

# 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  
**MIKE BENSON FOR CONGRESS**

ADDRESS (number and street) 3635 IRONWOOD CT SW  
PO BOX 8332  
 Check if different than previously reported. (ACC) ROCHESTER MN 55903

2. **FEC IDENTIFICATION NUMBER** C C00546945 3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)  
CITY STATE ZIP CODE 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 M M / D D / Y Y Y Y in the State of    
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on M M / D D / Y Y Y Y in the State of  

5. Covering Period M M / D D / Y Y Y Y through M M / D D / Y Y Y Y  
01 / 01 / 2014 through 03 / 31 / 2014

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 Susan G Benson  
Signature of Treasurer Susan G Benson [Electronically Filed] Date M M / D D / Y Y Y Y  
04 / 14 / 2014

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

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**MIKE BENSON FOR CONGRESS**

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))....	17079.00	77526.73
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	17079.00	77526.73
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	39601.10	71416.88
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	334.25
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	39601.10	71082.63
8. Cash on Hand at Close of Reporting Period (from Line 27).....	6444.10	
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 12/2003)

Write or Type Committee Name

**MIKE BENSON FOR CONGRESS**

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).....	11870.00	61153.92
(ii) Unitemized.....	5209.00	9520.00
(iii) TOTAL of contributions from individuals ▶	17079.00	70673.92
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	6852.81
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	17079.00	77526.73
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<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	334.25
<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>	17079.00	77860.98

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	39601.10	71416.88
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	39601.10	71416.88

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	28966.20
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	17079.00
25. SUBTOTAL (add Line 23 and Line 24).....	46045.20
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	39601.10
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	6444.10

**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 26
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <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)  
**MIKE BENSON FOR CONGRESS**

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

Mailing Address 27628 State Hwy 56

City Brownsdale	State MN	Zip Code 55918
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FEC ID number of contributing federal political committee. **C**

Name of Employer Akkerman Inc	Occupation President
----------------------------------	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 28 / 2014

**Transaction ID : SA11AI.4728**

Amount of Each Receipt this Period  
500.00

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

Mailing Address PO Box 9131

City Rochester	State MN	Zip Code 55903
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FEC ID number of contributing federal political committee. **C**

Name of Employer Mayo Clinic	Occupation Nuclear Medicine
---------------------------------	--------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 26 / 2014

**Transaction ID : SA11AI.4685**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 19950 Cedarhust Street

City Wayzata	State MN	Zip Code 55391
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FEC ID number of contributing federal political committee. **C**

Name of Employer Marquette Financial Company	Occupation Banker
---	----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 13 / 2014

**Transaction ID : SA11AI.4423**

Amount of Each Receipt this Period  
1000.00

**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: (check only one)	PAGE 6 OF 26
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MIKE BENSON FOR CONGRESS**

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

Mailing Address 1005 1/2 E Washington

City State Zip Code  
Bloomington IL 61701

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014

**Transaction ID : SA11AI.4675**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 11915 County Rd 10

City State Zip Code  
Plymouth MN 55442

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

Name of Employer Occupation  
Cheney Inc CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014

**Transaction ID : SA11AI.4522**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 8240 Ocha Ct

City State Zip Code  
Otsego MN 55330

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

Name of Employer Occupation  
Direct Digital Controls President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 05 / 2014

**Transaction ID : SA11AI.4518**

Amount of Each Receipt this Period  
2000.00

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

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

3000.00

**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 7 OF 26
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MIKE BENSON FOR CONGRESS**

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

Mailing Address **PO Box 34**

City **Minneapolis** State **MN** Zip Code **55416**

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

Name of Employer **Banner Engineering** Occupation **President**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 28 / 2014**

**Transaction ID : SA11AI.4706**

Amount of Each Receipt this Period  
**1000.00**

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

Mailing Address **2207 7th Street NW**

City **Rochester** State **MN** Zip Code **55416**

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

Name of Employer **D&R Vending** Occupation **Owner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**320.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 26 / 2014**

