

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Republican Party of Minnesota - Federal

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>	<input type="text" value="1750.03"/>	<input type="text" value="1750.03"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="27541.32"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="144660.87"/>	<input type="text" value="828901.3"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="172202.19"/>	<input type="text" value="830651.33"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="167313.02"/>	<input type="text" value="825780.91"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="4889.17"/>	<input type="text" value="4889.17"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="784531.87"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Republican Party of Minnesota - Federal

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	36427.77	215969.48
(ii) Unitemized	45621.69	360935.41
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	82049.46	576904.89
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs).....	0	15000
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	82049.46	591904.89
12. Transfers From Affiliated/Other Party Committees.....	0	26500
13. All Loans Received	0	0
14. Loan Repayments Received.....	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0	2068.89
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0	0
17. Other Federal Receipts (Dividends, Interest, etc.).....	256.67	297.58
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	62354.74	208129.94
(b) Levin Funds (from Schedule H5)	0	0
(c) Total Transfers (add 18(a) and 18(b))..	62354.74	208129.94
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	144660.87	828901.3
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	82306.13	620771.36

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	12340.27	48616.57
(ii) Non-Federal Share.....	46422.96	182890.92
(b) Other Federal Operating Expenditures	44090.54	182589.99
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	102853.77	414097.48
22. Transfers to Affiliated/Other Party Committees.....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0	0
24. Independent Expenditures (use Schedule E)	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0	0
26. Loan Repayments Made.....	3768.29	22432.69
27. Loans Made.....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0	0
29. Other Disbursements	0	0
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0	0
(ii) "Levin" Share.....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds	60690.96	389250.74
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	60690.96	389250.74
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	167313.02	825780.91
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	120890.06	642889.99

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	82049.46	591904.89
34. Total Contribution Refunds (from Line 28(d))	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	82049.46	591904.89
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	56430.81	231206.56
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0	2068.89
38. Net Operating Expenditures (subtract Line 37 from Line 36)	56430.81	229137.67

: 97 `A -G79 @ @ B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`-H9A-N5HCB

Form/Schedule: F3XN
Transaction ID :

Additional Notes With Regards to H3

Transfers	6/4/2013 transfer for
\$11,749.89: H4 Admin Transfer	6/21/2013
transfer for \$24,699.98: H4 Admin Transfer	
6/21/2013 transfer for \$8,977.48: H4 Admin	
Transfer	6/27/2013 transfer for \$11,749.89:
H4 Admin Transfer	6/28/2013 transfer for
\$5,177.50: H4 Admin Transfer	

Form/Schedule:
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial) A. US Post Office - St. Paul		Date of Receipt
Mailing Address 401 Kellogg Boulevard E		<input type="text" value="06"/> / <input type="text" value="21"/> / <input type="text" value="2013"/>
City	State	Zip Code
Saint Paul	MN	55101-1427
FEC ID number of contributing federal political committee.		Transaction ID : 428494-918107-c
Name of Employer		Amount of Each Receipt this Period
Occupation		<input type="text" value="348.78"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="806.92"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Andrew Aplikowski		Date of Receipt
Mailing Address 15929 Sycamore Street NW		<input type="text" value="06"/> / <input type="text" value="21"/> / <input type="text" value="2013"/>
City	State	Zip Code
Andover	MN	55304-2687
FEC ID number of contributing federal political committee.		Transaction ID : 224535-918158-c
Name of Employer		Amount of Each Receipt this Period
Occupation		<input type="text" value="42"/>
Lakeside Homes, Inc.	COO	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="270"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Todd Aronson		Date of Receipt
Mailing Address 16312 Ice Circle Drive		<input type="text" value="06"/> / <input type="text" value="25"/> / <input type="text" value="2013"/>
City	State	Zip Code
Wayzata	MN	55391-2324
FEC ID number of contributing federal political committee.		Transaction ID : 525514-918302-c
Name of Employer		Amount of Each Receipt this Period
Occupation		<input type="text" value="1030"/>
Requested Information		
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1030"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1420.78"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 111
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

A. Kevin Brown
 Full Name (Last, First, Middle Initial)
 Mailing Address 405 Cherry Street
 City Cleveland State MN Zip Code 56017-2010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Information
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **225**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2013
Transaction ID : 187998-918388-c
 Amount of Each Receipt this Period
 50

B. Sara M Burdak
 Full Name (Last, First, Middle Initial)
 Mailing Address 8187 Trillium Lane
 City Victoria State MN Zip Code 55386-9785
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Information
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2013
Transaction ID : 525577-918343-c
 Amount of Each Receipt this Period
 500

C. Norma Buxton
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 266
 City Owatonna State MN Zip Code 55060-0266
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Information
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2013
Transaction ID : 503423-917192-c
 Amount of Each Receipt this Period
 150

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)
A. R.L. Chrisinger

Mailing Address **PO Box 12**

City **Winfield** State **IA** Zip Code **52659-0012**

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

Name of Employer Requested
Occupation Information

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230**

Date of Receipt
06 / 10 / 2013

Transaction ID : 226891-917443-c

Amount of Each Receipt this Period
100

Full Name (Last, First, Middle Initial)
B. Fredric Corrigan

Mailing Address **6509 Biscayne Boulevard**

City **Edina** State **MN** Zip Code **55436-1702**

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

Name of Employer None
Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000**

Date of Receipt
06 / 26 / 2013

Transaction ID : 199173-918341-c

Amount of Each Receipt this Period
1000

Full Name (Last, First, Middle Initial)
c. Glenda Corrigan

Mailing Address **6509 Biscayne Boulevard**

City **Edina** State **MN** Zip Code **55436-1702**

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

Name of Employer None
Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000**

Date of Receipt
06 / 26 / 2013

Transaction ID : 50914-918334-c

Amount of Each Receipt this Period
1000

SUBTOTAL of Receipts This Page (optional).....▶	2100.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 OF 111
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

A. Bernadien Crosby
Full Name (Last, First, Middle Initial)
Mailing Address 117 Siddle Drive
City State Zip Code
Cody WY 82414-9236
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
None Retired
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
325

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 25 / 2013
Transaction ID : 190949-918305-c
Amount of Each Receipt this Period
150

B. Brandon M Dawson
Full Name (Last, First, Middle Initial)
Mailing Address 11201 NE 9th Street
Suite 300
City State Zip Code
Vancouver WA 98684-5962
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Requested Information
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
5000

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 26 / 2013
Transaction ID : 525579-918345-c
Amount of Each Receipt this Period
5000

C. Cyril Denn
Full Name (Last, First, Middle Initial)
Mailing Address 117 Cardinal Drive
City State Zip Code
Mankato MN 56001-6711
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
None RETIRED
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
250

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 03 / 2013
Transaction ID : 173603-916807-c
Amount of Each Receipt this Period
50

SUBTOTAL of Receipts This Page (optional).....▶	5200.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 111
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial) A. Arthur Ehde		Date of Receipt MM / DD / YYYY 06 / 07 / 2013 Transaction ID : 94602-917304-c
Mailing Address 1410 150th Avenue		Amount of Each Receipt this Period 200
City Luverne	State MN	Zip Code 56156-4216
FEC ID number of contributing federal political committee. C	Name of Employer Self	Occupation Mink Farmer
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300	

