
CATERING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21.12

Date of Disbursement

/ /

Amount of Each Disbursement this Period

512.84

C.

Full Name (Last, First, Middle Initial)
MINNESOTA DEPARTMENT OF REVENUE

Mailing Address 600 NORTH ROBERT ST

City ST PAUL State MN Zip Code 55101

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21.61

Date of Disbursement

/ /

Amount of Each Disbursement this Period

235.48

SUBTOTAL of Disbursements This Page (optional)

3248.32

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)
Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

MINNESOTA DEPARTMENT OF REVENUE

Mailing Address 600 NORTH ROBERT ST

City ST PAUL State MN Zip Code 55101

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21.63

Date of Disbursement

11 / 30 / 2009

Amount of Each Disbursement this Period

235.48

B.

Full Name (Last, First, Middle Initial)

MINNESOTA DEPARTMENT OF REVENUE

Mailing Address 600 NORTH ROBERT ST

City ST PAUL State MN Zip Code 55101

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21.67

Date of Disbursement

12 / 30 / 2009

Amount of Each Disbursement this Period

587.98

C.

Full Name (Last, First, Middle Initial)

NEW FRONTIER STRATEGY

Mailing Address 315 KENTUCKY AVE

City ALEXANDRIA State VA Zip Code 22305

Purpose of Disbursement
LIST PURCHASE/RENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21.43

Date of Disbursement

12 / 21 / 2009

Amount of Each Disbursement this Period

8495.00

SUBTOTAL of Disbursements This Page (optional)

9318.46

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)
Freedom First PAC

A.

Full Name (Last, First, Middle Initial)
NEW FRONTIER STRATEGY

Mailing Address 315 KENTUCKY AVE

City ALEXANDRIA State VA Zip Code 22305

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING/RENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21.73

Date of Disbursement

11 / 06 / 2009

Amount of Each Disbursement this Period

1500.00

B.

Full Name (Last, First, Middle Initial)
NORTHWEST AIRLINES

Mailing Address 2700 LONE OAK PKWY EAGAN

City MINNEAPOLIS State MN Zip Code 55121

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21.101

Date of Disbursement

10 / 30 / 2009

Amount of Each Disbursement this Period

351.01

C.

Full Name (Last, First, Middle Initial)
NORTHWEST AIRLINES

Mailing Address 2700 LONE OAK PKWY EAGAN

City MINNEAPOLIS State MN Zip Code 55121

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21.104

Date of Disbursement

11 / 02 / 2009

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)

1871.01

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)
Freedom First PAC

A. Full Name (Last, First, Middle Initial) NORTHWEST AIRLINES	Transaction ID: SB21.106 Date of Disbursement
Mailing Address 2700 LONE OAK PKWY EAGAN	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 5 / 2 0 0 9</div> </div>
City MINNEAPOLIS State MN Zip Code 55121	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL	<div> <div></div> <div>368.60</div> </div>
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. Full Name (Last, First, Middle Initial) NORTHWEST AIRLINES	Transaction ID: SB21.91 Date of Disbursement
Mailing Address 2700 LONE OAK PKWY EAGAN	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 3 / 2 0 0 9</div> </div>
City MINNEAPOLIS State MN Zip Code 55121	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL	<div> <div></div> <div>750.19</div> </div>
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) ▼
C. Full Name (Last, First, Middle Initial) NORTHWEST AIRLINES	Transaction ID: SB21.92 Date of Disbursement
Mailing Address 2700 LONE OAK PKWY EAGAN	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 3 / 2 0 0 9</div> </div>
City MINNEAPOLIS State MN Zip Code 55121	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL	<div> <div></div> <div>632.20</div> </div>
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) ▼

SUBTOTAL of Disbursements This Page (optional)

1750.99

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)
Freedom First PAC

A.

