

13 APR 15 PM 5:41

Office Use Only

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

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

12FE4M5

Friends of Kent Conrad

ADDRESS (number and street)

1902 E Divide Ave

Check if different than previously reported. (ACC)

Bismarck

ND

58501

2. FEC IDENTIFICATION NUMBER

C00202754

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

ND

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 01/01/2013

through

MM/DD/YYYY 03/31/2013

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 Pat Ness

Signature of Treasurer Pat Ness

Date

MM/DD/YYYY 04/12/2013

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

13020182539

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

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Write or Type Committee Name  
**Friends of Kent Conrad**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)) ....	0.00	0.00
(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)) .....	0.00	0.00
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	14696.21	14696.21
(b) Total Offsets to Operating Expenditures (from Line 14) .....	87.16	87.16
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	14609.05	14609.05
<b>8. Cash on Hand at Close of Reporting Period (from Line 27) .....</b>	159.29	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>	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

13020182540

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 17

Write or Type Committee Name

**Friends of Kent Conrad**

Report Covering the Period: From: 

M	M	M
0	1	

 / 

D	D	D
0	1	

 / 

Y	Y	Y	Y	Y	Y
2	0	1	3		

 To: 

M	M	M
0	3	

 / 

D	D	D
0	3	1

 / 

Y	Y	Y	Y	Y	Y
2	0	1	3		

**I. RECEIPTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

**11. CONTRIBUTIONS (other than loans) FROM:**

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A) .....

0.00
------

0.00
------

(ii) Unitemized .....

0.00
------

0.00
------

(iii) TOTAL of contributions from individuals ▶

0.00
------

0.00
------

(b) Political Party Committees .....

0.00
------

0.00
------

(c) Other Political Committees (such as PACs) .....

0.00
------

0.00
------

(d) The Candidate .....

0.00
------

0.00
------

(e) TOTAL CONTRIBUTIONS

(other than loans)  
(add Lines 11(a)(iii), (b), (c), and (d))..

0.00
------

0.00
------

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0.00
------

0.00
------

**13. LOANS:**

(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
------

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....**

87.16
-------

87.16
-------

**15. OTHER RECEIPTS (Dividends, Interest, etc.) .....**

0.54
------

0.54
------

**16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4) .....**

87.70
-------

87.70
-------

13020182541

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 17

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
17. OPERATING EXPENDITURES.....	14696.21	14696.21
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	1000.00	1000.00
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 .....	21433.19	21433.19
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	37129.40	37129.40

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	37200.99
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	87.70
25. SUBTOTAL (add Line 23 and Line 24).....	37288.69
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	37129.40
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	159.29

13020182542

**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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)  
Friends of Kent Conrad

**A. American Bank Center**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 2197

City Bismarck State ND Zip Code 58502-2197

Purpose of Disbursement FICA/FWH/Medicare

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
02 / 01 / 2013

Amount of Each Disbursement this Period  
3002.91

Transaction ID : D310370

Category/Type

**B. American Bank Center**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 2197

City Bismarck State ND Zip Code 58502-2197

Purpose of Disbursement FICA/FWH/Medicare

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2013  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
03 / 01 / 2013

Amount of Each Disbursement this Period  
18.36

Transaction ID : D311363

Category/Type

**C. American Bank Center**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 2197

City Bismarck State ND Zip Code 58502-2197

Purpose of Disbursement FICA/FWH/Medicare

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2013  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
03 / 29 / 2013