Full Name (Last, First, Middle Initial) B. David Faith		Date of Receipt MM / DD / YYYY 06 / 10 / 2013 Transaction ID : 220466-917382-c
Mailing Address 2508 Sheffield Circle N		Amount of Each Receipt this Period 42
City Minnetonka	State MN	Zip Code 55305-2756
FEC ID number of contributing federal political committee. C	Name of Employer Dorsey & Whitney LLP	Occupation Associate
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 312	

Full Name (Last, First, Middle Initial) C. Randy Gilbert		Date of Receipt MM / DD / YYYY 06 / 17 / 2013 Transaction ID : 194741-917925-c
Mailing Address 224 Ridgeview Drive		Amount of Each Receipt this Period 84
City Wayzata	State MN	Zip Code 55391-1018
FEC ID number of contributing federal political committee. C	Name of Employer Assurance Consulting LLC	Occupation Management Consultant
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 624	

SUBTOTAL of Receipts This Page (optional).....▶	326.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

A. Justin Gillette
Full Name (Last, First, Middle Initial)

Mailing Address 4605 1st Avenue S

City Minneapolis State MN Zip Code 55419-5601

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

Name of Employer American Medical Systems Occupation Risk Control

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **372**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 13 / 2013

Transaction ID : 475390-917663-c

Amount of Each Receipt this Period
42

B. Jeffrey Greiner
Full Name (Last, First, Middle Initial)

Mailing Address 4760 Lodge Lane

City Excelsior State MN Zip Code 55331-9287

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

Name of Employer Rbc Capital Markets Occupation Investment Banker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 19 / 2013

Transaction ID : 52372-918001-c

Amount of Each Receipt this Period
1000

C. Ryan Griffin
Full Name (Last, First, Middle Initial)

Mailing Address 741 5th Street E

City Saint Paul State MN Zip Code 55106-5482

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

Name of Employer Requested Occupation Information

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **224**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 07 / 2013

Transaction ID : 509164-917287-c

Amount of Each Receipt this Period
38

SUBTOTAL of Receipts This Page (optional).....▶	1080.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

A. Carlton Gustafson
Full Name (Last, First, Middle Initial)

Mailing Address 74745 410th Street

City Bird Island	State MN	Zip Code 55310-2070
---------------------	-------------	------------------------

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

Name of Employer Information Requested	Occupation Information Requested
-------------------------------------------	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 10 / 2013
Transaction ID : 147319-917405-c

Amount of Each Receipt this Period
 250

B. Kenneth Halverson
Full Name (Last, First, Middle Initial)

Mailing Address 62147 260th Avenue

City Mantorville	State MN	Zip Code 55955-6019
---------------------	-------------	------------------------

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

Name of Employer Self	Occupation self employed
--------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2013
Transaction ID : 108562-917655-c

Amount of Each Receipt this Period
 150

C. Eleanor Hamilton
Full Name (Last, First, Middle Initial)

Mailing Address 1142 97th Lane NW

City Coon Rapids	State MN	Zip Code 55433-5494
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FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 11 / 2013
Transaction ID : 120272-917553-c

Amount of Each Receipt this Period
 10000

SUBTOTAL of Receipts This Page (optional).....▶	10400.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 111
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

A. Eric Harpel
 Full Name (Last, First, Middle Initial)
 Mailing Address 500 Edgewood Drive
 City State Zip Code
 Glencoe MN 55336-3109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Harpel Bros. Self Employed
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
534

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 10 / 2013
Transaction ID : 187775-917381-c
 Amount of Each Receipt this Period
84

B. Jay Hartman
 Full Name (Last, First, Middle Initial)
 Mailing Address 220 Mississippi River Boulevard S
 City State Zip Code
 Saint Paul MN 55105-1111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Attorney Heacox, Hartman, et al
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
250

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 10 / 2013
Transaction ID : 527792-920115-c
 Amount of Each Receipt this Period
250

C. Barry Hicketier
 Full Name (Last, First, Middle Initial)
 Mailing Address 3301 Lincoln Street NE
 City State Zip Code
 Minneapolis MN 55418-1453
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Capella Education Co. Data Entry Analyst
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
539

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 24 / 2013
Transaction ID : 93491-918215-c
 Amount of Each Receipt this Period
84

SUBTOTAL of Receipts This Page (optional).....▶	418.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 111
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
Republican Party of Minnesota - Federal

A. George T Holden
 Full Name (Last, First, Middle Initial)
 Mailing Address 6200 Idylwood Lane
 City Edina State MN Zip Code 55436-1107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HOLDEN COMMUNICATIONS Occupation CHMN O/T BD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2013
Transaction ID : 60540-918335-c
 Amount of Each Receipt this Period
 1000

B. Carol Kerr
 Full Name (Last, First, Middle Initial)
 Mailing Address 7755 Shaughnessy Road
 City Edina State MN Zip Code 55439-2639
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Employed Occupation Real Estate
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 336

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 10 / 2013
Transaction ID : 7439-917379-c
 Amount of Each Receipt this Period
 84

C. Rowena Lobley
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 277
 City Texline State TX Zip Code 79087-0277
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2013
Transaction ID : 519225-917278-c
 Amount of Each Receipt this Period
 75

SUBTOTAL of Receipts This Page (optional).....▶	1159.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 111
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

A. Robert K Madvig
Full Name (Last, First, Middle Initial)

Mailing Address N7438 E Snow Creek Road

City Black River Falls State WI Zip Code 54615-5842

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

Name of Employer Requested Occupation Information

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250**

Date of Receipt **06 / 26 / 2013**

Transaction ID : 525578-918344-c

Amount of Each Receipt this Period **250**

B. Malcolm McDonald
Full Name (Last, First, Middle Initial)

Mailing Address 21 E Oaks Road

City North Oaks State MN Zip Code 55127-2527

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

Name of Employer None Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **658.26**

Date of Receipt **06 / 24 / 2013**

Transaction ID : 3360-918214-c

Amount of Each Receipt this Period **84**

C. Lorie Michaels
Full Name (Last, First, Middle Initial)

Mailing Address 2060 Pinto Drive

City Wayzata State MN Zip Code 55391-9557

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

Name of Employer Self Occupation Asset Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1000**

Date of Receipt **06 / 17 / 2013**

Transaction ID : 31131-917927-c

Amount of Each Receipt this Period **1000**

SUBTOTAL of Receipts This Page (optional)..... **1334.00**

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

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

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

FOR LINE NUMBER: PAGE 17 OF 111
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)
A. Dianne Pellissier

Mailing Address 15278 El Soneto Drive

City State Zip Code
 Whittier CA 90605-1645

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

Name of Employer Occupation
 None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2013
Transaction ID : 207621-917176-c

Amount of Each Receipt this Period
 150

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

Mailing Address 2709 Lynn Avenue

City State Zip Code
 Saint Louis Park MN 55416-3941

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

Name of Employer Occupation
 Northwestern Mutual Insurance Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 624

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 24 / 2013
Transaction ID : 105549-918212-c

Amount of Each Receipt this Period
 84

Full Name (Last, First, Middle Initial)
C. Howard Richards

Mailing Address 2982 Westedge Boulevard

City State Zip Code
 Mound MN 55364-9454

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

Name of Employer Occupation
 Financial Profs. Inc. Financial Advisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 310

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 20 / 2013
Transaction ID : 6062-918067-c

Amount of Each Receipt this Period
 250

SUBTOTAL of Receipts This Page (optional)..... ▶ 484.00

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

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

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

FOR LINE NUMBER: PAGE 18 OF 111
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)
A. Lucas Riedi

Mailing Address 3824 48th Avenue S

City State Zip Code
 Minneapolis MN 55406-3608

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

Name of Employer Occupation
 Avtex Sharepoint Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 210