Full Name (Last, First, Middle Initial)
NORTHWEST AIRLINES

Mailing Address 2700 LONE OAK PKWY EAGAN

City MINNEAPOLIS State MN Zip Code 55121

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.93

Date of Disbursement

/ /

Amount of Each Disbursement this Period

479.20

B.

Full Name (Last, First, Middle Initial)
NORTHWEST AIRLINES

Mailing Address 2700 LONE OAK PKWY EAGAN

City MINNEAPOLIS State MN Zip Code 55121

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.96

Date of Disbursement

/ /

Amount of Each Disbursement this Period

340.60

C.

Full Name (Last, First, Middle Initial)
PINNACLE DIRECT INC

Mailing Address 15260 113TH ST NORTH

City STILLWATER State MN Zip Code 55082

Purpose of Disbursement
LIST PURCHASE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.42

Date of Disbursement

/ /

Amount of Each Disbursement this Period

17775.45

SUBTOTAL of Disbursements This Page (optional)

18595.25

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 219 / 227

<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)
Freedom First PAC

A. Full Name (Last, First, Middle Initial) PINNACLE DIRECT INC	Transaction ID: SB21.44 Date of Disbursement																				
Mailing Address 15260 113TH ST NORTH	<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>1</td><td>1</td><td></td><td>0</td><td>3</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	1	1		0	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	3		2	0	0	9												
City STILLWATER State MN Zip Code 55082	Amount of Each Disbursement this Period																				
Purpose of Disbursement LIST RENTAL/POSTAGE	<table border="1"> <tr> <td>22886.31</td> </tr> </table>	22886.31																			
22886.31																					
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. Full Name (Last, First, Middle Initial) PINNACLE DIRECT INC	Transaction ID: SB21.79 Date of Disbursement																				
Mailing Address 15260 113TH ST NORTH	<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>1</td><td>0</td><td></td><td>1</td><td>5</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	1	0		1	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	5		2	0	0	9												
City STILLWATER State MN Zip Code 55082	Amount of Each Disbursement this Period																				
Purpose of Disbursement POSTAGE/LIST RENTAL	<table border="1"> <tr> <td>3325.54</td> </tr> </table>	3325.54																			
3325.54																					
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) ▼																				
C. Full Name (Last, First, Middle Initial) PINNACLE DIRECT INC	Transaction ID: SB21.80 Date of Disbursement																				
Mailing Address 15260 113TH ST NORTH	<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>1</td><td>1</td><td></td><td>2</td><td>0</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	1	1		2	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	0		2	0	0	9												
City STILLWATER State MN Zip Code 55082	Amount of Each Disbursement this Period																				
Purpose of Disbursement POSTAGE/PRINTING	<table border="1"> <tr> <td>38951.18</td> </tr> </table>	38951.18																			
38951.18																					
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) ▼																				

SUBTOTAL of Disbursements This Page (optional)

65163.03

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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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
 Freedom First PAC

A.

Full Name (Last, First, Middle Initial)
 PINNACLE DIRECT INC

Mailing Address 15260 113TH ST NORTH

City State Zip Code
 STILLWATER MN 55082

Purpose of Disbursement
 PRINTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.89

Date of Disbursement

/ /

Amount of Each Disbursement this Period

360.36

B.

Full Name (Last, First, Middle Initial)
 PKL CONSULTING LLC

Mailing Address 621 THORNWOOD LN

City State Zip Code
 NORTHFIELD IL 60093

Purpose of Disbursement
 FINANCE CONSULTING/FACILITY RENTAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.33

Date of Disbursement

/ /

Amount of Each Disbursement this Period

21010.05

C.

Full Name (Last, First, Middle Initial)
 SFM

Mailing Address PO BOX 583178

City State Zip Code
 MINNEAPOLIS MN 55458

Purpose of Disbursement
 PAYROLL SVC/INSURANCE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.58

Date of Disbursement

/ /

Amount of Each Disbursement this Period

962.00

SUBTOTAL of Disbursements This Page (optional)

22332.41

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)
Freedom First PAC

A.