Amount of Each Disbursement this Period  
24.48

Transaction ID : D311399

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... 3045.75

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

13020182543

**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 6 OF 17

<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 Kent Conrad

Full Name (Last, First, Middle Initial) <b>A. Arnold Burian</b>		Date of Disbursement MM / DD / YYYY 01 / 29 / 2013
Mailing Address 238 Redstone Drive		Amount of Each Disbursement this Period 857.08 Transaction ID : D308722
City Bismarck	State ND Zip Code 58503	
Purpose of Disbursement salary	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Eide Bailly LLP</b>		Date of Disbursement MM / DD / YYYY 03 / 20 / 2013
Mailing Address PO Box 1914		Amount of Each Disbursement this Period 1050.00 Transaction ID : D311397
City Bismarck	State ND Zip Code 58502-1914	
Purpose of Disbursement accounting fee	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2013 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Federal Express</b>		Date of Disbursement MM / DD / YYYY 01 / 25 / 2013
Mailing Address P.O. Box 1140		Amount of Each Disbursement this Period 145.66 Transaction ID : D308719
City Memphis	State TN Zip Code 38101-1140	
Purpose of Disbursement mailing/shipping	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2052.74
<b>TOTAL</b> This Period (last page this line number only).....	

13020182544

**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)

<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 Kent Conrad

Full Name (Last, First, Middle Initial)  
**A. Internal Revenue Service**

Mailing Address 324 25th St.

City State Zip Code  
Western I R S Center UT 84201

Purpose of Disbursement  
1120 POL Fed Tax

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2013  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
03 / 29 / 2013

Amount of Each Disbursement this Period  
48.00

Transaction ID : D311402

Full Name (Last, First, Middle Initial)  
**B. Job Service of North Dakota**

Mailing Address PO Box 5507

City State Zip Code  
Bismarck ND 58506

Purpose of Disbursement  
unemployment tax

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2013  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
03 / 20 / 2013

Amount of Each Disbursement this Period  
126.77

Transaction ID : D311396

Full Name (Last, First, Middle Initial)  
**C. ND State Tax Commissioner**

Mailing Address 600 E. Boulevard Ave.

City State Zip Code  
Bismarck ND 58505

Purpose of Disbursement  
State payroll tax

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2013  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
03 / 29 / 2013

Amount of Each Disbursement this Period  
178.00

Transaction ID : D311401

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

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

352.77

13020182545

**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)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)  
Friends of Kent Conrad

Full Name (Last, First, Middle Initial) <b>A. NGP Van Inc.</b>		Date of Disbursement MM / DD / YYYY 02 / 21 / 2013
Mailing Address 1101 Vermont Ave., N.W., Ste. 710		Amount of Each Disbursement this Period 900.00 Transaction ID : D310372
City Washington	State DC	
Purpose of Disbursement data base/software	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Colleen Baron Popelka</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2013
Mailing Address 302 9th Ave SW		Amount of Each Disbursement this Period 110.82 Transaction ID : D310373
City Mandan	State ND	
Purpose of Disbursement Salary	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Colleen Baron Popelka</b>		Date of Disbursement MM / DD / YYYY 03 / 29 / 2013
Mailing Address 302 9th Ave SW		Amount of Each Disbursement this Period 147.76 Transaction ID : D311400
City Mandan	State ND	
Purpose of Disbursement Payroll	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1158.58
<b>TOTAL</b> This Period (last page this line number only).....	

13020182546



**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)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Friends of Kent Conrad

Full Name (Last, First, Middle Initial) <b>A. Colleen Baron Popelka</b>		Date of Disbursement MM / DD / YYYY 01 / 29 / 2013
Mailing Address 302 9th Ave SW		Amount of Each Disbursement this Period 5478.27 Transaction ID : D308721
City Mandan	State ND	
Zip Code 58554	Purpose of Disbursement salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. US Treasury</b>		Date of Disbursement MM / DD / YYYY 03 / 01 / 2013
Mailing Address Financial Management Service		Amount of Each Disbursement this Period 532.00 Transaction ID : D311364
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement Payroll tax	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2013 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. VISA</b>		Date of Disbursement MM / DD / YYYY 03 / 06 / 2013
Mailing Address Capital One		Amount of Each Disbursement this Period 2076.10 Transaction ID : D311366
City Washington	State DC	
Zip Code 20002	Purpose of Disbursement see memo	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2013 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8086.37
<b>TOTAL</b> This Period (last page this line number only).....	

13020182547

**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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Friends of Kent Conrad**

Full Name (Last, First, Middle Initial)  
**A. Delta Air Lines**

Mailing Address 1605 K St., N.W.