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 24 / 2013
Transaction ID : 222613-918213-c

Amount of Each Receipt this Period
 42

Full Name (Last, First, Middle Initial)
B. Paul Ritter

Mailing Address 9671 County 52 NE

City State Zip Code
 Remer MN 56672-4447

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

Name of Employer Occupation
 Blandin Paper Co. LABORER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2013
Transaction ID : 12853-916873-c

Amount of Each Receipt this Period
 50

Full Name (Last, First, Middle Initial)
C. Paul Ritter

Mailing Address 9671 County 52 NE

City State Zip Code
 Remer MN 56672-4447

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

Name of Employer Occupation
 Blandin Paper Co. LABORER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2013
Transaction ID : 12853-917097-c

Amount of Each Receipt this Period
 100

SUBTOTAL of Receipts This Page (optional)..... ▶ 192.00

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

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

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

FOR LINE NUMBER: PAGE 19 OF 111
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

A. James Robson
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 21901
 City Philadelphia State PA Zip Code 19124-0901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **350**

Date of Receipt
 M M / D D / Y Y Y Y Y
06 / 12 / 2013
Transaction ID : 216991-917584-c
 Amount of Each Receipt this Period
100

B. Nancy Roth
 Full Name (Last, First, Middle Initial)
 Mailing Address 8545 Carmel Valley Road
 City Carmel State CA Zip Code 93923-9556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **400**

Date of Receipt
 M M / D D / Y Y Y Y Y
06 / 14 / 2013
Transaction ID : 218536-917766-c
 Amount of Each Receipt this Period
100

C. Frank Russomanno
 Full Name (Last, First, Middle Initial)
 Mailing Address 1351 Chatterton Road
 City Saint Paul State MN Zip Code 55123-1481
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y
06 / 04 / 2013
Transaction ID : 466964-916959-c
 Amount of Each Receipt this Period
1000

SUBTOTAL of Receipts This Page (optional)..... ▶ **1200.00**
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 111
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial) A. Christopher Schneeman		Date of Receipt M M / D D / Y Y Y Y 06 / 10 / 2013 Transaction ID : 527772-920095-c
Mailing Address 345 Saint Peter Street Suite 2040		Amount of Each Receipt this Period 83.33
City Saint Paul State MN Zip Code 55102-1221	FEC ID number of contributing federal political committee. C	
Name of Employer Owner SevenHills Partners	Occupation SevenHills Partners	Aggregate Year-to-Date ▼ 249.99
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Christopher Schneeman		Date of Receipt M M / D D / Y Y Y Y 06 / 10 / 2013 Transaction ID : 527772-920107-c
Mailing Address 345 Saint Peter Street Suite 2040		Amount of Each Receipt this Period 83.33
City Saint Paul State MN Zip Code 55102-1221	FEC ID number of contributing federal political committee. C	
Name of Employer Owner SevenHills Partners	Occupation SevenHills Partners	Aggregate Year-to-Date ▼ 249.99
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Christopher Schneeman		Date of Receipt M M / D D / Y Y Y Y 06 / 10 / 2013 Transaction ID : 527772-920112-c
Mailing Address 345 Saint Peter Street Suite 2040		Amount of Each Receipt this Period 83.33
City Saint Paul State MN Zip Code 55102-1221	FEC ID number of contributing federal political committee. C	
Name of Employer Owner SevenHills Partners	Occupation SevenHills Partners	Aggregate Year-to-Date ▼ 249.99
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....	249.99
TOTAL This Period (last page this line number only).....	249.99

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

A. Harold Shudlick
 Full Name (Last, First, Middle Initial)
 Mailing Address 14195 Hayes Road
 City Apple Valley State MN Zip Code 55124-6737
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **205**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 26 / 2013
Transaction ID : 7984-918340-c
 Amount of Each Receipt this Period
50

B. Leroy Sundermeyer
 Full Name (Last, First, Middle Initial)
 Mailing Address 3804 Ewing Avenue S
 City Minneapolis State MN Zip Code 55410-1050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Advertising Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **230**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 17 / 2013
Transaction ID : 186284-917924-c
 Amount of Each Receipt this Period
30

C. John Trautz
 Full Name (Last, First, Middle Initial)
 Mailing Address 4509 Edina Boulevard
 City Edina State MN Zip Code 55424-1135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Reliance Development Occupation Real Estate Developer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **10000**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 05 / 2013
Transaction ID : 134140-916996-c
 Amount of Each Receipt this Period
10000

SUBTOTAL of Receipts This Page (optional).....▶	10080.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 22 OF 111
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 12
	<input type="checkbox"/> 16
	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

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

Mailing Address 7209 Queen Avenue S

City Richfield State MN Zip Code 55423-2824

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

Name of Employer Public Housing Agcy St. Paul Occupation Resident Service

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **504**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 10 / 2013

Transaction ID : 502200-917380-c

Amount of Each Receipt this Period
84

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

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) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

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

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) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	84.00
TOTAL This Period (last page this line number only).....▶	36427.77

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

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

FOR LINE NUMBER: PAGE 23 OF 111
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

A. ADP, Inc
 Full Name (Last, First, Middle Initial)
 Mailing Address 504 Clinton Center Drive
 Suite 4400
 City Clinton State MS Zip Code 39056-5610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 256.67

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 21 / 2013
Transaction ID : 514577-920345-m
 Amount of Each Receipt this Period
 256.67
 NOTE: Vendor refund

B.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y
 Amount of Each Receipt this Period

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) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	256.67
TOTAL This Period (last page this line number only).....▶	256.67

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)

A. ADP, Inc

Mailing Address 504 Clinton Center Drive
Suite 4400

City Clinton State MS Zip Code 39056-5610

Purpose of Disbursement
Payroll fees

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B514577920468e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. ADP, Inc

Mailing Address 504 Clinton Center Drive
Suite 4400

City Clinton State MS Zip Code 39056-5610

Purpose of Disbursement
Payroll fees

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B514577920469e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. ADP, Inc

Mailing Address 504 Clinton Center Drive
Suite 4400

City Clinton State MS Zip Code 39056-5610

Purpose of Disbursement
Payroll taxes

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B514577920378e

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)

A. Internal Revenue Service

Mailing Address 43251 PO Box

City Ogdden State UT Zip Code 84201-0001

Purpose of Disbursement
Payroll taxes

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B402470849607V

Amount of Each Disbursement this Period

[MEMO ITEM]

Subitemization of ADP, Inc (06/14/13)

Full Name (Last, First, Middle Initial)

B. MN Dept of Revenue

Mailing Address 658 Cedar Street
Suite 400

City Saint Paul State MN Zip Code 55155-1603

Purpose of Disbursement
Payroll taxes

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B421278849608V

Amount of Each Disbursement this Period

[MEMO ITEM]

Subitemization of ADP, Inc (06/14/13)

Full Name (Last, First, Middle Initial)

C. ADP, Inc

Mailing Address 504 Clinton Center Drive
Suite 4400

City Clinton State MS Zip Code 39056-5610

Purpose of Disbursement
Administrative/Salary/Overhead: Payroll

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B514577920461e

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)

A. Katherine Boyd

Mailing Address 606 Barrington Drive E

City State Zip Code
Shakopee MN 55379-8981

Purpose of Disbursement
Administrative/Salary/Overhead: Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B501909849609V

Amount of Each Disbursement this Period

[MEMO ITEM]