**Transaction ID : SA11AI.4678**

Amount of Each Receipt this Period  
**20.00**

**C.** Full Name (Last, First, Middle Initial)  
**K&S Malecha Investments**

Mailing Address **8488 133rd Street West**

City **Apple Valley** State **MN** Zip Code **55124**

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 01 / 2014**

**Transaction ID : SA11AI.4416**

Amount of Each Receipt this Period  
**1000.00**

See Attribution Memo

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

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

**2020.00**

**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 8 OF 26
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**MIKE BENSON FOR CONGRESS**

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

Mailing Address 8448 133rd Street West

City Apple Valley State MN Zip Code 55124

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

Name of Employer K&S Malecha Investments Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 01 / 2014

**Transaction ID : SA11AI.4416.0**

Amount of Each Receipt this Period  
 1000.00

**[MEMO ITEM]**

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

Mailing Address 5225 Meadow Crossing Rd SW

City Rochester State MN Zip Code 55902

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 20 / 2014

**Transaction ID : SA11AI.4575**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 339 Mount Curve Blvd

City St Paul State MN Zip Code 55105

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 24 / 2014

**Transaction ID : SA11AI.4739**

Amount of Each Receipt this Period  
 1000.00

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

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

1500.00



**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 9 OF 26
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MIKE BENSON FOR CONGRESS**

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

Mailing Address 2491 Haw Hill Lane SW

City Rochester State MN Zip Code 55902

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

Name of Employer Affiliated Group Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 27 / 2014

**Transaction ID : SA11AI.4740**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 1118 Skyline Drive SW

City Rochester State MN Zip Code 55902

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

Name of Employer Affiliated Group Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2100.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 20 / 2014

**Transaction ID : SA11AI.4594**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 1320 Wicklow Lane SW

City Rochester State MN Zip Code 55902

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

Name of Employer Affiliated Group Occupation Farmer/Developer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 17 / 2014

**Transaction ID : SA11AI.4524**

Amount of Each Receipt this Period  
 250.00

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

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

1500.00

**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 10 OF 26
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MIKE BENSON FOR CONGRESS**

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

Mailing Address 1351 Chatteron Rd

City Eagan State MN Zip Code 55123

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : SA11AI.4744**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 4306 Sunnyside Rd

City Edina State MN Zip Code 55424

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

Name of Employer Seaton Peters Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**01 / 13 / 2014**

**Transaction ID : SA11AI.4410**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address 4650 Nine Oaks Circle

City Bloomington State MN Zip Code 55437

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

Name of Employer Service Quality Institute Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**01 / 13 / 2014**

**Transaction ID : SA11AI.4412**

Amount of Each Receipt this Period  
**250.00**

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

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

**1000.00**

**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 11 OF 26
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MIKE BENSON FOR CONGRESS**

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

Mailing Address 1137 Baird Lane NE

City State Zip Code  
Rochester MN 55906

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

Name of Employer Occupation  
Self Employed Investor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA11AI.4722**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 21090 565th Street

City State Zip Code  
Plainview MN 55964

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

Name of Employer Occupation  
Self Employed Farmer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 29 / 2014