City Washington State DC Zip Code 20006

Purpose of Disbursement  
travel air fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2013  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
03 / 06 / 2013

Amount of Each Disbursement this Period  
2076.10

Transaction ID : D311367

**[MEMO ITEM]**

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY

Amount of Each Disbursement this Period

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY

Amount of Each Disbursement this Period

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

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

0.00

14696.21

12020182548

**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)

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<input type="checkbox"/> 17 20a	<input checked="" 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 Kent Conrad

Full Name (Last, First, Middle Initial) <b>A. ND Democratic-NPL</b>		Date of Disbursement MM / DD / YYYY 02 / 13 / 2013
Mailing Address 1902 E. Divide Ave.		Amount of Each Disbursement this Period 1000.00 Transaction ID : D310371
City Bismarck	State ND Zip Code 58501	
Purpose of Disbursement Transfer from Unlimited Funds		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2013 <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 MM / DD / YYYY
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 MM / DD / YYYY
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).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	1000.00

13020182549

**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)

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<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
Friends of Kent Conrad

Full Name (Last, First, Middle Initial)  
**A. AL FRANKEN FOR SENATE 2014**

Mailing Address PO BOX 583144

City MINNEAPOLIS State MN Zip Code 55458

Purpose of Disbursement contribution

Candidate Name  
**AL FRANKEN**

Office Sought:  House  Senate  President

Disbursement For: 2013  Primary  General  Other (specify)

State: MN District: 00

Date of Disbursement  
MM / DD / YYYY  
03 / 20 / 2013

Amount of Each Disbursement this Period  
1000.00

Transaction ID : D311395

Category/  
Type

Full Name (Last, First, Middle Initial)  
**B. ALASKANS FOR BEGICH 2014**

Mailing Address 1231 W NORTHERN LTS #605

City ANCHORAGE State AK Zip Code 99503

Purpose of Disbursement contribution

Candidate Name  
**MARK BEGICH**

Office Sought:  House  Senate  President

Disbursement For: 2013  Primary  General  Other (specify)

State: AK District: 00

Date of Disbursement  
MM / DD / YYYY  
03 / 20 / 2013

Amount of Each Disbursement this Period  
1000.00

Transaction ID : D311374

Category/  
Type

Full Name (Last, First, Middle Initial)  
**C. CHRIS COONS FOR DELAWARE**

Mailing Address PO BOX 9900

City NEWARK State DE Zip Code 19714

Purpose of Disbursement contribution

Candidate Name  
**CHRISTOPHER A COONS**

Office Sought:  House  Senate  President

Disbursement For: 2013  Primary  General  Other (specify)

State: DE District: 00

Date of Disbursement  
MM / DD / YYYY  
03 / 20 / 2013

Amount of Each Disbursement this Period  
1000.00

Transaction ID : D311371

Category/  
Type

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

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

3000.00

13020182550

**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 17

17  
20a     18  
20b     19a  
20c     19b  
21

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NAME OF COMMITTEE (In Full)  
Friends of Kent Conrad

Full Name (Last, First, Middle Initial)  
**A. FRIENDS OF DICK DURBIN**

Date of Disbursement

MM / DD / YYYY  
03 / 20 / 2013

Mailing Address PO BOX 1949

Amount of Each Disbursement this Period

2000.00

City State Zip Code  
SPRINGFIELD IL 62705

Purpose of Disbursement  
contribution

Category/  
Type

Transaction ID : D311368

Candidate Name  
RICHARD J DURBIN

Office Sought:  House  Senate  President  
Disbursement For: 2013  Primary  General  Other (specify)  
State: IL District: 00

Full Name (Last, First, Middle Initial)  
**B. FRIENDS OF JEANNE SHAHEEN**

Date of Disbursement

MM / DD / YYYY  
03 / 20 / 2013

Mailing Address 105 N STATE STREET

Amount of Each Disbursement this Period

1000.00

City State Zip Code  
CONCORD NH 03301

Purpose of Disbursement  
contribution

Category/  
Type

Transaction ID : D311393

Candidate Name  
JEANNE SHAHEEN

Office Sought:  House  Senate  President  
Disbursement For: 2013  Primary  General  Other (specify)  
State: NH District: 00