Subitemization of ADP, Inc (06/14/13)

Full Name (Last, First, Middle Initial)

B. ADP, Inc

Mailing Address 504 Clinton Center Drive
Suite 4400

City State Zip Code
Clinton MS 39056-5610

Purpose of Disbursement
Payroll fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B514577920470e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. ADP, Inc

Mailing Address 504 Clinton Center Drive
Suite 4400

City State Zip Code
Clinton MS 39056-5610

Purpose of Disbursement
Payroll taxes

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B514577920464e

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)

A. Internal Revenue Service

Mailing Address 43251 PO Box

City Ogdden State UT Zip Code 84201-0001

Purpose of Disbursement
Payroll taxes

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B402470849645V

Amount of Each Disbursement this Period

[MEMO ITEM]

Subitemization of ADP, Inc (06/28/13)

Full Name (Last, First, Middle Initial)

B. MN Dept of Revenue

Mailing Address 658 Cedar Street
Suite 400

City Saint Paul State MN Zip Code 55155-1603

Purpose of Disbursement
Payroll taxes

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B421278849646V

Amount of Each Disbursement this Period

[MEMO ITEM]

Subitemization of ADP, Inc (06/28/13)

Full Name (Last, First, Middle Initial)

C. ADP, Inc

Mailing Address 504 Clinton Center Drive
Suite 4400

City Clinton State MS Zip Code 39056-5610

Purpose of Disbursement
Administrative/Salary/Overhead: Payroll

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B514577920466e

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)

A. Katherine Boyd

Mailing Address 606 Barrington Drive E

City State Zip Code
Shakopee MN 55379-8981

Purpose of Disbursement
Administrative/Salary/Overhead: Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 28 / 2013

Transaction ID : SB21B501909849650V

Amount of Each Disbursement this Period

733.6

[MEMO ITEM]

Subitemization of ADP, Inc (06/28/13)

Full Name (Last, First, Middle Initial)

B. Alliance Bank

Mailing Address 444 Cedar Street

City State Zip Code
Saint Paul MN 55101-2179

Purpose of Disbursement
Loan Interest Expense

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 14 / 2013

Transaction ID : SB21B400292920320e

Amount of Each Disbursement this Period

506.26

Full Name (Last, First, Middle Initial)

C. Alliance Bank

Mailing Address 444 Cedar Street

City State Zip Code
Saint Paul MN 55101-2179

Purpose of Disbursement
Service Analysis Fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 21 / 2013

Transaction ID : SB21B400292920321e

Amount of Each Disbursement this Period

480.1

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

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

986.36

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)

A. Alliance Bank

Mailing Address 444 Cedar Street

City State Zip Code
Saint Paul MN 55101-2179

Purpose of Disbursement
Bank charge

001
Category/ Type

Candidate Name

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		28		2013

Transaction ID : SB21B400292920341e

Amount of Each Disbursement this Period

5

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address 20002 N 19th Avenue

City State Zip Code
Phoenix AZ 85027-4250

Purpose of Disbursement
Credit Card Processing Fees

001
Category/ Type

Candidate Name

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		24		2013

Transaction ID : SB21B430008920319e

Amount of Each Disbursement this Period

7.95

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address 20002 N 19th Avenue

City State Zip Code
Phoenix AZ 85027-4250

Purpose of Disbursement
Credit card processing fees

001
Category/ Type

Candidate Name

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		26		2013

Transaction ID : SB21B430008920322e

Amount of Each Disbursement this Period

192.08

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

205.03

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)

A. Campaign Solutions

Mailing Address St. Asaph Street

City Alexandria State VA Zip Code 22307

Purpose of Disbursement
Online consulting

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 13 / 2013

Transaction ID : SB21B417285920145e

Amount of Each Disbursement this Period

462.71

Full Name (Last, First, Middle Initial)

B. Cardinals FEC Compliance Services

Mailing Address 6053 Hudson Road

City Woodbury State MN Zip Code 55125-1015

Purpose of Disbursement
Reporting Services

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 19 / 2013

Transaction ID : SB21B408477913259e

Amount of Each Disbursement this Period

428.4

Full Name (Last, First, Middle Initial)

C. Cardinals FEC Compliance Services

Mailing Address 6053 Hudson Road

City Woodbury State MN Zip Code 55125-1015

Purpose of Disbursement
Reporting Services

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 19 / 2013

Transaction ID : SB21B408477913260e

Amount of Each Disbursement this Period

82.4

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

973.51

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)

A. Create My Print, LLC

Mailing Address 4579 Maple Leaf Circle

City Eagan State MN Zip Code 55123-1922

Purpose of Disbursement
Business Cards

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 13 / 2013

Transaction ID : SB21B516742917795e

Amount of Each Disbursement this Period

40.71

Full Name (Last, First, Middle Initial)

B. Create My Print, LLC

Mailing Address 4579 Maple Leaf Circle

City Eagan State MN Zip Code 55123-1922

Purpose of Disbursement
Office stationary

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 13 / 2013

Transaction ID : SB21B516742917796e

Amount of Each Disbursement this Period

575.27

Full Name (Last, First, Middle Initial)

C. Create My Print, LLC

Mailing Address 4579 Maple Leaf Circle

City Eagan State MN Zip Code 55123-1922

Purpose of Disbursement
Ink stamps

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 13 / 2013

Transaction ID : SB21B516742917797e

Amount of Each Disbursement this Period

61.86

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

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

677.84

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)

A. Create My Print, LLC

Mailing Address 4579 Maple Leaf Circle

City Eagan State MN Zip Code 55123-1922

Purpose of Disbursement
Business Cards

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B516742917798e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Merchant Services

Mailing Address 7300 Chapman Highway

City Knoxville State TN Zip Code 37920-6612

Purpose of Disbursement
Credit Card Processing Fees

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B423622920317e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Mileage

Mailing Address 525 Park Street
Suite 250

City Saint Paul State MN Zip Code 55103-2145

Purpose of Disbursement
Expense reimbursement-mileage

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B407551849572V

Amount of Each Disbursement this Period

[MEMO ITEM]
Subitemization of Christian Darouni (06/28/13)

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)

A. Mileage

Mailing Address 525 Park Street
Suite 250

City Saint Paul State MN Zip Code 55103-2145

Purpose of Disbursement
Expense reimbursement-mileage

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 19 / 2013

Transaction ID : SB21B407551849573V

Amount of Each Disbursement this Period

14.13

[MEMO ITEM]

Subitemization of Christian Darouni (06/28/13)

Full Name (Last, First, Middle Initial)

B. Mileage

Mailing Address 525 Park Street
Suite 250

City Saint Paul State MN Zip Code 55103-2145

Purpose of Disbursement
Expense reimbursement-mileage

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 26 / 2013

Transaction ID : SB21B407551849574V

Amount of Each Disbursement this Period

14.12

[MEMO ITEM]

Subitemization of Christian Darouni (06/28/13)

Full Name (Last, First, Middle Initial)

C. Mileage

Mailing Address 525 Park Street
Suite 250

City Saint Paul State MN Zip Code 55103-2145

Purpose of Disbursement
Expense reimbursement-mileage

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 27 / 2013

Transaction ID : SB21B407551849599V

Amount of Each Disbursement this Period

84.79

[MEMO ITEM]

Subitemization of Andrew De Jong (06/28/13)

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)

A. Minneapolis Hilton

Mailing Address 1001 Marquette Avenue

City Minneapolis State MN Zip Code 55403-2418

Purpose of Disbursement
Facility rent

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 13 / 2013

Transaction ID : **SB21B403410917800e**

Amount of Each Disbursement this Period

998.15

Full Name (Last, First, Middle Initial)