**Transaction ID : SA11AI.4717**

Amount of Each Receipt this Period  
250.00

**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 M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

1250.00

11870.00

**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 12 OF 26			
	<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)  
**MIKE BENSON FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. American Legion Post 21</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 1703 Selby Ave			Amount of Each Disbursement this Period 824.98 <b>Transaction ID : SB17.4497</b>
City St Paul	State MN	Zip Code 55104	
Purpose of Disbursement Advertising	Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Capital Resource</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2014
Mailing Address 700 Pleasant Street			Amount of Each Disbursement this Period 594.51 <b>Transaction ID : SB17.4426</b>
City Brooklyn	State IA	Zip Code 52211	
Purpose of Disbursement Polling/Research	Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>c. Capital Resource</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2014
Mailing Address 700 Pleasant Street			Amount of Each Disbursement this Period 64.98 <b>Transaction ID : SB17.4427</b>
City Brooklyn	State IA	Zip Code 52211	
Purpose of Disbursement Polling/Research	Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	824.98
<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 13 OF 26			
	<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)  
**MIKE BENSON FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Capitol Direct</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2014
Mailing Address 2915 Commers Drive Suite 1000		Amount of Each Disbursement this Period 1088.06
City Eagan State MN Zip Code 55121	Category/Type	
Purpose of Disbursement Direct Mail Production/Printing/Postage		<b>Transaction ID : SB17.4490</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <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 Direct</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address 2915 Commers Drive Suite 1000		Amount of Each Disbursement this Period 952.89
City Eagan State MN Zip Code 55121	Category/Type	
Purpose of Disbursement Direct Mail Production/Printing/Postage		<b>Transaction ID : SB17.4504</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Facetime Solutions</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address 921 1st Street N Suite 202		Amount of Each Disbursement this Period 1669.67
City St Cloud State MN Zip Code 56303	Category/Type	
Purpose of Disbursement Direct Mail Production/Printing/Postage		<b>Transaction ID : SB17.4483</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3710.62
<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 14 OF 26			
	<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)  
**MIKE BENSON FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Facetime Solutions</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2014
Mailing Address 921 1st Street N Suite 202		Amount of Each Disbursement this Period 483.19 <b>Transaction ID : SB17.4493</b>
City St Cloud State MN Zip Code 56303	Purpose of Disbursement Direct Mail Production/Printing	
Candidate Name	Category/Type	
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Facetime Solutions</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2014
Mailing Address 921 1st Street N Suite 202		Amount of Each Disbursement this Period 365.60 <b>Transaction ID : SB17.4494</b>
City St Cloud State MN Zip Code 56303	Purpose of Disbursement Direct Mail Production/Printing	
Candidate Name	Category/Type	
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Dan Hanks</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2014
Mailing Address 5432 Cameron Drive NW		Amount of Each Disbursement this Period 650.00 <b>Transaction ID : SB17.4473</b>
City Rochester State MN Zip Code 55901	Purpose of Disbursement Strategic Consulting	
Candidate Name	Category/Type	
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1498.79
<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 15 OF 26			
	<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)  
**MIKE BENSON FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Dan Hanks</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address 5432 Cameron Drive NW		Amount of Each Disbursement this Period 650.00 <b>Transaction ID : SB17.4480</b>
City Rochester	State MN Zip Code 55901	
Purpose of Disbursement Strategic Consulting	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Dan Hanks</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address 5432 Cameron Drive NW		Amount of Each Disbursement this Period 30.00 <b>Transaction ID : SB17.4482</b>
City Rochester	State MN Zip Code 55901	
Purpose of Disbursement Mileage Reimbursement	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Dan Hanks</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2014
Mailing Address 5432 Cameron Drive NW		Amount of Each Disbursement this Period 650.00 <b>Transaction ID : SB17.4486</b>
City Rochester	State MN Zip Code 55901	
Purpose of Disbursement Strategic Consulting	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1330.00
<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 16 OF 26			
	<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)  
**MIKE BENSON FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Dan Hanks</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2014		
Mailing Address 5432 Cameron Drive NW			Amount of Each Disbursement this Period 650.00		
City Rochester	State MN	Zip Code 55901	Transaction ID : SB17.4489		
Purpose of Disbursement Strategic Consulting		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Dan Hanks</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014		
Mailing Address 5432 Cameron Drive NW			Amount of Each Disbursement this Period 690.00		
City Rochester	State MN	Zip Code 55901	Transaction ID : SB17.4495		
Purpose of Disbursement Strategic Consulting		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>c. Dan Hanks</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2014		
Mailing Address 5432 Cameron Drive NW			Amount of Each Disbursement this Period 150.00		
City Rochester	State MN	Zip Code 55901	Transaction ID : SB17.4500		
Purpose of Disbursement Strategic Consulting		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1490.00
<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 17 OF 26			
	<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)  
**MIKE BENSON FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Dan Hanks</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2014
Mailing Address 5432 Cameron Drive NW		Amount of Each Disbursement this Period 675.00
City Rochester	State MN	
Zip Code 55901	Purpose of Disbursement Strategic Consulting	Category/Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Huckaby Davis Lisker</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2014
Mailing Address 228 S Washington Street Ste 115		Amount of Each Disbursement this Period 279.45
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Compliance Consulting	Category/Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Huckaby Davis Lisker</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2014
Mailing Address 228 S Washington Street Ste 115		Amount of Each Disbursement this Period 1330.30
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Compliance Consulting	Category/Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2284.75
<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 18 OF 26			
	<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)  
**MIKE BENSON FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. HyVee</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014
Mailing Address 500 Crossroads Drive SW		Amount of Each Disbursement this Period 5.60
City Rochester	State MN Zip Code 55902	
Purpose of Disbursement Postage	Category/Type	<b>Transaction ID : SB17.4439</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. HyVee</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2014
Mailing Address 500 Crossroads Drive SW		Amount of Each Disbursement this Period 12.35
City Rochester	State MN Zip Code 55902	
Purpose of Disbursement Postage	Category/Type	<b>Transaction ID : SB17.4438</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. HyVee</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2014
Mailing Address 500 Crossroads Drive SW		Amount of Each Disbursement this Period 25.41
City Rochester	State MN Zip Code 55902	
Purpose of Disbursement Travel	Category/Type	<b>Transaction ID : SB17.4440</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	43.36
<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 19 OF 26			
	<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)  
**MIKE BENSON FOR CONGRESS**

