

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 201 SIOUX RD STE 107 MANKATO MN 56001-7114 CITY STATE ZIP CODE

2. FEC IDENTIFICATION NUMBER C C00550707 3. IS THIS REPORT NEW (N) OR AMENDED (A) STATE DISTRICT MN 01

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) Termination Report (TER)

(b) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on MM/DD/YYYY in the State of (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on MM/DD/YYYY in the State of

5. Covering Period MM/DD/YYYY through MM/DD/YYYY 01/01/2022 through 03/31/2022

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. DATWYLER, THOMAS, , , Type or Print Name of Treasurer

Signature of Treasurer DATWYLER, THOMAS, , , [Electronically Filed] Date MM/DD/YYYY 04/13/2022

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**FRIENDS OF HAGEDORN**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	39942.70	814319.05
(b) Total Contribution Refunds (from Line 20(d)) .....	226225.02	231691.48
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	- 186282.32	582627.57
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	101760.22	572799.33
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	8825.58
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	101760.22	563973.75
8. Cash on Hand at Close of Reporting Period (from Line 27).....	344570.28	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

**FRIENDS OF HAGEDORN**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	20883.67	478043.40
(ii) Unitemized .....	10059.03	98585.65
(iii) TOTAL of contributions from individuals .....	30942.70	576629.05
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	9000.00	237650.00
(d) The Candidate .....	0.00	40.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	39942.70	814319.05
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	6023.18	172815.32
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	8825.58
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....</b>	45965.88	995959.95

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	101760.22	572799.33
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	10000.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	209725.02	215191.48
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	16500.00	16500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	226225.02	231691.48
21. OTHER DISBURSEMENTS .....	150.00	43150.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	328135.24	857640.81

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	626739.64
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	45965.88
25. SUBTOTAL (add Line 23 and Line 24).....	672705.52
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	328135.24
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	344570.28

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

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

FOR LINE NUMBER: (check only one)		PAGE 5 OF 74	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

**A.** Full Name (Last, First, Middle Initial)  
**CHAMPAIGNE, JACK, , ,**

Mailing Address 1315 FOREST RIVER RUN

City MISHAWAKA	State IN	Zip Code 46545-7347
-------------------	-------------	------------------------

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

Name of Employer ELECTRONICS INC	Occupation ENGINEER
-------------------------------------	------------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
02		04		2022

**Transaction ID : A86C60B68DF724E30A81**

Amount of Each Receipt this Period  
100.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**SWEHLA, MICHAEL, , ,**

Mailing Address 23495 400TH AVE

City WINNEBAGO	State MN	Zip Code 56098-3310
-------------------	-------------	------------------------

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

Name of Employer SWEHLA BROKERAGE INC	Occupation PRES
--	--------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01		25		2022

**Transaction ID : AD05BC8F9E55143DDB6F**

Amount of Each Receipt this Period  
500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**BUNKER, BRUCE, , ,**

Mailing Address 8900 ROBS PL NE

City ALBUQUERQUE	State NM	Zip Code 87122-4231
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FEC ID number of contributing federal political committee. **C**

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

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
02		06		2022

**Transaction ID : A8259976567A347AEB0E**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

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

1600.00

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

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

FOR LINE NUMBER: PAGE 6 OF 74  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

**A.** Full Name (Last, First, Middle Initial)  
**UIHLEIN, LISA, R, ,**  
 Mailing Address 3325 HEISER ST  
 City HUDSON State WI Zip Code 54016-5007  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 14 / 2022  
**Transaction ID : A1CB1BB32D62C48C3963**  
 Amount of Each Receipt this Period  
 1200.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CHAMPAIGNE, JACK, , ,**  
 Mailing Address 1315 FOREST RIVER RUN  
 City MISHAWAKA State IN Zip Code 46545-7347  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ELECTRONICS INC Occupation ENGINEER  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 04 / 2022  
**Transaction ID : A00206462E08246F4805**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**PENZ, SHARON, , ,**  
 Mailing Address 1442 SALEM LN SW  
 City ROCHESTER State MN Zip Code 55902-6646  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2022  
**Transaction ID : A00A26834FF5B4E159EF**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2300.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 7 OF 74  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

**A.** Full Name (Last, First, Middle Initial)  
**BULMAN, DANIEL, , ,**  
 Mailing Address 47192 QUEENS COVE CIR  
 City LA CRESCENT State MN Zip Code 55947-4235  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 01 / 2022  
**Transaction ID : A6F87A924AA3B46E5A8E**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**SCHOVILLE, JUSTIN, , ,**  
 Mailing Address 1339 2ND ST NW  
 City ROCHESTER State MN Zip Code 55901-0359  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RESTAURANT Occupation SELF  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 05 / 2022  
**Transaction ID : A2E0073239A594EFA1B**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**ROMINSKI, KATHRYN, , ,**  
 Mailing Address 2301 RIVER RD S  
 City LAKELAND State MN Zip Code 55043-9777  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HUBBARD BROADCASTING, INC. Occupation BROADCASTER  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 01 / 2022  
**Transaction ID : A6E1398C2E75A462F967**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

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

1750.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 OF 74  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

**A.** Full Name (Last, First, Middle Initial)  
**SCHEEL, STEVE, , ,**

Mailing Address 3900 RIVER OAK CIR

City MOORHEAD State MN Zip Code 56560-5611

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

Name of Employer SCHEELS Occupation RETAIL

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 03 / 2022

Transaction ID : **A194C2C7C13A1483E907**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**ZIERKE, TRACY, , ,**

Mailing Address 310 N EAST ST

City BLUE EARTH State MN Zip Code 56013-2718

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

Name of Employer SELF Occupation FARMER

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1200.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 14 / 2022

Transaction ID : **A3AC80FD9CC234EEB95F**

Amount of Each Receipt this Period  
1200.00

Memo Item

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

Mailing Address 499 S CAPITOL ST SW

City WASHINGTON State DC Zip Code 20003-4013

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

Name of Employer N/A Occupation N/A

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 21 / 2022

Transaction ID : **AFE87E0486CB4437FB4F**

Amount of Each Receipt this Period  
5.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 2205.00

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



# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 OF 74  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

**A.** Full Name (Last, First, Middle Initial)  
**MOSES, ROBERT, E, ,**

Mailing Address 457 DELAWARE ST SW

City LONSDALE State MN Zip Code 55046-9660

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
375.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 27 / 2022

Transaction ID : **AB0BCD875842C4573848**

Amount of Each Receipt this Period  
25.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**BARES, KEITH, , ,**

Mailing Address 520 INDIAN MOUND ST  
APT 1A

City WAYZATA State MN Zip Code 55391-3700

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

Name of Employer CC MANAGEMENT, LLC Occupation INVESTMENT MANAGEMENT

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 16 / 2022

Transaction ID : **A8ED00BFEDAB54BC9BB7**

Amount of Each Receipt this Period  
250.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**KATZ, HEIDI, , ,**

Mailing Address 13377 SUNNYSLOPE PL

City MOORPARK State CA Zip Code 93021-3022

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

Name of Employer AMGEN Occupation SR EXEC ASSOC

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1350.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 09 / 2022

Transaction ID : **A4FD8EC9F19D84B62B17**

Amount of Each Receipt this Period  
1000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1275.00

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

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 OF 74  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

**A.** Full Name (Last, First, Middle Initial)  
**MONTGOMERY, WALTER, , ,**

Mailing Address 15498 N 176TH LN

City SURPRISE State AZ Zip Code 85388-1789

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
216.17

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 15 / 2022

Transaction ID : **AC4BA54A9508642F284E**

Amount of Each Receipt this Period  
2.00

Memo Item  
EARMARKED (NON-DIRECTED) THROUGH WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

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

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
73675.82

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 15 / 2022

Transaction ID : **A54DC1EB577F04319921**

Amount of Each Receipt this Period  
2.00

Memo Item  
INTERMEDIARY  
TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

**C.** Full Name (Last, First, Middle Initial)  
**SCHWAB, CHUCK, , ,**

Mailing Address PO BOX 2226

City PALM BEACH State FL Zip Code 33480-2226

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

Name of Employer CHARLES SCHWAB CORPORATION Occupation CHAIRMAN

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5800.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 01 / 2022

Transaction ID : **A020817937D6F4A12A0E**

Amount of Each Receipt this Period  
- 2900.00

Memo Item  
REDESIGNATION FROM

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2.00

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

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 OF 74  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

**A.** Full Name (Last, First, Middle Initial)  
**SCHWAB, CHUCK, , ,**

Mailing Address PO BOX 2226

City PALM BEACH State FL Zip Code 33480-2226

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

Name of Employer CHARLES SCHWAB CORPORATION Occupation CHAIRMAN

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5800.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 01 / 2022

Transaction ID : **A8CFE1AC10D85429286B**

Amount of Each Receipt this Period  
2900.00

Memo Item  
REDESIGNATION TO

**B.** Full Name (Last, First, Middle Initial)  
**SCHWAB, CHUCK, , ,**

Mailing Address PO BOX 2226

City PALM BEACH State FL Zip Code 33480-2226

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

Name of Employer CHARLES SCHWAB CORPORATION Occupation CHAIRMAN

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5800.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 01 / 2022