B. MN State Unemployment

Mailing Address 332 Minnesota Street

City Saint Paul State MN Zip Code 55101-1314

Purpose of Disbursement
: FEA Payroll taxes

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 14 / 2013

Transaction ID : **SB21B422710849606V**

Amount of Each Disbursement this Period

750.15

[MEMO ITEM]

Subitemization of ADP, Inc (06/14/13)

Full Name (Last, First, Middle Initial)

C. P2b Strategies, Inc

Mailing Address 4750 E 53rd Street
Apt. 206

City Minneapolis State MN Zip Code 55417-2357

Purpose of Disbursement
Mail Design & Printing

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼
Retire Debt -

Date of Disbursement

MM / DD / YYYY
06 / 19 / 2013

Transaction ID : **SB21B425370920136e**

Amount of Each Disbursement this Period

1950

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

2948.15

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)

A. Paysimple Inc.

Mailing Address 1433 17th Street
Suite 300

City Houston State TX Zip Code 77070

Purpose of Disbursement
Credit Card Processing Fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 11 / 2013

Transaction ID : SB21B419131920318e

Amount of Each Disbursement this Period

40.9

Full Name (Last, First, Middle Initial)

B. PCS Consulting

Mailing Address 1505 Osprey Court

City Lino Lakes State MN Zip Code 55038-4607

Purpose of Disbursement
Party Consulting Services

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 01 / 2013

Transaction ID : SB21B514578920130e

Amount of Each Disbursement this Period

500

Full Name (Last, First, Middle Initial)

C. Pinnacle Direct, Inc.

Mailing Address 15260 113th Street N

City Stillwater State MN Zip Code 55082-9575

Purpose of Disbursement
Party Fundraising Mail/Non-Candidat

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼
Retire Debt -

Date of Disbursement

MM / DD / YYYY
06 / 19 / 2013

Transaction ID : SB21B406183826708e

Amount of Each Disbursement this Period

1901.96

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

2442.86

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)

A. Pinnacle Direct, Inc.

Mailing Address 15260 113th Street N

City Stillwater State MN Zip Code 55082-9575

Purpose of Disbursement
Party Fundraising Mail/Non-Candidate

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) Retire Debt -

Date of Disbursement

MM / DD / YYYY
06 / 19 / 2013

Transaction ID : **SB21B406183871979e**

Amount of Each Disbursement this Period

443.36

Full Name (Last, First, Middle Initial)

B. Pinnacle Direct, Inc.

Mailing Address 15260 113th Street N

City Stillwater State MN Zip Code 55082-9575

Purpose of Disbursement
Party Mailing Finance Charge

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) Retire Debt -

Date of Disbursement

MM / DD / YYYY
06 / 19 / 2013

Transaction ID : **SB21B406183920137e**

Amount of Each Disbursement this Period

154.68

Full Name (Last, First, Middle Initial)

C. Southwest Publishing

Mailing Address 2600 NW Topeka Boulevard

City Topeka State KS Zip Code 66617-1160

Purpose of Disbursement
Party Mailhouse Printing

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) Retire Debt -

Date of Disbursement

MM / DD / YYYY
06 / 14 / 2013

Transaction ID : **SB21B414484920331e**

Amount of Each Disbursement this Period

1200

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

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

1798.04

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)

A. Trimble & Associates

Mailing Address 10210 WAYZATA BLVD
SUITE 130

City Hopkins State MN Zip Code 55305

Purpose of Disbursement
Legal Fees

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) Retire Debt -

Date of Disbursement

MM / DD / YYYY
06 / 14 / 2013

Transaction ID : SB21B401300920134e

Amount of Each Disbursement this Period

3500

Full Name (Last, First, Middle Initial)

B. US Post Office - St. Paul

Mailing Address 401 Kellogg Boulevard E

City Saint Paul State MN Zip Code 55101-1427

Purpose of Disbursement
Administrative/Salary/Overhead: Postage

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) Retire Debt -

Date of Disbursement

MM / DD / YYYY
06 / 06 / 2013

Transaction ID : SB21B428494920141e

Amount of Each Disbursement this Period

920

Full Name (Last, First, Middle Initial)

C. US Post Office - St. Paul

Mailing Address 401 Kellogg Boulevard E

City Saint Paul State MN Zip Code 55101-1427

Purpose of Disbursement
Administrative/Salary/Overhead: Postage

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) Retire Debt -

Date of Disbursement

MM / DD / YYYY
06 / 10 / 2013

Transaction ID : SB21B428494920142e

Amount of Each Disbursement this Period

350.77

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

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

4770.77

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)

A. US Post Office - St. Paul

Mailing Address 401 Kellogg Boulevard E

City State Zip Code
Saint Paul MN 55101-1427

Purpose of Disbursement
BRE Postage

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : SB21B428494920143e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. US Post Office - St. Paul

Mailing Address 401 Kellogg Boulevard E

City State Zip Code
Saint Paul MN 55101-1427

Purpose of Disbursement
Administrative/Salary/Overhead: Postage

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : SB21B428494920144e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. US Post Office - St. Paul

Mailing Address 401 Kellogg Boulevard E

City State Zip Code
Saint Paul MN 55101-1427

Purpose of Disbursement
Expense reimbursement-postage

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : SB21B428494849575V

Amount of Each Disbursement this Period

[MEMO ITEM]

Subitemization of Christian Darouni (06/28/13)

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)

A. Rebekah Clearman

Mailing Address 21311 Rum River Drive

City Anoka State MN Zip Code 55303-8999

Purpose of Disbursement
Expense reimbursement-printing costs

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

Transaction ID : SB21B525129920324e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Office Max - St. Paul

Mailing Address 1490 University Avenue W

City Saint Paul State MN Zip Code 55104-3901

Purpose of Disbursement
Expense reimbursement-printing costs

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

Transaction ID : SB21B404966849580V

Amount of Each Disbursement this Period

[MEMO ITEM]

Subitemization of Rebekah Clearman (06/19/13)

Full Name (Last, First, Middle Initial)

C. Rebekah Clearman

Mailing Address 21311 Rum River Drive

City Anoka State MN Zip Code 55303-8999

Purpose of Disbursement
Expense reimbursement-printing costs

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

Transaction ID : SB21B525129920329e

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)

A. Office Max - St. Paul

Mailing Address 1490 University Avenue W

City State Zip Code
Saint Paul MN 55104-3901

Purpose of Disbursement
Expense reimbursement-printing costs

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

Transaction ID : SB21B404966849598V

Amount of Each Disbursement this Period

[MEMO ITEM]
Subitemization of Rebekah Clearman (06/26/13)

Full Name (Last, First, Middle Initial)

B. Christian G Darouni

Mailing Address 565 Sandhurst Drive W
Apt. 103

City State Zip Code
Roseville MN 55113-4663

Purpose of Disbursement
Expense Reimbursement - Mileage

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

Transaction ID : SB21B176787917989e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Keith Downey

Mailing Address 6413 Rolf Avenue

City State Zip Code
Minneapolis MN 55439-1435

Purpose of Disbursement
Expense reimbursement-mileage/meals

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

Transaction ID : SB21B182805920327e

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)

A. Mileage

Mailing Address 525 Park Street
Suite 250

City Saint Paul State MN Zip Code 55103-2145

Purpose of Disbursement
Expense reimbursement-mileage

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 06 / 2013

Transaction ID : SB21B407551849585V

Amount of Each Disbursement this Period

235.61

[MEMO ITEM]