**A. Image Splash**

Full Name (Last, First, Middle Initial)  
Mailing Address 3269 19th Street NW #6

City Rochester State MN Zip Code 55901

Purpose of Disbursement Button Purchase

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 03 / 28 / 2014

Amount of Each Disbursement this Period: 344.46

Transaction ID : SB17.4509

**B. Kwik Trip**

Full Name (Last, First, Middle Initial)  
Mailing Address 1626 Oak Street  
PO BOX 2107

City La Crosse State WI Zip Code 54602

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 31 / 2014

Amount of Each Disbursement this Period: 131.70

Transaction ID : SB17.4446

**C. Kwik Trip**

Full Name (Last, First, Middle Initial)  
Mailing Address 1626 Oak Street  
PO BOX 2107

City La Crosse State WI Zip Code 54602

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 18 / 2014

Amount of Each Disbursement this Period: 196.30

Transaction ID : SB17.4447

**SUBTOTAL** of Disbursements This Page (optional) ..... 672.46

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 26			
	<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)  
**MIKE BENSON FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Kwik Trip</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2014
Mailing Address 1626 Oak Street PO Box 2107		Amount of Each Disbursement this Period 133.47 <b>Transaction ID : SB17.4445</b>
City La Crosse State WI Zip Code 54602	Purpose of Disbursement Travel	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Kwik Trip</b>		Date of Disbursement MM / DD / YYYY 03 / 18 / 2014
Mailing Address 1626 Oak Street PO Box 2107		Amount of Each Disbursement this Period 192.14 <b>Transaction ID : SB17.4448</b>
City La Crosse State WI Zip Code 54602	Purpose of Disbursement Travel	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Minuteman Press</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2014
Mailing Address 1429 A Duke Street		Amount of Each Disbursement this Period 1302.50 <b>Transaction ID : SB17.4481</b>
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Printing	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1628.11
<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 26		
	<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)  
**MIKE BENSON FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Office Max</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2014
Mailing Address 1201 S Broadway		Amount of Each Disbursement this Period 132.22
City Rochester	State MN Zip Code 55902	
Purpose of Disbursement Office Supplies	Category/Type	<b>Transaction ID : SB17.4454</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Office Max</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2014
Mailing Address 1201 S Broadway		Amount of Each Disbursement this Period 29.37
City Rochester	State MN Zip Code 55902	
Purpose of Disbursement Office Supplies	Category/Type	<b>Transaction ID : SB17.4455</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Office Max</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address 1201 S Broadway		Amount of Each Disbursement this Period 14.08
City Rochester	State MN Zip Code 55902	
Purpose of Disbursement Office Supplies	Category/Type	<b>Transaction ID : SB17.4456</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	175.67
<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 26	
	<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)  
**MIKE BENSON FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Pinnacle Direct</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2014
Mailing Address 15260 113th Street N		Amount of Each Disbursement this Period 2020.62 <b>Transaction ID : SB17.4498</b>
City Stillwater	State MN	
Zip Code 55082	Purpose of Disbursement Direct Mail Production/Printing/Postage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Pinnacle Direct</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address 15260 113th Street N		Amount of Each Disbursement this Period 1141.25 <b>Transaction ID : SB17.4505</b>
City Stillwater	State MN	
Zip Code 55082	Purpose of Disbursement Direct Mail Production/Printing/Postage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Pinnacle Direct</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address 15260 113th Street N		Amount of Each Disbursement this Period 4610.77 <b>Transaction ID : SB17.4506</b>