Transaction ID : **AC2881FC6B62148AFB66**

Amount of Each Receipt this Period  
5800.00

Memo Item  
EARMARKED (NON-DIRECTED) THROUGH WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

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

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
73675.82

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 01 / 2022

Transaction ID : **A773E8DA9042344B3992**

Amount of Each Receipt this Period  
5800.00

Memo Item  
INTERMEDIARY  
TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

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

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

5800.00

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

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

FOR LINE NUMBER: PAGE 12 OF 74  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

**A.** Full Name (Last, First, Middle Initial)  
**UIHLEIN, ELIZABETH, A, ,**  
 Mailing Address 1396 WAUKEGAN ROAD  
 City LAKE FOREST State IL Zip Code 60045-1147  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ULINE Occupation CEO  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 5800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 14 / 2022  
**Transaction ID : A7FB7E50E5B784920981**  
 Amount of Each Receipt this Period  
 5800.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**UIHLEIN, ELIZABETH, A, ,**  
 Mailing Address 1396 WAUKEGAN ROAD  
 City LAKE FOREST State IL Zip Code 60045-1147  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ULINE Occupation CEO  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 5800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 14 / 2022  
**Transaction ID : ACC089E6947BB4511A47**  
 Amount of Each Receipt this Period  
 - 2900.00  
 Memo Item  
 REDESIGNATION FROM

**C.** Full Name (Last, First, Middle Initial)  
**UIHLEIN, ELIZABETH, A, ,**  
 Mailing Address 1396 WAUKEGAN ROAD  
 City LAKE FOREST State IL Zip Code 60045-1147  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ULINE Occupation CEO  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 5800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 14 / 2022  
**Transaction ID : ABD2D17DBF22840A2869**  
 Amount of Each Receipt this Period  
 2900.00  
 Memo Item  
 REDESIGNATION TO

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

5800.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 13 OF 74	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

**A.** Full Name (Last, First, Middle Initial)  
**SMITH, DANIEL, , ,**

Mailing Address **7 WOODBINE RD**

City <b>FLORHAM PARK</b>	State <b>NJ</b>	Zip Code <b>07932-2649</b>
-----------------------------	--------------------	-------------------------------

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

Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>
------------------------------------	------------------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**353.58**

Date of Receipt  

M M / D D / Y Y Y Y Y Y
01 / 25 / 2022

**Transaction ID : A6A5A1B1FD2B94BE7819**

Amount of Each Receipt this Period  

25.00
-------

Memo Item  
**EARMARKED (NON-DIRECTED) THROUGH WINRED**

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

Mailing Address **PO BOX 9891**

City <b>ARLINGTON</b>	State <b>VA</b>	Zip Code <b>22219-1891</b>
--------------------------	--------------------	-------------------------------

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

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

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**73675.82**

Date of Receipt  

M M / D D / Y Y Y Y Y Y
01 / 25 / 2022

**Transaction ID : AD67A368A05834303AA4**

Amount of Each Receipt this Period  

25.00
-------

Memo Item  
**INTERMEDIARY**

**TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.**

**C.** Full Name (Last, First, Middle Initial)  
**MONTGOMERY, WALTER, , ,**

Mailing Address **15498 N 176TH LN**

City <b>SURPRISE</b>	State <b>AZ</b>	Zip Code <b>85388-1789</b>
-------------------------	--------------------	-------------------------------

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

Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>
------------------------------------	------------------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**217.84**

Date of Receipt  

M M / D D / Y Y Y Y Y Y
02 / 12 / 2022

**Transaction ID : AF6882902725F4D559CE**

Amount of Each Receipt this Period  

1.67
------

Memo Item  
**EARMARKED (NON-DIRECTED) THROUGH WINRED**

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

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

26.67
-------

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 14 OF 74	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219-1891
-------------------	-------------	------------------------

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

Name of Employer	Occupation

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
73675.82

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 12 / 2022

**Transaction ID : AC186DE6AE9674D9E8D3**

Amount of Each Receipt this Period  
1.67

Memo Item  
INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

**B.** Full Name (Last, First, Middle Initial)  
**SMITH, DANIEL, , ,**

Mailing Address 7 WOODBINE RD

City FLORHAM PARK	State NJ	Zip Code 07932-2649
----------------------	-------------	------------------------

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

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

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
378.58

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 25 / 2022

**Transaction ID : A1F747D93BC42435FB92**

Amount of Each Receipt this Period  
25.00

Memo Item  
EARMARKED (NON-DIRECTED) THROUGH WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219-1891
-------------------	-------------	------------------------

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

Name of Employer	Occupation

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
73675.82

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 25 / 2022

**Transaction ID : A9DBA52EB8AFE4AED92A**

Amount of Each Receipt this Period  
25.00

Memo Item  
INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

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

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

25.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 OF 74  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

**A.** Full Name (Last, First, Middle Initial)  
**SMITH, DANIEL, , ,**

Mailing Address 7 WOODBINE RD

City FLORHAM PARK State NJ Zip Code 07932-2649

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
403.58

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 25 / 2022

Transaction ID : AFC38AAA04DB44EE5986

Amount of Each Receipt this Period  
25.00

Memo Item  
EARMARKED (NON-DIRECTED) THROUGH WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

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

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
73675.82

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 25 / 2022

Transaction ID : A200E8EF3E3D742468F2

Amount of Each Receipt this Period  
25.00

Memo Item  
INTERMEDIARY  
TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

**C.** Full Name (Last, First, Middle Initial)  
**PEHLER, KENT, , ,**

Mailing Address 25518 PELICAN LN

City WINONA State MN Zip Code 55987-5783

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
325.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 08 / 2022

Transaction ID : A92B5CD87E8A744FAAB4

Amount of Each Receipt this Period  
50.00

Memo Item  
EARMARKED (NON-DIRECTED) THROUGH WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 75.00

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

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 OF 74  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

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

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
73675.82

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 08 / 2022

**Transaction ID : ACF7743CA127A4F30AD9**

Amount of Each Receipt this Period  
50.00

Memo Item  
INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

**B.** Full Name (Last, First, Middle Initial)  
**MONTGOMERY, WALTER, , ,**

Mailing Address 15498 N 176TH LN

City SURPRISE State AZ Zip Code 85388-1789

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
242.84

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 14 / 2022

**Transaction ID : ACD6740E0AF8B47B6AE4**

Amount of Each Receipt this Period  
25.00

Memo Item  
EARMARKED (NON-DIRECTED) THROUGH WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

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

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
73675.82

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 14 / 2022

**Transaction ID : AE959A898BAA0455AA58**

Amount of Each Receipt this Period  
25.00

Memo Item  
INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

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

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

25.00

20883.67



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 17 OF 74	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

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

Mailing Address 4615 N LEWIS AVE

City SIOUX FALLS	State SD	Zip Code 57104-7116
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00450692

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

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 11 / 2022

**Transaction ID : AB76E060F694A446CBA2**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**AUSTIN SCOTT FOR CONGRESS INC**

Mailing Address PO BOX 2530

City TIFTON	State GA	Zip Code 31793-2530
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00482737

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

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 21 / 2022

**Transaction ID : AB734F02E04FE449F9E0**

Amount of Each Receipt this Period  
2000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**BIG IDEAS CREATE EXCELLENCE - BICE PAC**

Mailing Address PO BOX 21315

City OKLAHOMA CITY	State OK	Zip Code 73156-1315
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00765644

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

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 10 / 2022

**Transaction ID : AD8DC5F14106548F0BED**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	8000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 18 OF 74  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL STONE, SAND & GRAVEL ASSOCIATION ROCKPAC**

Mailing Address 66 CANAL CENTER PLZ  
STE 300

City ALEXANDRIA State VA Zip Code 22314-1576

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

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2022

Transaction ID : **A4686A3D3B71F4B6C88E**

Amount of Each Receipt this Period  
 1000.00

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	9000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 74
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

**A.** Full Name (Last, First, Middle Initial)  
**TAKE BACK THE HOUSE 2022**

Mailing Address PO BOX 30844

City BETHESDA	State MD	Zip Code 20824-0844
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00766782

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

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
153904.72

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2022

**Transaction ID : A20F1A5F18A554005A0E**

Amount of Each Receipt this Period  
 3701.64

Memo Item  
 TRANSFER FROM AUTHORIZED COMMITTEE

**B.** Full Name (Last, First, Middle Initial)  
**TAKE BACK THE HOUSE 2022**

Mailing Address PO BOX 30844

City BETHESDA	State MD	Zip Code 20824-0844
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00766782

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

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
153904.72

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2022

**Transaction ID : AE87A44F8FC524565BE0**

Amount of Each Receipt this Period  
 2321.54

Memo Item  
 TRANSFER FROM AUTHORIZED COMMITTEE

**C.** Full Name (Last, First, Middle Initial)  
**SINQUEFIELD, JEANNE, C, ,**

Mailing Address 1007 BRYAN POND CT

City MC LEAN	State VA	Zip Code 22102-1124
-----------------	-------------	------------------------