Subitemization of Keith Downey (06/20/13)

Full Name (Last, First, Middle Initial)

B. Kelly Fenton

Mailing Address 11333 Sundance Way

City Woodbury State MN Zip Code 55129-5301

Purpose of Disbursement
Employee Expense Reimbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 14 / 2013

Transaction ID : SB21B518654917930e

Amount of Each Disbursement this Period

300

Full Name (Last, First, Middle Initial)

C. AT&T Wireless

Mailing Address PO Box 6438

City Carol Stream State IL Zip Code 60197-6438

Purpose of Disbursement
Employee Expense Reimbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 31 / 2013

Transaction ID : SB21B403668849418V

Amount of Each Disbursement this Period

300

[MEMO ITEM]

Subitemization of Kelly Fenton (06/14/13)

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

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

300.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)

A. Alyssa Gunstrom

Mailing Address 7478 50th Street

City State Zip Code
Princeton MN 55371-6410

Purpose of Disbursement
Consulting Fees

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B528007920335e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Andrew Hasek

Mailing Address 1865 Grand Avenue

City State Zip Code
Saint Paul MN 55105-1404

Purpose of Disbursement
Expense Reimbursement-mileage/meals

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B528000920328e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Mileage

Mailing Address 525 Park Street
Suite 250

City State Zip Code
Saint Paul MN 55103-2145

Purpose of Disbursement
Expense Reimbursement-mileage

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B407551849594V

Amount of Each Disbursement this Period

[MEMO ITEM]
Subitemization of Andrew Hasek (06/25/13)

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)

A. Mileage

Mailing Address 525 Park Street
Suite 250

City Saint Paul State MN Zip Code 55103-2145

Purpose of Disbursement
Expense Reimbursement-mileage

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 10 / 2013

Transaction ID : SB21B407551849590V

Amount of Each Disbursement this Period

510.08

[MEMO ITEM]

Subitemization of Andrew Hasek (06/25/13)

Full Name (Last, First, Middle Initial)

B. William Hastreiter

Mailing Address 580 Grand Avenue
Apt. 2

City Saint Paul State MN Zip Code 55102-2687

Purpose of Disbursement
Expense reimbursement-IT services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 05 / 2013

Transaction ID : SB21B222320920323e

Amount of Each Disbursement this Period

382.33

Full Name (Last, First, Middle Initial)

C. Google.com

Mailing Address 1600 Amphitheatre Parkway

City Mountain View State CA Zip Code 94043-1351

Purpose of Disbursement
Email services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 02 / 2013

Transaction ID : SB21B497312849579V

Amount of Each Disbursement this Period

197.89

[MEMO ITEM]

Subitemization of William Hastreiter (06/05/13)

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

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

382.33

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial) A. Ronald Huettl		Date of Disbursement MM / DD / YYYY 06 / 20 / 2013
Mailing Address 1905 Bluestem Lane		Transaction ID : SB21B174233920325e
City Shoreview	State MN	
Purpose of Disbursement Expense reimbursement-meals/paper		Amount of Each Disbursement this Period
Candidate Name		153.71
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) ▼	Category/ Type 001
State: District:		

Full Name (Last, First, Middle Initial) B. Office Max - St. Paul		Date of Disbursement MM / DD / YYYY 06 / 10 / 2013
Mailing Address 1490 University Avenue W		Transaction ID : SB21B404966849582V
City Saint Paul	State MN	
Purpose of Disbursement Expense reimbursement-printer paper		Amount of Each Disbursement this Period
Candidate Name		20
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) ▼	Category/ Type 001
State: District:		

[MEMO ITEM]
Subitemization of Ronald Huettl (06/20/13)

Full Name (Last, First, Middle Initial) C. Health Partners		Date of Disbursement MM / DD / YYYY 06 / 06 / 2013
Mailing Address PO Box 1309		Transaction ID : SB21B218277917799e
City Minneapolis	State MN	
Purpose of Disbursement Party Health Insurance		Amount of Each Disbursement this Period
Candidate Name		3174.9
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) ▼	Category/ Type 001
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3328.61
TOTAL This Period (last page this line number only).....	43883.34

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input checked="" type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)

A. Alliance Bank

Mailing Address 444 Cedar Street

City State Zip Code
Saint Paul MN 55101-2179

Purpose of Disbursement
Loan Repayment

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		1	4		2	0	1	3		

Transaction ID : SB26-400292-95-R

Amount of Each Disbursement this Period

3	7	6	8	.	2	9
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

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
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

--	--	--	--	--	--	--

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

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

3	7	6	8	.	2	9
---	---	---	---	---	---	---

3	7	6	8	.	2	9
---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)

A. ADP, Inc

Mailing Address 504 Clinton Center Drive
Suite 4400

City Clinton State MS Zip Code 39056-5610

Purpose of Disbursement
FEA 100% Federal: FEA Garnishments

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 14 / 2013

Transaction ID : **SB30b514577920376e**

Amount of Each Disbursement this Period

1123.86

Full Name (Last, First, Middle Initial)

B. Wisc Child Support Wi Sctf

Mailing Address Po Box 7914

City Milwaukee State WI Zip Code 53207

Purpose of Disbursement
FEA 100% Federal: FEA Garnishments

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 14 / 2013

Transaction ID : **SB30b178904849602V**

Amount of Each Disbursement this Period

60

[MEMO ITEM]

Subitemization of ADP, Inc (06/14/13)

Full Name (Last, First, Middle Initial)

C. MN Child Support Center

Mailing Address PO Box 64306

City Saint Paul State MN Zip Code 55164-0306

Purpose of Disbursement
FEA 100% Federal: FEA Garnishments

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 14 / 2013

Transaction ID : **SB30b421261849601V**

Amount of Each Disbursement this Period

924.4

[MEMO ITEM]

Subitemization of ADP, Inc (06/14/13)

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

1123.86

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)

A. Indiana Central Collection Unit

Mailing Address 200 E Washington Street
Suite W123

City Indianapolis State IN Zip Code 46204-3335

Purpose of Disbursement
FEA 100% Federal: FEA Garnishments

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 14 / 2013

Transaction ID : SB30b487042849603V

Amount of Each Disbursement this Period

118

[MEMO ITEM]

Subitemization of ADP, Inc (06/14/13)

Full Name (Last, First, Middle Initial)

B. Performant Recovery INC

Mailing Address 333 N Canyons Parkway
Suite 100

City Livermore State CA Zip Code 94551-9480

Purpose of Disbursement
FEA 100% Federal: FEA Garnishments

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 14 / 2013

Transaction ID : SB30b519506849600V

Amount of Each Disbursement this Period

21.46

[MEMO ITEM]

Subitemization of ADP, Inc (06/14/13)

Full Name (Last, First, Middle Initial)

C. ADP, Inc

Mailing Address 504 Clinton Center Drive
Suite 4400

City Clinton State MS Zip Code 39056-5610

Purpose of Disbursement
FEA 100% Federal: FEA Payroll taxes

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 14 / 2013

Transaction ID : SB30b514577920377e

Amount of Each Disbursement this Period

9547.74

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

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

9547.74

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)

A. MN Dept of Revenue

Mailing Address 658 Cedar Street
Suite 400

City Saint Paul State MN Zip Code 55155-1603

Purpose of Disbursement
FEA 100% Federal: FEA Payroll taxes

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 14 / 2013

Transaction ID : **SB30b421278849605V**

Amount of Each Disbursement this Period

1135.66

[MEMO ITEM]