City Stillwater	State MN	
Zip Code 55082	Purpose of Disbursement Direct Mail Production/Printing/Postage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7772.64
<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 26			
	<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)  
**MIKE BENSON FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 145.23
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement CC Processing Fees	Candidate Name	Transaction ID : SB17.4461
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Postmaster</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address Bear Creek Station Branch		Amount of Each Disbursement this Period 28.00
City Rochester	State MN Zip Code 55904	
Purpose of Disbursement Postage	Candidate Name	Transaction ID : SB17.4472
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. Postmaster</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2014
Mailing Address Bear Creek Station Branch		Amount of Each Disbursement this Period 49.00
City Rochester	State MN Zip Code 55904	
Purpose of Disbursement Postage	Candidate Name	Transaction ID : SB17.4507
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	222.23
<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 26	
	<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)  
**MIKE BENSON FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Precision Sinz</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2014
Mailing Address 1055 Valley Drive		Amount of Each Disbursement this Period 4315.00 <b>Transaction ID : SB17.4478</b>
City Riverdale	State IA	
Zip Code 52722	Purpose of Disbursement Signage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. REPUBLICAN PARTY OF MINNESOTA</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2014
Mailing Address 2200 E FRANKLIN AVENUE SUITE 201		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : SB17.4750</b>
City MINNEAPOLIS	State MN	
Zip Code 55404	Purpose of Disbursement Event Tickets	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Roland Development</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2014
Mailing Address 7809 Southtown Center #183		Amount of Each Disbursement this Period 3760.00 <b>Transaction ID : SB17.4475</b>
City Minneapolis	State MN	
Zip Code 55431	Purpose of Disbursement Fundraising Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8325.00
<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 25 OF 26	
	<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)  
**MIKE BENSON FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Roland Development</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2014
Mailing Address 7809 Southtown Center #183		Amount of Each Disbursement this Period 1250.00 <b>Transaction ID : SB17.4487</b>
City Minneapolis	State MN	
Zip Code 55431	Purpose of Disbursement Fundraising Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Roland Development</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2014
Mailing Address 7809 Southtown Center #183		Amount of Each Disbursement this Period 3075.00 <b>Transaction ID : SB17.4488</b>
City Minneapolis	State MN	
Zip Code 55431	Purpose of Disbursement Fundraising Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Roland Development</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 7809 Southtown Center #183		Amount of Each Disbursement this Period 1250.00 <b>Transaction ID : SB17.4496</b>
City Minneapolis	State MN	
Zip Code 55431	Purpose of Disbursement Fundraising Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5575.00
<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 26 OF 26	
	<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)  
**MIKE BENSON FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Roland Development</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 25 / 2014</b>
Mailing Address <b>7809 Southtown Center #183</b>		Amount of Each Disbursement this Period <b>3125.00</b>
City <b>Minneapolis</b> State <b>MN</b> Zip Code <b>55431</b>	Purpose of Disbursement <b>Fundraising Consulting</b>	
Candidate Name	Category/Type	<b>Transaction ID : SB17.4508</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>3125.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>38678.12</b>