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

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

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2900.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 01 / 2022

**Transaction ID : AD9C2FDE090B147A884B**

Amount of Each Receipt this Period  
 2900.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	6023.18
<b>TOTAL</b> This Period (last page this line number only)..... ▶	6023.18

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 74	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. FIRCHAU, LON, E, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2022	
Mailing Address 125 FALCON DR			FEC Identification Number C	
City MANKATO	State MN	Zip Code 56001-6700	Amount of Each Disbursement this Period 7228.00	
Purpose of Disbursement CAMPAIGN CONSULTING		Category/ Type 001	Transaction ID : B963BF5C6EB244009B2C	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. LMH CONSULTING SERVICES, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2022	
Mailing Address 756 ODAY DRIVE			FEC Identification Number C	
City JORDAN	State MN	Zip Code 55352-9610	Amount of Each Disbursement this Period 3749.07	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001	Transaction ID : B1068CE8CDF934ADA95F	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. SHANNA WOODBURY CONSULTING, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2022	
Mailing Address P. O. BOX 120697			FEC Identification Number C	
City SAINT PAUL	State MN	Zip Code 55112-0022	Amount of Each Disbursement this Period 3749.07	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001	Transaction ID : BF603F8CA28F94F9CA48	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	14726.14
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 21 OF 74	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. FEDEX</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2022	
Mailing Address 7900 LEGACY DR			FEC Identification Number C	
City PLANO	State TX	Zip Code 75024-4089	Amount of Each Disbursement this Period 21.73	
Purpose of Disbursement POSTAGE		Category/ Type 001	Transaction ID : B95BA479266DA4D398C3	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. CHAIN BRIDGE BANK</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2022	
Mailing Address 1445A LAUGHLIN AVENUE			FEC Identification Number C	
City MC LEAN	State VA	Zip Code 22101-5709	Amount of Each Disbursement this Period 25.00	
Purpose of Disbursement BANK FEES		Category/ Type 001	Transaction ID : BF0D33D2DFD7B46F5883	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. USPS</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2022	
Mailing Address 401 S 2ND ST STE 130			FEC Identification Number C	
City MANKATO	State MN	Zip Code 56001-3791	Amount of Each Disbursement this Period 150.00	
Purpose of Disbursement POSTAGE		Category/ Type 001	Transaction ID : B80CB688E4BD242198AC	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	196.73
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 74	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. 9SEVEN CONSULTING</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2022
Mailing Address 499 SOUTH CAPITOL STREET SW #405		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003-4018
Purpose of Disbursement COMPLIANCE CONSULTING	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 2190.90	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022	Transaction ID : B1718AE9F995047D7A59
	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="checkbox"/> Memo Item
	<input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. BERKE FARAH LLP</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2022
Mailing Address 1200 NEW HAMPSHIRE AVE. NW, SUITE 800		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20036-6805
Purpose of Disbursement LEGAL FEES	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 225.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022	Transaction ID : B4AA6BCCAE6054B22B9B
	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="checkbox"/> Memo Item
	<input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CHAIN BRIDGE BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2022
Mailing Address 1445A LAUGHLIN AVENUE		FEC Identification Number C
City MC LEAN	State VA	Zip Code 22101-5709
Purpose of Disbursement BANK FEES	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 25.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022	Transaction ID : B550A21727D724709BCD
	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="checkbox"/> Memo Item
	<input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2440.90
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 74	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement MM / DD / YYYY 01 / 05 / 2022
Mailing Address 1776 WILSON BLVD, SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22209-2517
Purpose of Disbursement CREDIT CARD FEES	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 63.89	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : B3F0024E7289842FFA03 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. FIRCHAU, LON, E, ,</b>		Date of Disbursement MM / DD / YYYY 01 / 07 / 2022
Mailing Address 125 FALCON DR		FEC Identification Number C
City MANKATO	State MN	Zip Code 56001-6700
Purpose of Disbursement CAMPAIGN CONSULTING	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 2500.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : B39990840C7394B9DA96 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. VERIZON WIRELESS</b>		Date of Disbursement MM / DD / YYYY 01 / 10 / 2022
Mailing Address PO BOX 4002		FEC Identification Number C
City ACWORTH	State GA	Zip Code 30101-9003
Purpose of Disbursement TELEPHONE SERVICES	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 132.06	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : BCDE12FDD4FB743268A9 <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2695.95
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 74	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2022	
Mailing Address 1776 WILSON BLVD, SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22209-2517	Amount of Each Disbursement this Period 51.67	
Purpose of Disbursement CREDIT CARD FEES		Category/ Type 001	Transaction ID : BB33409324AA84DCDA92	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. AWSUMB, GORDAN, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2022	
Mailing Address 1207 RIVER DR			FEC Identification Number C	
City RIVER FALLS	State WI	Zip Code 54022-5748	Amount of Each Disbursement this Period 466.67	
Purpose of Disbursement REFUND OF CONTRIBUTIONS		Category/ Type	Transaction ID : BA380A812D88E4644A52	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. AWSUMB, GORDAN, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2022	
Mailing Address 1207 RIVER DR			FEC Identification Number C	
City RIVER FALLS	State WI	Zip Code 54022-5748	Amount of Each Disbursement this Period 466.67	
Purpose of Disbursement REFUND OF CONTRIBUTIONS		Category/ Type	Transaction ID : B85067AA77A864097869	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	985.01
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 74	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. AWSUMB, GORDAN, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2022	
Mailing Address 1207 RIVER DR			FEC Identification Number C	
City RIVER FALLS	State WI	Zip Code 54022-5748	Amount of Each Disbursement this Period 466.67	
Purpose of Disbursement REFUND OF CONTRIBUTIONS		Category/ Type	Transaction ID : B159F8FB1D1934003854	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. AWSUMB, GORDAN, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2022	
Mailing Address 1207 RIVER DR			FEC Identification Number C	
City RIVER FALLS	State WI	Zip Code 54022-5748	Amount of Each Disbursement this Period 466.67	
Purpose of Disbursement REFUND OF CONTRIBUTIONS		Category/ Type	Transaction ID : B8E6BDF7B46249BE9AC	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. AWSUMB, GORDAN, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2022	
Mailing Address 1207 RIVER DR			FEC Identification Number C	
City RIVER FALLS	State WI	Zip Code 54022-5748	Amount of Each Disbursement this Period 466.67	
Purpose of Disbursement REFUND OF CONTRIBUTIONS		Category/ Type	Transaction ID : B9D79B19530FF441EB1E	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1400.01
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 74	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. AWSUMB, GORDON, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2022	
Mailing Address 1207 RIVER DR			FEC Identification Number C	
City RIVER FALLS	State WI	Zip Code 54022-5748	Amount of Each Disbursement this Period 466.67	
Purpose of Disbursement REFUND OF CONTRIBUTIONS		Category/ Type	Transaction ID : B2F5427D23B20426EB70	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. FEDEX</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 19 / 2022	
Mailing Address 7900 LEGACY DR			FEC Identification Number C	
City PLANO	State TX	Zip Code 75024-4089	Amount of Each Disbursement this Period 27.92	
Purpose of Disbursement POSTAGE		Category/ Type 001	Transaction ID : BCEC600BE45F544EFBE8	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. ADOBE</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 19 / 2022	
Mailing Address 345 PARK AVE			FEC Identification Number C	
City SAN JOSE	State CA	Zip Code 95110-2704	Amount of Each Disbursement this Period 16.17	
Purpose of Disbursement SOFTWARE SUBSCRIPTION		Category/ Type 001	Transaction ID : B17C143ADBCAA4542B4B	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	510.76
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 74	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. FIRCHAU, LON, E, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2022	
Mailing Address 125 FALCON DR			FEC Identification Number C	
City MANKATO	State MN	Zip Code 56001-6700	Amount of Each Disbursement this Period 2500.00	
Purpose of Disbursement CAMPAIGN CONSULTING		Category/ Type 001	Transaction ID : BC2D527E57B9F4FB7BAC	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. CHAIN BRIDGE BANK</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2022	
Mailing Address 1445A LAUGHLIN AVENUE			FEC Identification Number C	
City MC LEAN	State VA	Zip Code 22101-5709	Amount of Each Disbursement this Period 25.00	
Purpose of Disbursement BANK FEES		Category/ Type 001	Transaction ID : B33E4021F067A447F844	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. ARISTOTLE INTERNATIONAL</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2022	
Mailing Address 205 PENNSYLVANIA AVE SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003-1164	Amount of Each Disbursement this Period 600.00	