Full Name (Last, First, Middle Initial)
SHANNA WOODBURY CONSULTING LLC

Mailing Address PO BOX 120697

City ST PAUL State MN Zip Code 55112

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.29

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)
SNOW PHOTOGRAPHY

Mailing Address 930 M ST NW APT 1014

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
PHOTOGRAPHY SERVICE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.70

Date of Disbursement

/ /

Amount of Each Disbursement this Period

300.00

C.

Full Name (Last, First, Middle Initial)
STATE FARM INSURANCE

Mailing Address 4124 QUEBEC AVE N #103

City NEW HOPE State MN Zip Code 55427

Purpose of Disbursement
INSURANCE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.37

Date of Disbursement

/ /

Amount of Each Disbursement this Period

326.49

SUBTOTAL of Disbursements This Page (optional)

5626.49

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)
Freedom First PAC

A. Full Name (Last, First, Middle Initial) TERRA ECLIPSE	Transaction ID: SB21.125 Date of Disbursement																				
Mailing Address 9043 SOQUEL DR	<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>1</td><td>2</td><td></td><td>0</td><td>4</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	1	2		0	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	4		2	0	0	9												
City APTOS State CA Zip Code 95003	Amount of Each Disbursement this Period																				
Purpose of Disbursement WEB SERVICE	<table border="1"> <tr> <td colspan="10">17500.00</td> </tr> </table>	17500.00																			
17500.00																					
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. Full Name (Last, First, Middle Initial) USPS	Transaction ID: SB21.25 Date of Disbursement																				
Mailing Address 408 SAINT PETER ST	<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>1</td><td>0</td><td></td><td>2</td><td>7</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	1	0		2	7		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	7		2	0	0	9												
City SAINT PAUL State MN Zip Code 55102	Amount of Each Disbursement this Period																				
Purpose of Disbursement DELIVERY	<table border="1"> <tr> <td colspan="10">17.50</td> </tr> </table>	17.50																			
17.50																					
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) ▼																				
C. Full Name (Last, First, Middle Initial) USPS	Transaction ID: SB21.74 Date of Disbursement																				
Mailing Address 408 SAINT PETER ST	<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>1</td><td>0</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	1	0		1	6		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	6		2	0	0	9												
City SAINT PAUL State MN Zip Code 55102	Amount of Each Disbursement this Period																				
Purpose of Disbursement POSTAGE	<table border="1"> <tr> <td colspan="10">770.00</td> </tr> </table>	770.00																			
770.00																					
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) ▼																				

SUBTOTAL of Disbursements This Page (optional)

18287.50

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)
Freedom First PAC

A.

Full Name (Last, First, Middle Initial)
USPS

Mailing Address 408 SAINT PETER ST

City SAINT PAUL State MN Zip Code 55102

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.75

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)
USPS

Mailing Address 408 SAINT PETER ST

City SAINT PAUL State MN Zip Code 55102

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.78

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)
WELLS FARGO

Mailing Address PO BOX 63750

City SAN FRANCISCO State CA Zip Code 94163

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.1

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

2010.00

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)
Freedom First PAC

A.

Full Name (Last, First, Middle Initial)

WELLS FARGO

Mailing Address PO BOX 63750

City State Zip Code
SAN FRANCISCO CA 94163

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.2

Date of Disbursement

/ /

Amount of Each Disbursement this Period

10.00

B.

Full Name (Last, First, Middle Initial)

WELLS FARGO

Mailing Address PO BOX 63750

City State Zip Code
SAN FRANCISCO CA 94163

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21.5

Date of Disbursement

/ /

Amount of Each Disbursement this Period

10.00

SUBTOTAL of Disbursements This Page (optional)

20.00

TOTAL This Period (last page this line number only)

379031.17

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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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Freedom First PAC

