



RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM
Minnesota Power Active Citizens Team 30 West Superior Street, Duluth, Minnesota 55802

JUL 18 9 06 AM '99

July 14, 1999

Federal Election Commission
999 E Street, N.W.
Washington, D.C. 20463

Attached is FEC Form 3X and attachments due on July 20, 1999.

Sincerely,

A handwritten signature in cursive script that reads "Steven C. Leino".

Steven C. Leino
Treasurer
Minnesota Power Active Citizens Team

mr
cc: Election Bureau
Office of the Secretary of State
180 State Office Building
St. Paul, MN 55155

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

JUN 18 9 06 AM '99

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Minnesota Power Active Citizens Team		2. FEC IDENTIFICATION NUMBER COO 142487
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 30 W. Superior St		
CITY, STATE and ZIP CODE Duluth Mn 55802		
3. <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)		

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year End Report
 July 31 Mid Year Report (Non-election Year Only)
 Termination Report
- Monthly Report Due On:
 February 20 June 20 October 20
 March 20 July 20 November 20
 April 20 August 20 December 20
 May 20 September 20 January 31
- 12-Day Pre-Election Report for the _____
(Type of Election)
election on _____ in the State of _____
- 30-Day Post-Election Report following the General Election
on _____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>1/1/99</u> through <u>6/30/99</u>		
6. (a) Cash on Hand January 1, 19 <u>99</u>		\$ <u>6889.77</u>
(b) Cash on Hand at Beginning of Reporting Period	\$ <u>8919.86</u>	
(c) Total Receipts (from Line 19)	\$ <u>1841.29</u>	\$ <u>7892.61</u>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ <u>10,761.15</u>	\$ <u>14,782.38</u>
7. Total Disbursements (from Line 30)	\$ <u>1018.92</u>	\$ <u>5040.15</u>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ <u>9742.23</u>	\$ <u>9742.23</u>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$	

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

Type or Print Name of Treasurer
Steven C. Leino

Signature of Treasurer
Steven C. Leino

Date
7/8/99

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

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FEC FORM 3X
(revised 6/93)

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X**

(REVISED 1/1/91)

NAME OF COMMITTEE <i>Minnesota Power Active Citizens Team</i>		REPORT COVERING PERIOD FROM <i>1/1/99</i> TO <i>6/30/99</i>	
		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
11	Contributions (other than loans) From:		
a.	Individuals/Persons Other Than Political Committees:		
i.	Itemized (use Schedule A)	<i>240.00</i>	<i>1120.00</i>
ii.	Unitemized	<i>1601.10</i>	<i>6660.90</i>
iii.	Total	<i>1841.10</i>	<i>7780.90</i>
b.	Political Party Committees		
c.	Other Political Committees (such as PACs)		
d.	Total Contributions	<i>1841.10</i>	<i>7780.90</i>
12.	Transfers From Affiliated/Other Party Committees		
13.	All Loans Received		
14.	Loan Repayments Received		
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)		
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees		
17.	Other Federal Receipts (Dividends, Interest, etc.)	<i>.19</i>	<i>111.71</i>
18.	Transfers from Nonfederal Account for Joint Activity		
19.	Total Receipts	<i>1841.29</i>	<i>7892.61</i>
20.	Total Federal Receipts	<i>1841.29</i>	<i>7892.61</i>
II. Disbursements			
21.	Operating Expenditures:		
a.	Shared Federal/Non-Federal Activity (from Schedule H4):		
i.	Federal Share		
ii.	Non-Federal Share		
b.	Other Federal Operating Expenditures		
c.	Total Operating Expenditures		
22.	Transfers to Affiliated/Other Party Committees		
23.	Contributions to Federal Candidates/Committees and Other Political Committees	<i>1000.00</i>	<i>5000.00</i>
24.	Independent Expenditures (use Schedule E)		
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F) ..		
26.	Loan Repayments Made		
27.	Loans Made		
28.	Refunds of Contributions To:		
a.	Individuals/Persons Other Than Political Committees		
b.	Political Party Committees		
c.	Other Political Committees (such as PACs)		
d.	Total Contribution Refunds		
29.	Other Disbursements <i>Federal Income Taxes</i>	<i>18.92</i>	<i>40.15</i>
30.	Total Disbursements	<i>1018.92</i>	<i>5040.15</i>
31.	Total Federal Disbursements	<i>1018.92</i>	<i>5040.15</i>
III. Net Contributions/Operating Expenditures			
32.	Total Contributions (other than loans) (from line 11d)		
33.	Total Contribution Refunds (from line 28d)		
34.	Net Contributions (other than loans) (subtract line 33 from line 32)		
35.	Total Federal Operating Expenditures		
36.	Offsets to Operating Expenditures (from line 15)		
37.	Net Operating Expenditures		

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE OF
FOR LINE NUMBER

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)

Minnesota Power Active Citizens Team

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
<i>Rod Grams for U.S. Senate 2013 2 Ave N Anoka MN 55303</i>	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>6/2/99</i>	<i>10000</i>
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

Minnesota Power Active Citizens Team

A. Full Name, Mailing Address and ZIP Code John E. Heino 4202 Dodge St Duluth MN 55804	Name of Employer Minnesota Power Occupation Manager Aggregate Year-to-Date > \$ 280.00	Date (month, day, year)	Amount of Each Receipt this Period 60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Minnesota Power Occupation Vice President Aggregate Year-to-Date > \$ 280.00	Date (month, day, year)	Amount of Each Receipt this Period 60.00
B. Full Name, Mailing Address and ZIP Code David J McMillan 2502 Providence Rd Duluth MN 55811	Name of Employer Minnesota Power Occupation Manager Aggregate Year-to-Date > \$ 280.00	Date (month, day, year)	Amount of Each Receipt this Period 60.00
C. Full Name, Mailing Address and ZIP Code Herbert G. Mike 431 8th Ave Two Harbors MN 55616	Name of Employer Minnesota Power Occupation Manager Aggregate Year-to-Date > \$ 280.00	Date (month, day, year)	Amount of Each Receipt this Period 60.00
D. Full Name, Mailing Address and ZIP Code Donald J. Shipper 8 Belknap Shores Superior WI 54880	Name of Employer Minnesota Power Occupation Sr. Vice President Aggregate Year-to-Date > \$ 280.00	Date (month, day, year)	Amount of Each Receipt this Period 60.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 7-14-99
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked _____ and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>ML</i>	7-18-99
PREPARER	DATE PREPARED