Purpose of Disbursement DATABASE		Category/ Type 001	Transaction ID : B6CC95A8DFA8E4CF78A4	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3125.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 74			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. MAILCHIMP</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2022
Mailing Address 675 PONCE DE LEON AVE NE 5000		FEC Identification Number C
City ATLANTA	State GA	Zip Code 30308-1884
Purpose of Disbursement EMAILS	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 310.47	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : B23D06613A30F492494A <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. CONSTANT CONTACT</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2022
Mailing Address 1601 TRAPELO RD		FEC Identification Number C
City WALTHAM	State MA	Zip Code 02451-7333
Purpose of Disbursement EMAILS	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 195.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : BED30036E4F4749D7A49 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. TWELVE OAKS</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2022
Mailing Address 2776 S. ARLINGTON MILL DRIVE # 161		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22206-3402
Purpose of Disbursement FUNDRAISING CONSULTING	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 7318.77	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : B3728090EC7904243BD8 <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	7824.24
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 74			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. CHAIN BRIDGE BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2022
Mailing Address 1445A LAUGHLIN AVENUE		FEC Identification Number C
City MC LEAN	State VA	Zip Code 22101-5709
Purpose of Disbursement BANK FEES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 25.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B9099FE74372F4ADE920
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. PINNACLE DIRECT</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2022
Mailing Address 15260 113TH ST N		FEC Identification Number C
City STILLWATER	State MN	Zip Code 55082-9575
Purpose of Disbursement DIRECT MAILING	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 1226.87
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B5F364ECDF23D4E6FBD6
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. CHAIN BRIDGE BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2022
Mailing Address 1445A LAUGHLIN AVENUE		FEC Identification Number C
City MC LEAN	State VA	Zip Code 22101-5709
Purpose of Disbursement BANK FEES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 25.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BD1FF752B4ED14D54931
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1276.87
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 30 OF 74	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2022	
Mailing Address 1776 WILSON BLVD, SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22209-2517	Amount of Each Disbursement this Period 136.24	
Purpose of Disbursement CREDIT CARD FEES		Category/ Type 001	Transaction ID : B87909B18AA9C45E9874	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2022	
Mailing Address 1776 WILSON BLVD, SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22209-2517	Amount of Each Disbursement this Period 22.18	
Purpose of Disbursement CREDIT CARD FEES		Category/ Type 001	Transaction ID : B24299C042CCC49819E9	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. ANEDOT</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2022	
Mailing Address 5555 HILTON AVE STE 106			FEC Identification Number C	
City BATON ROUGE	State LA	Zip Code 70808-2597	Amount of Each Disbursement this Period 95.45	
Purpose of Disbursement CREDIT CARD FEES		Category/ Type 001	Transaction ID : B3899A7596D134982B4C	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	253.87
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 74			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. SHANNA WOODBURY CONSULTING, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2022		
Mailing Address P. O. BOX 120697			FEC Identification Number C		
City SAINT PAUL	State MN	Zip Code 55112-0022	Amount of Each Disbursement this Period 3237.01		
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001	Transaction ID : B339BDDDFDFDF94B5B95D		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. CHAIN BRIDGE BANK</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2022		
Mailing Address 1445A LAUGHLIN AVENUE			FEC Identification Number C		
City MC LEAN	State VA	Zip Code 22101-5709	Amount of Each Disbursement this Period 25.00		
Purpose of Disbursement BANK FEES		Category/ Type 001	Transaction ID : B7ADE1645E08E480D87E		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. LMH CONSULTING SERVICES, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2022		
Mailing Address 756 ODAY DRIVE			FEC Identification Number C		
City JORDAN	State MN	Zip Code 55352-9610	Amount of Each Disbursement this Period 3237.01		
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001	Transaction ID : B5E966DF9A7F94E1D897		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6499.02
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 74	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. CAPITOL HILL CLUB</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2022	
Mailing Address 300 1ST ST SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003-1801	Amount of Each Disbursement this Period 3728.80	
Purpose of Disbursement FOOD AND BEVERAGE		Category/ Type 001	Transaction ID : B2E68BA160E2D447AB8C	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2022	
Mailing Address 1776 WILSON BLVD, SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22209-2517	Amount of Each Disbursement this Period 49.85	
Purpose of Disbursement CREDIT CARD FEES		Category/ Type 001	Transaction ID : BDED0D0EAAB38486F95F	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. PARAGON PRINTING, MAILING AND SPECIALTIES</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2022	
Mailing Address 400 POPLAR STREET			FEC Identification Number C	
City MANKATO	State MN	Zip Code 56001-2313	Amount of Each Disbursement this Period 233.93	
Purpose of Disbursement PRINTING		Category/ Type 001	Transaction ID : B5FFF254BA72C46BCAA8	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4012.58
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 33 OF 74	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. BEST BUY</b>		Date of Disbursement MM / DD / YYYY 02 / 07 / 2022
Mailing Address 1895 ADAMS ST		FEC Identification Number C
City MANKATO	State MN	Zip Code 56001
Purpose of Disbursement OFFICE SUPPLIES	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 243.09
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B4B622B76BBF347F88AD
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. FIRCHAU, LON, E, ,</b>		Date of Disbursement MM / DD / YYYY 02 / 07 / 2022
Mailing Address 125 FALCON DR		FEC Identification Number C
City MANKATO	State MN	Zip Code 56001-6700
Purpose of Disbursement CAMPAIGN CONSULTING	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 2500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B4633507B0B364C6EB6C
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. 9SEVEN CONSULTING</b>		Date of Disbursement MM / DD / YYYY 02 / 07 / 2022
Mailing Address 499 SOUTH CAPITOL STREET SW #405		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003-4018
Purpose of Disbursement COMPLIANCE CONSULTING	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 2151.50
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B004257A8B85E40159BC
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4894.59
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 74			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2022		
Mailing Address 1776 WILSON BLVD, SUITE 530			FEC Identification Number C		
City ARLINGTON	State VA	Zip Code 22209-2517	Amount of Each Disbursement this Period 48.13		
Purpose of Disbursement CREDIT CARD FEES		Category/ Type 001	Transaction ID : BF0764787935A4E70BE4		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. ANEDOT</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2022		
Mailing Address 5555 HILTON AVE STE 106			FEC Identification Number C		
City BATON ROUGE	State LA	Zip Code 70808-2597	Amount of Each Disbursement this Period 136.35		
Purpose of Disbursement CREDIT CARD FEES		Category/ Type 001	Transaction ID : B265277C42B3744828A5		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. CHAIN BRIDGE BANK</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2022		
Mailing Address 1445A LAUGHLIN AVENUE			FEC Identification Number C		
City MC LEAN	State VA	Zip Code 22101-5709	Amount of Each Disbursement this Period 25.00		
Purpose of Disbursement BANK FEES		Category/ Type 001	Transaction ID : B8504812B343D4EF8985		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	209.48
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 74			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. RED ROCK STRATEGIES</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2022		
Mailing Address 9500 W. FLAMINGO RD. #203			FEC Identification Number C		
City LAS VEGAS	State NV	Zip Code 89147	Amount of Each Disbursement this Period 10186.76		
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001	Transaction ID : B999C7776E9E54EB7AFE		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. CAPITOL HILL CLUB</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2022		
Mailing Address 300 1ST ST SE			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20003-1801	Amount of Each Disbursement this Period 450.00		
Purpose of Disbursement FOOD AND BEVERAGE		Category/ Type 001	Transaction ID : B50A1BB5D6DEB408CBEO		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2022		
Mailing Address 1776 WILSON BLVD, SUITE 530			FEC Identification Number C		
City ARLINGTON	State VA	Zip Code 22209-2517	Amount of Each Disbursement this Period 31.78		
Purpose of Disbursement CREDIT CARD FEES		Category/ Type 001	Transaction ID : B264CD44F84184EE3932		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	10668.54
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 74			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. COMMUNITY BANK</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2022		
Mailing Address 951 MADISON AVE			FEC Identification Number C		
City MANKATO	State MN	Zip Code 56001-6141	Amount of Each Disbursement this Period 25.00		
Purpose of Disbursement BANK CHARGES		Category/ Type 001	Transaction ID : BFE24059E7B7D42588ED		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. ADOBE</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2022		
Mailing Address 345 PARK AVE			FEC Identification Number C		