Full Name (Last, First, Middle Initial)  
**C. FRIENDS OF MARK WARNER**

Date of Disbursement

MM / DD / YYYY  
03 / 20 / 2013

Mailing Address 201 NORTH UNION STREET SUITE 300

Amount of Each Disbursement this Period

2000.00

City State Zip Code  
ALEXANDRIA VA 22314

Purpose of Disbursement  
contribution

Category/  
Type

Transaction ID : D311370

Candidate Name  
MARK ROBERT WARNER

Office Sought:  House  Senate  President  
Disbursement For: 2013  Primary  General  Other (specify)  
State: VA District: 00

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

5000.00

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

12020182551

**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)

<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**Friends of Kent Conrad**

Full Name (Last, First, Middle Initial)  
**A. HAGAN SENATE COMMITTEE INC**

Mailing Address **PO BOX 29103**

City **GREENSBORO** State **NC** Zip Code **27455**

Purpose of Disbursement contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2013  Primary  General  Other (specify)

State: **NC** District:

Date of Disbursement  
**03 / 20 / 2013**

Amount of Each Disbursement this Period  
**1000.00**

Transaction ID : **D311391**

Category/Type

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

Mailing Address **PO BOX 1577**

City **BISMARCK** State **ND** Zip Code **58502**

Purpose of Disbursement Contribution

Candidate Name **HEIDI HEITKAMP**

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: **ND** District: **00**

Date of Disbursement  
**01 / 29 / 2013**

Amount of Each Disbursement this Period  
**4000.00**

Transaction ID : **D308720**

Category/Type

Full Name (Last, First, Middle Initial)  
**C. JEFF MERKLEY FOR OREGON**

Mailing Address **3321 SE 20TH AVE**

City **PORTLAND** State **OR** Zip Code **97202**

Purpose of Disbursement contribution

Candidate Name **JEFFREY ALAN MERKLEY**

Office Sought:  House  Senate  President

Disbursement For: 2013  Primary  General  Other (specify)

State: **OR** District: **00**

Date of Disbursement  
**03 / 20 / 2013**

Amount of Each Disbursement this Period  
**1000.00**

Transaction ID : **D311375**

Category/Type

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

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

**6000.00**

13020182552

**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)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (in Full)  
**Friends of Kent Conrad**

**A. MARK PRYOR FOR US SENATE**

Full Name (Last, First, Middle Initial)  
Date of Disbursement: MM / DD / YYYY  
03 / 06 / 2013

Mailing Address PO BOX 2720

City: LITTLE ROCK State: AR Zip Code: 72203

Purpose of Disbursement contribution  
Amount of Each Disbursement this Period: 2000.00  
Transaction ID : D311365

Candidate Name: **MARK L PRYOR** Category/Type

Office Sought:  House  Senate  President  
Disbursement For: 2013  Primary  General  Other (specify)

State: AR District: 00

**B. REED COMMITTEE**

Full Name (Last, First, Middle Initial)  
Date of Disbursement: MM / DD / YYYY  
03 / 20 / 2013

Mailing Address PO BOX 8628

City: CRANSTON State: RI Zip Code: 02920

Purpose of Disbursement contribution  
Amount of Each Disbursement this Period: 1000.00  
Transaction ID : D311394

Candidate Name: **JACK F REED** Category/Type

Office Sought:  House  Senate  President  
Disbursement For: 2013  Primary  General  Other (specify)

State: RI District: 00

**C. THE MARKEY COMMITTEE**

Full Name (Last, First, Middle Initial)  
Date of Disbursement: MM / DD / YYYY  
03 / 20 / 2013