Subitemization of ADP, Inc (06/14/13)

Full Name (Last, First, Middle Initial)

B. Internal Revenue Service

Mailing Address 43251 PO Box

City Ogden State UT Zip Code 84201-0001

Purpose of Disbursement
FEA 100% Federal: FEA Payroll taxes

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 14 / 2013

Transaction ID : **SB30b402470849604V**

Amount of Each Disbursement this Period

7661.93

[MEMO ITEM]

Subitemization of ADP, Inc (06/14/13)

Full Name (Last, First, Middle Initial)

C. ADP, Inc

Mailing Address 504 Clinton Center Drive
Suite 4400

City Clinton State MS Zip Code 39056-5610

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 14 / 2013

Transaction ID : **SB30b514577920462e**

Amount of Each Disbursement this Period

22536.93

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

22536.93

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)

A. Aaron Heidebrink

Mailing Address 1975 W University Ave
#242

City St Paul State MN Zip Code 55105

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
06 / 14 / 2013

Transaction ID : SB30b173146849621V

Amount of Each Disbursement this Period

698.9

[MEMO ITEM]

Subitemization of ADP, Inc (06/14/13)

Full Name (Last, First, Middle Initial)

B. Sarah Hansen-Jones

Mailing Address 505 Hoyt Avenue E

City Saint Paul State MN Zip Code 55130-3016

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
06 / 14 / 2013

Transaction ID : SB30b173067849620V

Amount of Each Disbursement this Period

306.12

[MEMO ITEM]

Subitemization of ADP, Inc (06/14/13)

Full Name (Last, First, Middle Initial)

C. Thomas Hoffman

Mailing Address 1543 Goose Lake Road

City Saint Paul State MN Zip Code 55110-4169

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
06 / 14 / 2013

Transaction ID : SB30b124560849623V

Amount of Each Disbursement this Period

540.42

[MEMO ITEM]

Subitemization of ADP, Inc (06/14/13)

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)

A. Steven Mcallister

Mailing Address 14793 Sherbrooke Beach Road

City State Zip Code
Pelican Rapids MN 56572-9333

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	4			2	0	1	3		

Transaction ID : SB30b132626849625V

Amount of Each Disbursement this Period

2	3	7	.	3	8
---	---	---	---	---	---

[MEMO ITEM]

Subitemization of ADP, Inc (06/14/13)

Full Name (Last, First, Middle Initial)

B. William Milbach

Mailing Address 1438 Pascal Street N

City State Zip Code
Saint Paul MN 55108-2437

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	4			2	0	1	3		

Transaction ID : SB30b172986849626V

Amount of Each Disbursement this Period

9	3	7	.	3	5
---	---	---	---	---	---

[MEMO ITEM]

Subitemization of ADP, Inc (06/14/13)

Full Name (Last, First, Middle Initial)

C. Michael A. Wright

Mailing Address 2477 Indian Way

City State Zip Code
Saint Paul MN 55109-1613

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	4			2	0	1	3		

Transaction ID : SB30b173236849633V

Amount of Each Disbursement this Period

3	2	4	.	4	6
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[MEMO ITEM]

Subitemization of ADP, Inc (06/14/13)

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

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

0	0	0
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0	0	0
---	---	---

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)

A. Christian G Darouni

Mailing Address 565 Sandhurst Drive W
Apt. 103

City Roseville State MN Zip Code 55113-4663

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30b176787849614V

Amount of Each Disbursement this Period

[MEMO ITEM]

Subitemization of ADP, Inc (06/14/13)

Full Name (Last, First, Middle Initial)

B. Keith Downey

Mailing Address 6413 Rolf Avenue

City Minneapolis State MN Zip Code 55439-1435

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30b182805849639V

Amount of Each Disbursement this Period

[MEMO ITEM]

Subitemization of ADP, Inc (06/14/13)

Full Name (Last, First, Middle Initial)

C. Lori-Anne Pizzella

Mailing Address 680 Stewart Avenue

City Saint Paul State MN Zip Code 55102-4117

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30b174562849630V

Amount of Each Disbursement this Period

[MEMO ITEM]

Subitemization of ADP, Inc (06/14/13)

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)

A. Shawn Ricks

Mailing Address 1871 7th Street E
Apt. 6

City Saint Paul State MN Zip Code 55119-4850

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30b175468849631V

Amount of Each Disbursement this Period

[MEMO ITEM]

Subitemization of ADP, Inc (06/14/13)

Full Name (Last, First, Middle Initial)

B. William Hastreiter

Mailing Address 580 Grand Avenue
Apt. 2

City Saint Paul State MN Zip Code 55102-2687

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30b222320849634V

Amount of Each Disbursement this Period

[MEMO ITEM]

Subitemization of ADP, Inc (06/14/13)

Full Name (Last, First, Middle Initial)

C. Kathleen Hupalo

Mailing Address 684 Delaware Avenue

City Saint Paul State MN Zip Code 55107-2534

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30b176320849624V

Amount of Each Disbursement this Period

[MEMO ITEM]

Subitemization of ADP, Inc (06/14/13)

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial) A. Ronald Huettl		Date of Disbursement MM / DD / YYYY 06 / 14 / 2013
Mailing Address 1905 Bluestem Lane		Transaction ID : SB30b174233849635V
City Shoreview	State MN	
Purpose of Disbursement FEA 100% Federal: FEA Payroll		Amount of Each Disbursement this Period 1662.34
Candidate Name		[MEMO ITEM] Subitemization of ADP, Inc (06/14/13)
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:	Category/ Type	

Full Name (Last, First, Middle Initial) B. Loland L Crocket		Date of Disbursement MM / DD / YYYY 06 / 14 / 2013
Mailing Address 1164 Mackubin Street Apt. 208		Transaction ID : SB30b455216849612V
City Saint Paul	State MN	
Purpose of Disbursement FEA 100% Federal: FEA Payroll		Amount of Each Disbursement this Period 347.81
Candidate Name		[MEMO ITEM] Subitemization of ADP, Inc (06/14/13)
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:	Category/ Type	

Full Name (Last, First, Middle Initial) C. Dana Alpeter		Date of Disbursement MM / DD / YYYY 06 / 14 / 2013
Mailing Address 4405 Browndale Avenue		Transaction ID : SB30b525126849638V
City Edina	State MN	
Purpose of Disbursement FEA 100% Federal: FEA Payroll		Amount of Each Disbursement this Period 4799.97
Candidate Name		[MEMO ITEM] Subitemization of ADP, Inc (06/14/13)
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:	Category/ Type	

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial) A. Francis Dana Payne III		Date of Disbursement MM / DD / YYYY 06 / 14 / 2013
Mailing Address 1314 Marquette Avenue Apt. 605		Transaction ID : SB30b476812849629V
City Minneapolis	State MN Zip Code 55403-4119	
Purpose of Disbursement FEA 100% Federal: FEA Payroll	Category/ Type	Amount of Each Disbursement this Period 254.9
Candidate Name		[MEMO ITEM] Subitemization of ADP, Inc (06/14/13)
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. Rebekah Clearman		Date of Disbursement MM / DD / YYYY 06 / 14 / 2013
Mailing Address 21311 Rum River Drive		Transaction ID : SB30b525129849636V
City Anoka	State MN Zip Code 55303-8999	
Purpose of Disbursement FEA 100% Federal: FEA Payroll	Category/ Type	Amount of Each Disbursement this Period 155.16
Candidate Name		[MEMO ITEM] Subitemization of ADP, Inc (06/14/13)
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) C. Julie C Moy		Date of Disbursement MM / DD / YYYY 06 / 14 / 2013
Mailing Address 85 Leech Street		Transaction ID : SB30b480238849627V
City Saint Paul	State MN Zip Code 55102-2736	
Purpose of Disbursement FEA 100% Federal: FEA Payroll	Category/ Type	Amount of Each Disbursement this Period 414.57
Candidate Name		[MEMO ITEM] Subitemization of ADP, Inc (06/14/13)
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:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)