City SAN JOSE	State CA	Zip Code 95110-2704	Amount of Each Disbursement this Period 16.17		
Purpose of Disbursement SOFTWARE SUBSCRIPTION		Category/ Type 001	Transaction ID : B54CAA235EC6D44F285E		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. MAILCHIMP</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2022		
Mailing Address 675 PONCE DE LEON AVE NE 5000			FEC Identification Number C		
City ATLANTA	State GA	Zip Code 30308-1884	Amount of Each Disbursement this Period 369.90		
Purpose of Disbursement EMAILS		Category/ Type 001	Transaction ID : B4610236CBCC74AE78F5		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	411.07
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 74			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. ARISTOTLE INTERNATIONAL</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2022
Mailing Address 205 PENNSYLVANIA AVE SE			FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003-1164	Amount of Each Disbursement this Period 600.00
Purpose of Disbursement DATABASE		Category/Type 001	Transaction ID : B267B2A74E6FB4ADABDE
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2022
Mailing Address 1776 WILSON BLVD, SUITE 530			FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22209-2517	Amount of Each Disbursement this Period 26.85
Purpose of Disbursement CREDIT CARD FEES		Category/Type 001	Transaction ID : BD581C72845CB4035B38
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. CONSTANT CONTACT</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2022
Mailing Address 1601 TRAPELO RD			FEC Identification Number C
City WALTHAM	State MA	Zip Code 02451-7333	Amount of Each Disbursement this Period 195.00
Purpose of Disbursement EMAILS		Category/Type 001	Transaction ID : BB5F1732342A146D9A80
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	821.85
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 38 OF 74	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. SHANNA WOODBURY CONSULTING, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2022	
Mailing Address P. O. BOX 120697			FEC Identification Number C	
City SAINT PAUL	State MN	Zip Code 55112-0022	Amount of Each Disbursement this Period 2750.00	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001	Transaction ID : BE18A6EBF5BCD4F7ABE0	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. LMH CONSULTING SERVICES, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2022	
Mailing Address 756 ODAY DRIVE			FEC Identification Number C	
City JORDAN	State MN	Zip Code 55352-9610	Amount of Each Disbursement this Period 2750.00	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001	Transaction ID : B9D963BB0B44C4551BBB	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. CHAIN BRIDGE BANK</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2022	
Mailing Address 1445A LAUGHLIN AVENUE			FEC Identification Number C	
City MC LEAN	State VA	Zip Code 22101-5709	Amount of Each Disbursement this Period 25.00	
Purpose of Disbursement BANK FEES		Category/ Type 001	Transaction ID : BAEFEFA81A77B482ABE1	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5525.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 74			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. FIRCHAU, LON, E, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2022		
Mailing Address 125 FALCON DR			FEC Identification Number C		
City MANKATO	State MN	Zip Code 56001-6700	Amount of Each Disbursement this Period 2500.00		
Purpose of Disbursement CAMPAIGN CONSULTING		Category/ Type 001	Transaction ID : B5D7D7F1E79A543BAB9E		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. BERKE FARAH LLP</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2022		
Mailing Address 1200 NEW HAMPSHIRE AVE. NW, SUITE 800			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20036-6805	Amount of Each Disbursement this Period 975.00		
Purpose of Disbursement LEGAL FEES		Category/ Type 001	Transaction ID : B42963FD197C541C0A55		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. CHAIN BRIDGE BANK</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2022		
Mailing Address 1445A LAUGHLIN AVENUE			FEC Identification Number C		
City MC LEAN	State VA	Zip Code 22101-5709	Amount of Each Disbursement this Period 25.00		
Purpose of Disbursement BANK FEES		Category/ Type 001	Transaction ID : B9C473C861DA243208F6		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 74	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. 9SEVEN CONSULTING</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2022
Mailing Address 499 SOUTH CAPITOL STREET SW #405		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003-4018
Purpose of Disbursement COMPLIANCE CONSULTING	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 2145.95
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B3EC9B1D47C354FF0A5E
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. RED ROCK STRATEGIES</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2022
Mailing Address 9500 W. FLAMINGO RD. #203		FEC Identification Number C
City LAS VEGAS	State NV	Zip Code 89147
Purpose of Disbursement FUNDRAISING CONSULTING	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 10186.76
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BB639AB86FCF543A1B4E
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. CHAIN BRIDGE BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2022
Mailing Address 1445A LAUGHLIN AVENUE		FEC Identification Number C
City MC LEAN	State VA	Zip Code 22101-5709
Purpose of Disbursement BANK FEES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 25.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BF18C8AA01BA84EEA827
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	12357.71
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 74			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. FIRCHAU, LON, E, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2022		
Mailing Address 125 FALCON DR			FEC Identification Number C		
City MANKATO	State MN	Zip Code 56001-6700	Amount of Each Disbursement this Period 2500.00		
Purpose of Disbursement CAMPAIGN CONSULTING		Category/ Type 001	Transaction ID : BBF7EB444DB244C18BE5		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. FIRCHAU, LON, E, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 125 FALCON DR			FEC Identification Number C		
City MANKATO	State MN	Zip Code 56001-6700	Amount of Each Disbursement this Period 2929.90		
Purpose of Disbursement CAMPAIGN CONSULTING		Category/ Type 001	Transaction ID : BFFBF75391A84498E94E		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. AARON EBERHART</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2022		
Mailing Address 640 TIMBERWOLF DR APT 204			FEC Identification Number C		
City MANKATO	State MN	Zip Code 56001	Amount of Each Disbursement this Period 600.00		
Purpose of Disbursement MANAGEMENT CONSULTING		Category/ Type 001	Transaction ID : B1E6DCEB8B516479C99D		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6029.90
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 74	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. ARISTOTLE INTERNATIONAL</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2022	
Mailing Address 205 PENNSYLVANIA AVE SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003-1164	Amount of Each Disbursement this Period 600.00	
Purpose of Disbursement DATABASE		Category/ Type 001	Transaction ID : BDCB46A3D4F17436193C	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. MAILCHIMP</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2022	
Mailing Address 675 PONCE DE LEON AVE NE 5000			FEC Identification Number C	
City ATLANTA	State GA	Zip Code 30308-1884	Amount of Each Disbursement this Period 369.90	
Purpose of Disbursement EMAILS		Category/ Type 001	Transaction ID : BC30E0BE2ADAA4FA09CA	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. ADOBE</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2022	
Mailing Address 345 PARK AVE			FEC Identification Number C	
City SAN JOSE	State CA	Zip Code 95110-2704	Amount of Each Disbursement this Period 16.17	
Purpose of Disbursement SOFTWARE SUBSCRIPTION		Category/ Type 001	Transaction ID : B1C9C3E489D97494BB2C	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	986.07
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 74			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. COMMUNITY BANK</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2022		
Mailing Address 951 MADISON AVE			FEC Identification Number C		
City MANKATO	State MN	Zip Code 56001-6141	Amount of Each Disbursement this Period 25.00		
Purpose of Disbursement BANK CHARGES		Category/ Type 001	Transaction ID : B3FC6A331D9F24247B9C		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. CONSTANT CONTACT</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2022		
Mailing Address 1601 TRAPELO RD			FEC Identification Number C		
City WALTHAM	State MA	Zip Code 02451-7333	Amount of Each Disbursement this Period 195.00		
Purpose of Disbursement EMAILS		Category/ Type 001	Transaction ID : BCBF501957651437BBE0		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. TWELVE OAKS</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2022		
Mailing Address 2776 S. ARLINGTON MILL DRIVE # 161			FEC Identification Number C		
City ARLINGTON	State VA	Zip Code 22206-3402	Amount of Each Disbursement this Period 7500.00		
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001	Transaction ID : BDC86FCD884E74781A52		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	7720.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 74	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. CHAIN BRIDGE BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2022
Mailing Address 1445A LAUGHLIN AVENUE		FEC Identification Number C
City MC LEAN	State VA	Zip Code 22101-5709
Purpose of Disbursement BANK FEES	001	
Candidate Name		Amount of Each Disbursement this Period 25.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BDF5A7D62297A4386B9F
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. FIRCHAU, LON, E, ,</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2022
Mailing Address 125 FALCON DR		FEC Identification Number C
City MANKATO	State MN	Zip Code 56001-6700
Purpose of Disbursement CAMPAIGN CONSULTING	001	
Candidate Name		Amount of Each Disbursement this Period 2500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B692E3721C72545AE89B
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2022
Mailing Address 1776 WILSON BLVD, SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22209-2517
Purpose of Disbursement CREDIT CARD FEES	001	
Candidate Name		Amount of Each Disbursement this Period 27.78
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BD4B8BFAD7E014F5EBC7
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2552.78
<b>TOTAL</b> This Period (last page this line number only).....▶	101624.07