Mailing Address PO BOX 526

City: MEDFORD State: MA Zip Code: 02155

Purpose of Disbursement contribution  
Amount of Each Disbursement this Period: 500.00  
Transaction ID : D311398

Candidate Name: **EDWARD J MARKEY** Category/Type

Office Sought:  House  Senate  President  
Disbursement For: 2013  Primary  General  Other (specify)

State: MA District: 00

**SUBTOTAL** of Disbursements This Page (optional)..... 3500.00

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

13020182553

**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)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Friends of Kent Conrad**

Full Name (Last, First, Middle Initial) <b>A. UDALL FOR COLORADO</b>		Date of Disbursement MM / DD / YYYY 03 / 20 / 2013
Mailing Address <b>PO BOX 40158</b>		Amount of Each Disbursement this Period 1000.00 Transaction ID : D311387
City <b>DENVER</b>	State <b>CO</b> Zip Code <b>80204</b>	
Purpose of Disbursement contribution		Category/Type
Candidate Name <b>MARK E UDALL</b>		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2013 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>CO</b> District: <b>00</b>		

Full Name (Last, First, Middle Initial) <b>B. UDALL FOR US ALL</b>		Date of Disbursement MM / DD / YYYY 03 / 20 / 2013
Mailing Address <b>PO BOX 25766</b>		Amount of Each Disbursement this Period 1000.00 Transaction ID : D311381
City <b>ALBUQUERQUE</b>	State <b>NM</b> Zip Code <b>87125</b>	
Purpose of Disbursement contribution		Category/Type
Candidate Name <b>TOM UDALL</b>		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2013 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>NM</b> District: <b>00</b>		

Full Name (Last, First, Middle Initial) <b>C. VISA - American Bank Center</b>		Date of Disbursement MM / DD / YYYY 01 / 25 / 2013
Mailing Address <b>PO Box 2197</b>		Amount of Each Disbursement this Period 1894.75 Transaction ID : D308723
City <b>Bismarck</b>	State <b>ND</b> Zip Code <b>58502</b>	
Purpose of Disbursement see memo		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3894.75
<b>TOTAL</b> This Period (last page this line number only).....	

13020182554



**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)

<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
Friends of Kent Conrad

Full Name (Last, First, Middle Initial) <b>A. US Senate Restaurant</b>		Date of Disbursement MM / DD / YYYY 01 / 25 / 2013
Mailing Address 1st & C St.		Amount of Each Disbursement this Period 1520.75 Transaction ID : D308727  [MEMO ITEM]
City Washington	State DC	
Zip Code 20510	Purpose of Disbursement meals	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. VISA - American Bank Center</b>		Date of Disbursement MM / DD / YYYY 02 / 25 / 2013
Mailing Address PO Box 2197		Amount of Each Disbursement this Period 38.44 Transaction ID : D310374
City Bismarck	State ND	
Zip Code 58502	Purpose of Disbursement see memo	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2013 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Avis Rental</b>		Date of Disbursement MM / DD / YYYY 02 / 25 / 2013
Mailing Address Hector Airport		Amount of Each Disbursement this Period 38.44 Transaction ID : D310375  [MEMO ITEM]
City Fargo	State ND	
Zip Code 58102	Purpose of Disbursement travel/fuel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2013 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	38.44
<b>TOTAL</b> This Period (last page this line number only).....	21433.19

13020182555

# United States Senate

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OFFICE OF PUBLIC RECORDS

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Postmark

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SHIPPING DATE

NEXT BUSINESS DAY DELIVERY

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AIRBORNE EXPRESS

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NO POSTMARK

FAX

Date of Receipt

OTHER

Date of Receipt or Postmark

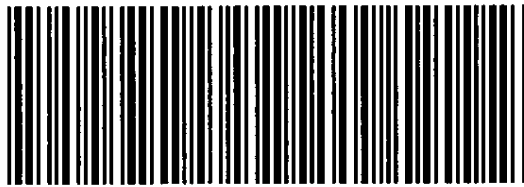
PREPARER

**DH**

DATE PREPARED

**4-15-13**

13020182556



13020182557