A. Full Name (Last, First, Middle Initial)
BACHMANN FOR CONGRESS

Mailing Address PO BOX 25950

City State Zip Code
WOODBURY MN 55125

Purpose of Disbursement
CONTRIBUTION

Candidate Name
REP MICHELE BACHMANN

Office Sought: ☒ House
☐ Senate
☐ President

State: MN District: 06

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Transaction ID: SB23.3

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2400.00

B. Full Name (Last, First, Middle Initial)
DOUG HOFFMAN FOR CONGRESS

Mailing Address PO BOX 708

City State Zip Code
SARANAC LAIKE NY 12983

Purpose of Disbursement
CONTRIBUTION

Candidate Name
DOUG HOFFMAN

Office Sought: ☒ House
☐ Senate
☐ President

State: NY District: 23

Disbursement For: 2009
☐ Primary ☐ General
☒ Other (specify) ▼

SPECIAL-GENERAL

Category/
Type

Transaction ID: SB23.1

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2400.00

C. Full Name (Last, First, Middle Initial)
FRIENDS OF ERIK PAULSEN

Mailing Address PO BOX 44369

City State Zip Code
EDEN PRAIRIE MN 55344

Purpose of Disbursement
CONTRIBUTION

Candidate Name
REP ERIK PAULSEN

Office Sought: ☒ House
☐ Senate
☐ President

State: MN District: 03

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Transaction ID: SB23.4

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2400.00

SUBTOTAL of Disbursements This Page (optional)

7200.00

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 PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
Freedom First PAC

A. Full Name (Last, First, Middle Initial) KLINE FOR CONGRESS	Transaction ID: SB23.5 Date of Disbursement																				
Mailing Address 101 WEST BURNSVILLE PARKWAY STE 10	<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>1</td><td>2</td><td></td><td>2</td><td>1</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	1	2		2	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	1		2	0	0	9												
City BURNSVILLE State MN Zip Code 55337	Amount of Each Disbursement this Period																				
Purpose of Disbursement CONTRIBUTION	<table border="1"> <tr> <td>2400.00</td> </tr> </table>	2400.00																			
2400.00																					
Candidate Name REP JOHN KLINE	Category/Type																				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 02	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) PORTMAN FOR SENATE COMMITTEE	Transaction ID: SB23.6 Date of Disbursement																				
Mailing Address PO BOX 39	<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>1</td><td>2</td><td></td><td>2</td><td>9</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	1	2		2	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	9		2	0	0	9												
City TERRACE PARK State OH Zip Code 45174	Amount of Each Disbursement this Period																				
Purpose of Disbursement CONTRIBUTION	<table border="1"> <tr> <td>2400.00</td> </tr> </table>	2400.00																			
2400.00																					
Candidate Name ROB PORTMAN	Category/Type																				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) SCOTT BROWN FOR US SENATE COMMITTEE	Transaction ID: SB23.7 Date of Disbursement																				
Mailing Address 200 RESERVOIR ST	<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>1</td><td>2</td><td></td><td>3</td><td>1</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	1	2		3	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		3	1		2	0	0	9												
City NEEDHAM State MA Zip Code 02494	Amount of Each Disbursement this Period																				
Purpose of Disbursement CONTRIBUTION	<table border="1"> <tr> <td>2400.00</td> </tr> </table>	2400.00																			
2400.00																					
Candidate Name STATE SENA SCOTT BROWN	Category/Type																				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ SPECIAL-GENERAL																				

SUBTOTAL of Disbursements This Page (optional)

7200.00

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 checked="" 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)
Freedom First PAC

A.

Full Name (Last, First, Middle Initial)
THE RICHARD BURR COMMITTEE

Mailing Address PO BOX 5928

City WINSTON-SALEM State NC Zip Code 27113

Purpose of Disbursement
CONTRIBUTION

Candidate Name
SENATOR RICHARD BURR

Office Sought: ☐ House
☒ Senate
☐ President

State: NC District:

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Transaction ID: SB23.2

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2400.00

SUBTOTAL of Disbursements This Page (optional)

2400.00

TOTAL This Period (last page this line number only)

16800.00