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 74			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. UIHLEIN, ELIZABETH, A, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 1396 WAUKEGAN ROAD					
City LAKE FOREST	State IL	Zip Code 60045-1147	FEC Identification Number C		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Amount of Each Disbursement this Period 2900.00		
Candidate Name		Transaction ID : B5F86C6C98C6E4C76814			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item		
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. FRIESE, DONALD, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 20021 NORTHRIDGE RD					
City CHATSWORTH	State CA	Zip Code 91311-1823	FEC Identification Number C		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Amount of Each Disbursement this Period 2900.00		
Candidate Name		Transaction ID : BDC65B28A2C3F4D66ACD			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item		
State:	District:				

Full Name (Last, First, Middle Initial) <b>C. FERTITTA, LORENZO, JOSEPH, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 1505 S PAVILION CENTER DR					
City LAS VEGAS	State NV	Zip Code 89135-1403	FEC Identification Number C		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Amount of Each Disbursement this Period 1582.46		
Candidate Name		Transaction ID : B01572F83E4344E63ACD			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item		
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7382.46
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 74			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. HUBBARD, KAREN H, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 3415 UNIVERSITY AVE W			FEC Identification Number <b>C</b>		
City SAINT PAUL	State MN	Zip Code 55114-1019	Amount of Each Disbursement this Period 2900.00		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : <b>BC60655A9A3864CBAA39</b>		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. MILLER, HUGH, L., ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address PO BOX 30099			FEC Identification Number <b>C</b>		
City WINONA	State MN	Zip Code 55987-1099	Amount of Each Disbursement this Period 2900.00		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : <b>BADEA1E0F25DD49088D2</b>		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. HELGESON, RANDI, J, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 16485 ELLERDALE LN			FEC Identification Number <b>C</b>		
City EDEN PRAIRIE	State MN	Zip Code 55346-1431	Amount of Each Disbursement this Period 2900.00		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : <b>B7652A5A84DE0414DB9E</b>		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	8700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 74			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. MCKEE, BETTY R., , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 9530 GLYNN DOWNING DR					
City OOLTEWAH	State TN	Zip Code 37363-8141	FEC Identification Number C		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Amount of Each Disbursement this Period 2900.00		
Candidate Name		Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	Transaction ID : B33AF1FC8D5A44E53906 <input type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) <b>B. MCNEILUS, BRANDON, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 65742 STATE HIGHWAY 56					
City DODGE CENTER	State MN	Zip Code 55927-7750	FEC Identification Number C		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Amount of Each Disbursement this Period 2100.00		
Candidate Name		Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	Transaction ID : B058D77F6D25B492F93A <input type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) <b>C. MARCUS, BERNARD, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 1266 WEST PACES FERRY ROAD # 615 SUITE 615					
City ATLANTA	State GA	Zip Code 30327-2306	FEC Identification Number C		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Amount of Each Disbursement this Period 2900.00		
Candidate Name		Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	Transaction ID : B30A687A640E64174A86 <input type="checkbox"/> Memo Item			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7900.00
<b>TOTAL</b> This Period (last page this line number only).....	7900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 74			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. LAZZARO, ANTON, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 465 NICOLLET MALL #801			FEC Identification Number <b>C</b>		
City MINNEAPOLIS	State MN	Zip Code 55401-2777	Amount of Each Disbursement this Period 2900.00		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : <b>BF89EE5FA90F04B34BBA</b>		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. AUSTIN, TANI, DRU, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 5563 RUSTIC MANOR DR			FEC Identification Number <b>C</b>		
City BROWNSVILLE	State TX	Zip Code 78526-4209	Amount of Each Disbursement this Period 2900.00		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : <b>B34A655A08AEF4F06A0C</b>		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. SIMMONS, ANNETTE, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 5915 DELOACHE AVE			FEC Identification Number <b>C</b>		
City DALLAS	State TX	Zip Code 75225-3006	Amount of Each Disbursement this Period 2900.00		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : <b>B70FA59AE7CB2477A95C</b>		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	8700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 74			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. GUIDERA, WILLIAM, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2022		
Mailing Address 2325 S WILLOW HILL DR			FEC Identification Number C		
City ORONO	State MN	Zip Code 55356-5000	Amount of Each Disbursement this Period 400.00		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : BB9B235D748444914923		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. RYAN, PATRICK, G, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 150 N MICHIGAN AVE			FEC Identification Number C		
City CHICAGO	State IL	Zip Code 60601-7553	Amount of Each Disbursement this Period 2900.00		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : B83894217382A4669A8B		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. SPEVACEK, CHARLES, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2022		
Mailing Address 643 N. 5TH STREET APT 502			FEC Identification Number C		
City MINNEAPOLIS	State MN	Zip Code 55401-2764	Amount of Each Disbursement this Period 2800.00		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : BD726FDDB4AE5483C957		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 74			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. ALEXANDER, MARY, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 16540 GRAYS BAY BLVD			FEC Identification Number <b>C</b>		
City WAYZATA	State MN	Zip Code 55391-2915	Amount of Each Disbursement this Period 2100.00		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : <b>BAD1B4E2A2920483F981</b>		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. KROLL, LORI, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2022		
Mailing Address PO BOX 23			FEC Identification Number <b>C</b>		
City CRYSTAL BAY	State MN	Zip Code 55323-0023	Amount of Each Disbursement this Period 2900.00		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : <b>BC897FDD5E5234178B98</b>		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. HUBBARD, STANLEY, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 3415 UNIVERSITY AVE			FEC Identification Number <b>C</b>		
City SAINT PAUL	State MN	Zip Code 55114-1019	Amount of Each Disbursement this Period 2900.00		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : <b>B58228D97743C4DDDB2A</b>		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	7900.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 51 OF 74	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. FOSTER, PAUL L., , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022	
Mailing Address 123 W MILLS AVE STE 600			FEC Identification Number C	
City EL PASO	State TX	Zip Code 79901-1577	Amount of Each Disbursement this Period 2900.00	
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : BE78D5B3701A24822BAF	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. AUSTIN, WILLIAM, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022	
Mailing Address 5563 RUSTIC MANOR DR			FEC Identification Number C	
City BROWNSVILLE	State TX	Zip Code 78526-4209	Amount of Each Disbursement this Period 2900.00	
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : B26B4EF7BE17941F3A6F	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. WALSER, PAUL, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2022	
Mailing Address 165 GROVE LN E			FEC Identification Number C	
City WAYZATA	State MN	Zip Code 55391-1618	Amount of Each Disbursement this Period 1100.00	
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : B7B21B34420E6491AB52	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6900.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 74			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. ANDERSON, PENNY, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 3054 GORDON DR			FEC Identification Number C		
City NAPLES	State FL	Zip Code 34102-7861	Amount of Each Disbursement this Period 2300.00		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : BB7B50641290641EF97C		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. SWEHLA, MICHAEL, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2022		
Mailing Address 23495 400TH AVE			FEC Identification Number C		
City WINNEBAGO	State MN	Zip Code 56098-3310	Amount of Each Disbursement this Period 100.00		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : BEC7C57CC05294773B36		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. TRAUTZ, JOHN, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 4509 EDINA BLVD			FEC Identification Number C		
City EDINA	State MN	Zip Code 55424-1135	Amount of Each Disbursement this Period 2900.00		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : B266E6846A538416FABF		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 74			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. HILL, LOUIS, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 1315 RED FOX RD STE 200					
City ARDEN HILLS	State MN	Zip Code 55112-6977	FEC Identification Number C		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Amount of Each Disbursement this Period 2900.00		
Candidate Name		Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	Transaction ID : B37B68A7CB00A4F89A91 <input type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) <b>B. ULRICH, ROBERT, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 5400 LONDONDERRY RD					
City EDINA	State MN	Zip Code 55436-1027	FEC Identification Number C		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Amount of Each Disbursement this Period 2900.00		
Candidate Name		Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	Transaction ID : BED20EAABA89445F6AD7 <input type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) <b>C. PALMER, GEOFFREY, H, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 11740 SAN VICENTE BLVD STE 208					
City LOS ANGELES	State CA	Zip Code 90049-6610	FEC Identification Number C		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Amount of Each Disbursement this Period 2900.00		
Candidate Name		Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	Transaction ID : BE0AE95F5EC3B4E6E956 <input type="checkbox"/> Memo Item			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	8700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 54 OF 74	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. KOCH, BARBARA, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022	
Mailing Address 505 HIGHWAY 169 N STE 595			FEC Identification Number C	
City PLYMOUTH	State MN	Zip Code 55441-6447	Amount of Each Disbursement this Period 2900.00	
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : B308058703C89481192D	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. RABOIS, KEITH, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022	
Mailing Address 1429 N VENETIAN WAY			FEC Identification Number C	
City MIAMI BEACH	State FL	Zip Code 33139-1141	Amount of Each Disbursement this Period 2900.00	
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : B2E346CC9DC4E4762B43	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. ANDERSON, ROLLIE, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022	
Mailing Address 3630 PLUM CREEK DRIVE			FEC Identification Number C	
City SAINT CLOUD	State MN	Zip Code 56301-9540	Amount of Each Disbursement this Period 2900.00	
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : B09C0A9C448844DE2A8D	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	8700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 74			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. STEINHAFEL, GREGG, W, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address PO BOX 67			FEC Identification Number C		
City CRYSTAL BAY	State MN	Zip Code 55323-0067	Amount of Each Disbursement this Period 2900.00		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : B7675B549EB4F4E99A5C		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. OREN, BEVERLY, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 3105 SANDY HOOK DRIVE			FEC Identification Number C		
City ROSEVILLE	State MN	Zip Code 55113-2128	Amount of Each Disbursement this Period 2100.00		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : B99995E484849425E9FE		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. ALBRECHT, MARILYN, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 30567 LAKEVIEW AVE			FEC Identification Number C		
City RED WING	State MN	Zip Code 55066-5655	Amount of Each Disbursement this Period 1600.00		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : BB8681E5B172D41E2902		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 74			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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

NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. GRIMM MARSHALL, BARBARA, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022	
Mailing Address 7158 BUENA VISTA RD			FEC Identification Number C	
City BAKERSFIELD	State CA	Zip Code 93311-9425	Amount of Each Disbursement this Period 2900.00	
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : B48C9CB074BCE40449CB	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. YOUNGDAHL, RONALD, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022	
Mailing Address 3825 NORTHOME RD			FEC Identification Number C	
City WAYZATA	State MN	Zip Code 55391-3024	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : B8DBE044B23F647F5B9A	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. BUCKLEY JR., WALTER W., , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022	
Mailing Address 11450 TURTLE BEACH RD			FEC Identification Number C	
City NORTH PALM BEACH	State FL	Zip Code 33408-3343	Amount of Each Disbursement this Period 2900.00	
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : BC9B01A9A1C924DF5ABA	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6800.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 57 OF 74	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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

NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. OREN, DONALD, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022	
Mailing Address 3105 SANDY HOOK DR			FEC Identification Number C	
City ROSEVILLE	State MN	Zip Code 55113-2128	Amount of Each Disbursement this Period 2100.00	
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : B7CDD7BE62CD54F7286E	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. DAVIS, ANNE, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2022	
Mailing Address 31496 CAMBRIA AVE			FEC Identification Number C	
City LE SUEUR	State MN	Zip Code 56058-4528	Amount of Each Disbursement this Period 2900.00	
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : B71677A8BA06945A0A8F	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. SWEHLA, MICHAEL, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2022	
Mailing Address 23495 400TH AVE			FEC Identification Number C	
City WINNEBAGO	State MN	Zip Code 56098-3310	Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : B702D89E4A00D4AB5908	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 74			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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

NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. CAMERON, RONALD, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address PO BOX 21440			FEC Identification Number C		
City LITTLE ROCK	State AR	Zip Code 72221-1440	Amount of Each Disbursement this Period 2900.00		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : B4D3CCE9589934BF9B25		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. PAPENFUSS, GERALD, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 164 EAST 4TH ST			FEC Identification Number C		
City WINONA	State MN	Zip Code 55987-3582	Amount of Each Disbursement this Period 1100.00		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : BB885B82AB07548E0B03		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. PEROT JR., H. R., , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 3000 TURTLE CREEK BLVD			FEC Identification Number C		
City DALLAS	State TX	Zip Code 75219-6268	Amount of Each Disbursement this Period 2900.00		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : BAFFDC8D7D37B4BB0A9D		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6900.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 74			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. DAVIS, MARTIN, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2022		
Mailing Address 31496 CAMBRIA AVE					
City LE SUEUR	State MN	Zip Code 56058-4528	FEC Identification Number C		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		010	Amount of Each Disbursement this Period 2900.00		
Candidate Name		Category/ Type	Transaction ID : B1E589959AEE5496EBC7		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>		
State: District:					

Full Name (Last, First, Middle Initial) <b>B. KING, ANDREA, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 3 RED FOREST HTS					
City SAINT PAUL	State MN	Zip Code 55127-6353	FEC Identification Number C		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		010	Amount of Each Disbursement this Period 2900.00		
Candidate Name		Category/ Type	Transaction ID : BB4C55164FE87459789D		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>		
State: District:					

Full Name (Last, First, Middle Initial) <b>C. PEREZ, WILLIAM, D., ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 81 SEAGATE DR					
City NAPLES	State FL	Zip Code 34103-2482	FEC Identification Number C		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		010	Amount of Each Disbursement this Period 2900.00		
Candidate Name		Category/ Type	Transaction ID : BA7A661F4F493476488E		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>		
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	8700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 60 OF 74	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. SMITH, THOMAS, W., ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022	
Mailing Address 2200 BUTTS RD STE 320			FEC Identification Number <b>C</b>	
City BOCA RATON	State FL	Zip Code 33431-7453	Amount of Each Disbursement this Period 2900.00	
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS			Transaction ID : BA40ED9AF2647463E832	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. FREKING, BRAD, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2022	
Mailing Address 59185 790TH ST			FEC Identification Number <b>C</b>	
City ALPHA	State MN	Zip Code 56111-3009	Amount of Each Disbursement this Period 2900.00	
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS			Transaction ID : BBE3A61BF5D774B3D8CE	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. JOHNSON, CHARLES B., , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022	
Mailing Address 1220 S OCEAN BLVD			FEC Identification Number <b>C</b>	
City PALM BEACH	State FL	Zip Code 33480-5016	Amount of Each Disbursement this Period 2900.00	
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS			Transaction ID : BC86D358E5AEF4FE1BD8	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	8700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 74			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. SMITH, DIANE, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 2200 BUTTS RD STE 320					
City BOCA RATON	State FL	Zip Code 33431-7453	FEC Identification Number C		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		010	Amount of Each Disbursement this Period 408.93		
Candidate Name		Category/ Type	Transaction ID : B84196491932146ADA2B		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>		
State: District:					

Full Name (Last, First, Middle Initial) <b>B. ROSEN, TOM, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 1120 LAKE AVE PO BOX 33					
City FAIRMONT	State MN	Zip Code 56031-0033	FEC Identification Number C		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		010	Amount of Each Disbursement this Period 2900.00		
Candidate Name		Category/ Type	Transaction ID : BC8A930BA94124563963		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>		
State: District:					

Full Name (Last, First, Middle Initial) <b>C. ALLEN, JOHN, N, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2022		
Mailing Address 321 1ST AVE N					
City MINNEAPOLIS	State MN	Zip Code 55401-1609	FEC Identification Number C		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		010	Amount of Each Disbursement this Period 1100.00		
Candidate Name		Category/ Type	Transaction ID : B67D08BF3B6664CC89EC		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>		
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4408.93
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 74			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. KING, RUSSELL, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 3 RED FOREST HTS			FEC Identification Number C		
City SAINT PAUL	State MN	Zip Code 55127-6353	Amount of Each Disbursement this Period 2900.00		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : BE78FEF7468404B2B9C9		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. RIVET, JEANNINE, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 4305 TRILLIUM WAY			FEC Identification Number C		
City MINNETRISTA	State MN	Zip Code 55364-7708	Amount of Each Disbursement this Period 2900.00		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : BD49F8D1554904DA3BCC		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. HUBBARD, ROBERT, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 3415 UNIVERSITY AVE W			FEC Identification Number C		
City SAINT PAUL	State MN	Zip Code 55114-1019	Amount of Each Disbursement this Period 1000.00		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : B631CE818B35A4AAB89F		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6800.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 63 OF 74	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. WYNN, STEPHEN, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022	
Mailing Address 2449 N TENAYA WAY UNIT 35290			FEC Identification Number C	
City LAS VEGAS	State NV	Zip Code 89133-8093	Amount of Each Disbursement this Period 2900.00	
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : BEB3CC77DABFD414F82D	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. FRANSEN, DENNIS, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022	
Mailing Address 5481 SAINT CROIX TRL STE 200			FEC Identification Number C	
City NORTH BRANCH	State MN	Zip Code 55056-6130	Amount of Each Disbursement this Period 2900.00	
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : BE45CA3682AD74A04AAD	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. KROLL, MARK, W., ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2022	
Mailing Address BOX 23			FEC Identification Number C	
City CRYSTAL BAY	State MN	Zip Code 55323-0023	Amount of Each Disbursement this Period 2900.00	
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : B638A7B4C2A794AD1BF8	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	8700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 74			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. LINDAU, PHILIP, J., , JR.</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022
Mailing Address 2825 MEDICINE RIDGE RD		FEC Identification Number C
City PLYMOUTH	State MN	Zip Code 55441-3259
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		010
Candidate Name		Amount of Each Disbursement this Period 2100.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B8B4B4B58414E44289B5
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. LUTNICK, HOWARD W., , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022
Mailing Address 499 PARK AVE FL 3		FEC Identification Number C
City NEW YORK	State NY	Zip Code 10022-1286
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		010
Candidate Name		Amount of Each Disbursement this Period 2900.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B41D66948D19C4138B55
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. MARCUS, BILLI, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022
Mailing Address 1266 WEST PACES FERRY ROAD SUITE 615		FEC Identification Number C
City ATLANTA	State GA	Zip Code 30327-2306
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		010
Candidate Name		Amount of Each Disbursement this Period 2900.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BAFF75066B8FE4677886
State: District:		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	7900.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 65 OF 74	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. UIHLEIN, RICHARD, E, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022	
Mailing Address 1396 WAUKEGAN ROAD			FEC Identification Number C	
City LAKE FOREST	State IL	Zip Code 60045-1147	Amount of Each Disbursement this Period 2900.00	
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : <b>BB60B6AE25FFF4A5E90F</b>	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. BURWELL, PETER, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022	
Mailing Address 2940 FOX ST			FEC Identification Number C	
City LONG LAKE	State MN	Zip Code 55356-9384	Amount of Each Disbursement this Period 2900.00	
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : <b>B20242E2E74214AECB6B</b>	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. SEATON, DOUGLAS, P, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022	
Mailing Address 1241 GULF OF MEXICO DR			FEC Identification Number C	
City LONGBOAT KEY	State FL	Zip Code 34228-3690	Amount of Each Disbursement this Period 600.00	
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : <b>B08154FB5F27E40B3A00</b>	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 74			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. SMITH, LANDON, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 530 S FRONT ST STE 100					
City MANKATO	State MN	Zip Code 56001-3850	FEC Identification Number C		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		010	Amount of Each Disbursement this Period 2900.00		
Candidate Name		Category/ Type	Transaction ID : BB1F7EFCDD07554CD6AB3		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>		
State: District:					

Full Name (Last, First, Middle Initial) <b>B. MARSHALL, DARCY, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 7158 BUENA VISTA RD					
City BAKERSFIELD	State CA	Zip Code 93311-9425	FEC Identification Number C		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		010	Amount of Each Disbursement this Period 2900.00		
Candidate Name		Category/ Type	Transaction ID : BC594072348144678A7F		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>		
State: District:					

Full Name (Last, First, Middle Initial) <b>C. COTE, JAMES, RANDOLPH, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 7440 SHANNON DR					
City MINNEAPOLIS	State MN	Zip Code 55439-2637	FEC Identification Number C		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		010	Amount of Each Disbursement this Period 1500.00		
Candidate Name		Category/ Type	Transaction ID : B94627364F7A7485F845		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>		
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	7300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 74			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. ALBRECHT, ARLIN, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 30567 LAKEVIEW AVE					
City RED WING	State MN	Zip Code 55066-5655	FEC Identification Number C		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Amount of Each Disbursement this Period 1600.00		
Candidate Name		Transaction ID : B0B21760573AB467EAC0			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. ROOT, HOWARD, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 25 FAIRHOPE AVE					
City EXCELSIOR	State MN	Zip Code 55331-9514	FEC Identification Number C		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Amount of Each Disbursement this Period 2900.00		
Candidate Name		Transaction ID : BFCDE57D807404C2C95B			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State:	District:				

Full Name (Last, First, Middle Initial) <b>C. HAYDE, MICHAEL K., , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 8 EXECUTIVE CIR					
City IRVINE	State CA	Zip Code 92614-6746	FEC Identification Number C		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Amount of Each Disbursement this Period 2900.00		
Candidate Name		Transaction ID : BF28CA4118A77419893F			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7400.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 74			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. ALEXANDER, PATRICK, D., ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 16540 GRAYS BAY BLVD			FEC Identification Number <b>C</b>		
City WAYZATA	State MN	Zip Code 55391-2915	Amount of Each Disbursement this Period 2900.00		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : <b>BA62740462E8D472192B</b>		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. MELLI, ALI, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2022		
Mailing Address 4281 EXPRESS LANE SUITE N9314			FEC Identification Number <b>C</b>		
City SARASOTA	State FL	Zip Code 34249-2602	Amount of Each Disbursement this Period 2900.00		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : <b>BFCABB40913204278B72</b>		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. FRAUENSHUH, SANDRA, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2022		
Mailing Address 6401 INDIAN HILLS RD			FEC Identification Number <b>C</b>		
City MINNEAPOLIS	State MN	Zip Code 55439-1133	Amount of Each Disbursement this Period 4000.00		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : <b>BD3EEFE57CB004E64970</b>		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	9800.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 74			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. CHILDS, JOHN, W, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 165 SAGO PALM RD			FEC Identification Number <b>C</b>		
City VERO BEACH	State FL	Zip Code 32963-3702	Amount of Each Disbursement this Period 2900.00		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : <b>BAA85CB008FB84BE385E</b>		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. SCHWAB, CHUCK, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address PO BOX 2226			FEC Identification Number <b>C</b>		
City PALM BEACH	State FL	Zip Code 33480-2226	Amount of Each Disbursement this Period 2900.00		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : <b>BD1A3E7C2E7E44E8E80D</b>		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. WOLD, ELAINE J., , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 1515 S FEDERAL HWY STE 201			FEC Identification Number <b>C</b>		
City BOCA RATON	State FL	Zip Code 33432-7404	Amount of Each Disbursement this Period 2900.00		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : <b>B8580B92D4A1B4F9895D</b>		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	8700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 74			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. SPEVACEK, CHARLES, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2022		
Mailing Address 643 N. 5TH STREET APT 502					
City MINNEAPOLIS	State MN	Zip Code 55401-2764	FEC Identification Number C		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Amount of Each Disbursement this Period 100.00		
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BDF59A2474CD8494AA50		
State:	District:	<input type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) <b>B. SINQUEFIELD, REX, A, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 1007 BRYAN POND CT					
City MC LEAN	State VA	Zip Code 22102-1124	FEC Identification Number C		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Amount of Each Disbursement this Period 2900.00		
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B335E0E771F744D87B8B		
State:	District:	<input type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) <b>C. ANDERSON, LEE, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 3054 GORDON DRIVE					
City NAPLES	State FL	Zip Code 34102-7861	FEC Identification Number C		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Amount of Each Disbursement this Period 2900.00		
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B596DCFE9C9DAB49ABA0D		
State:	District:	<input type="checkbox"/> Memo Item			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5900.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 74			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. KHOURI, LAURA, A, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 8 EXECUTIVE CIR					
City IRVINE	State CA	Zip Code 92614-6746	FEC Identification Number C		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Amount of Each Disbursement this Period 2900.00		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID : B58565DF86FB74C9CBFE <input type="checkbox"/> Memo Item		
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. LYNCH, PATRICK, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2022		
Mailing Address 1616 BLACKBERRY CIR					
City SARTELL	State MN	Zip Code 56377-4523	FEC Identification Number C		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Amount of Each Disbursement this Period 2900.00		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID : B72456DF990A543AAB9D <input type="checkbox"/> Memo Item		
State:	District:				

Full Name (Last, First, Middle Initial) <b>C. SEATON, DOUGLAS, P, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 1241 GULF OF MEXICO DR					
City LONGBOAT KEY	State FL	Zip Code 34228-3690	FEC Identification Number C		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Amount of Each Disbursement this Period 1000.00		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID : B479353CF04DE467A979 <input type="checkbox"/> Memo Item		
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6800.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 74			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. DAVIS, MARK, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address PO BOX 558			FEC Identification Number C		
City SAINT PETER	State MN	Zip Code 56082-0558	Amount of Each Disbursement this Period 2900.00		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : BDF00772CCF8D409C950		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. FITZGERALD, RICHARD, W, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2022		
Mailing Address 1890 BEAR RIDGE LN SE			FEC Identification Number C		
City ROCHESTER	State MN	Zip Code 55904-8666	Amount of Each Disbursement this Period 2900.00		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : BE954714355BC4549B42		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. MOSKOWITZ, CHERNA, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 4744 N BAY RD			FEC Identification Number C		
City MIAMI BEACH	State FL	Zip Code 33140-2814	Amount of Each Disbursement this Period 2900.00		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : B4402A820CFA548F0B0B		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	8700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	208291.39



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 73 OF 74	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. NEHLS FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022
Mailing Address PO BOX 16968		FEC Identification Number C C00730150
City SUGAR LAND	State TX	Zip Code 77496
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		010
Candidate Name <b>NEHLS FOR CONGRESS</b>		Amount of Each Disbursement this Period 500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID : BB1952895C4374A048F4</b>
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. SCALISE FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022
Mailing Address PO BOX 23219		FEC Identification Number C C00394957
City NEW ORLEANS	State LA	Zip Code 70183
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		010
Candidate Name <b>SCALISE, STEVE, MR, ,</b>		Amount of Each Disbursement this Period 2000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID : BE1F602067FC74972982</b>
State: LA District: 01		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. THE EYE OF THE TIGER PAC</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022
Mailing Address PO BOX 2485		FEC Identification Number C C00467431
City SPRINGFIELD	State VA	Zip Code 22152
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		010
Candidate Name <b>THE EYE OF THE TIGER PAC</b>		Amount of Each Disbursement this Period 5000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID : B4213D52CE66E4469AA0</b>
State: District:		<input type="checkbox"/> Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 74 OF 74	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF HAGEDORN**

**A. MAKING AMERICA PROSPEROUS PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 2485

City SPRINGFIELD State VA Zip Code 22152

Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS Category/Type 010

Candidate Name MAKING AMERICA PROSPEROUS PAC

Office Sought:  House  Senate  President Disbursement For: 2022  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 03 / 11 / 2022

FEC Identification Number C C00445379

Amount of Each Disbursement this Period 2000.00

Transaction ID : B8BC3C97031EA44979A6

Memo Item

**B. MAJORITY COMMITTEE PAC--MC PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 10134

City BAKERSFIELD State CA Zip Code 93389

Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS Category/Type 010

Candidate Name MAJORITY COMMITTEE PAC--MC PAC

Office Sought:  House  Senate  President Disbursement For: 2022  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 03 / 11 / 2022

FEC Identification Number C C00428052

Amount of Each Disbursement this Period 5000.00

Transaction ID : BF47A677D1E8B4C30A0D

Memo Item

**C. JIM JORDAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address 499 S CAPITOL ST SW STE 405

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS Category/Type 010

Candidate Name JORDAN, JIM, , ,

Office Sought:  House  Senate  President Disbursement For: 2022  Primary  General  Other (specify) ▼

State: OH District: 04

Date of Disbursement 03 / 11 / 2022

FEC Identification Number C C00416594

Amount of Each Disbursement this Period 2000.00

Transaction ID : B0A5128EDE73849D0BE1

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	9000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	16500.00