A. Landrey L Darouni

Mailing Address 565 Sandhurst Drive W
Apt. 103

City Saint Paul State MN Zip Code 55113-4663

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30b508290849615V

Amount of Each Disbursement this Period

[MEMO ITEM]

Subitemization of ADP, Inc (06/14/13)

Full Name (Last, First, Middle Initial)

B. Weston Crofton-Hofstedt

Mailing Address 795 6th Street E
Apt. 107

City Saint Paul State MN Zip Code 55106-4546

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30b525127849613V

Amount of Each Disbursement this Period

[MEMO ITEM]

Subitemization of ADP, Inc (06/14/13)

Full Name (Last, First, Middle Initial)

C. Larena Gray

Mailing Address 786 Rose Avenue E
1

City Saint Paul State MN Zip Code 55106-2538

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30b525128849618V

Amount of Each Disbursement this Period

[MEMO ITEM]

Subitemization of ADP, Inc (06/14/13)

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)

A. Robert DeHaven

Mailing Address 5112 14th Avenue S

City Minneapolis State MN Zip Code 55417-1802

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 14 / 2013

Transaction ID : SB30b525130849637V

Amount of Each Disbursement this Period

3620.62

[MEMO ITEM]

Subitemization of ADP, Inc (06/14/13)

Full Name (Last, First, Middle Initial)

B. Alexander Argo

Mailing Address 9428 Erin Court

City Woodbury State MN Zip Code 55129-9756

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 14 / 2013

Transaction ID : SB30b178956849610V

Amount of Each Disbursement this Period

301.28

[MEMO ITEM]

Subitemization of ADP, Inc (06/14/13)

Full Name (Last, First, Middle Initial)

C. Robert C. Salender

Mailing Address 435 University Avenue E

City Saint Paul State MN Zip Code 55130-4437

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 14 / 2013

Transaction ID : SB30b226071849632V

Amount of Each Disbursement this Period

659.68

[MEMO ITEM]

Subitemization of ADP, Inc (06/14/13)

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)

A. Eugene Fields

Mailing Address 417 Grand Avenue
Apt. 10

City Saint Paul State MN Zip Code 55102-2635

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 14 / 2013

Transaction ID : SB30b480157849616V

Amount of Each Disbursement this Period

270.87

[MEMO ITEM]

Subitemization of ADP, Inc (06/14/13)

Full Name (Last, First, Middle Initial)

B. Crystal Gardner

Mailing Address 591 Bay Street

City Saint Paul State MN Zip Code 55102-3903

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 14 / 2013

Transaction ID : SB30b223561849617V

Amount of Each Disbursement this Period

32.57

[MEMO ITEM]

Subitemization of ADP, Inc (06/14/13)

Full Name (Last, First, Middle Initial)

C. John L Nelson

Mailing Address 685 Maryland Avenue E
Apt. 1

City Saint Paul State MN Zip Code 55106-2524

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 14 / 2013

Transaction ID : SB30b456372849628V

Amount of Each Disbursement this Period

133.55

[MEMO ITEM]

Subitemization of ADP, Inc (06/14/13)

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

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

0.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)

A. Joseph R Bauman

Mailing Address 435 University Avenue E

City State Zip Code
Saint Paul MN 55130-4437

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30b463485849611V

Amount of Each Disbursement this Period

[MEMO ITEM]

Subitemization of ADP, Inc (06/14/13)

Full Name (Last, First, Middle Initial)

B. Kelly Fenton

Mailing Address 11333 Sundance Way

City State Zip Code
Woodbury MN 55129-5301

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30b518654849640V

Amount of Each Disbursement this Period

[MEMO ITEM]

Subitemization of ADP, Inc (06/14/13)

Full Name (Last, First, Middle Initial)

C. Stephanie D Highley

Mailing Address 782 Geranium Avenue E

City State Zip Code
Saint Paul MN 55106-2534

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30b455989849622V

Amount of Each Disbursement this Period

[MEMO ITEM]

Subitemization of ADP, Inc (06/14/13)

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)

A. ADP, Inc

Mailing Address 504 Clinton Center Drive
Suite 4400

City Clinton State MS Zip Code 39056-5610

Purpose of Disbursement
FEA 100% Federal: FEA Garnishments

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 28 / 2013

Transaction ID : **SB30b514577920463e**

Amount of Each Disbursement this Period

1166.34

Full Name (Last, First, Middle Initial)

B. Indiana Central Collection Unit

Mailing Address 200 E Washington Street
Suite W123

City Indianapolis State IN Zip Code 46204-3335

Purpose of Disbursement
FEA 100% Federal: FEA Garnishments

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 28 / 2013

Transaction ID : **SB30b487042849644V**

Amount of Each Disbursement this Period

118

[MEMO ITEM]
Subitemization of ADP, Inc (06/28/13)

Full Name (Last, First, Middle Initial)

C. Performant Recovery INC

Mailing Address 333 N Canyons Parkway
Suite 100

City Livermore State CA Zip Code 94551-9480

Purpose of Disbursement
FEA 100% Federal: FEA Garnishments

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 28 / 2013

Transaction ID : **SB30b519506849641V**

Amount of Each Disbursement this Period

44.37

[MEMO ITEM]
Subitemization of ADP, Inc (06/28/13)

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

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

1166.34

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)

A. Wisc Child Support Wi Sctf

Mailing Address Po Box 7914

City Milwaukee State WI Zip Code 53207

Purpose of Disbursement
FEA 100% Federal: FEA Garnishments

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 28 / 2013

Transaction ID : SB30b178904849643V

Amount of Each Disbursement this Period

60

[MEMO ITEM]

Subitemization of ADP, Inc (06/28/13)

Full Name (Last, First, Middle Initial)

B. MN Child Support Center

Mailing Address PO Box 64306

City Saint Paul State MN Zip Code 55164-0306

Purpose of Disbursement
FEA 100% Federal: FEA Garnishments

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 28 / 2013

Transaction ID : SB30b421261849642V

Amount of Each Disbursement this Period

943.97

[MEMO ITEM]

Subitemization of ADP, Inc (06/28/13)

Full Name (Last, First, Middle Initial)

C. ADP, Inc

Mailing Address 504 Clinton Center Drive
Suite 4400

City Clinton State MS Zip Code 39056-5610

Purpose of Disbursement
FEA 100% Federal: FEA Payroll taxes

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 28 / 2013

Transaction ID : SB30b514577920465e

Amount of Each Disbursement this Period

7551.36

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

7551.36

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)

A. Internal Revenue Service

Mailing Address 43251 PO Box

City Ogden State UT Zip Code 84201-0001

Purpose of Disbursement
FEA 100% Federal: FEA Payroll taxes

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	1	3

Transaction ID : SB30b402470849647V

Amount of Each Disbursement this Period

5	5	4	7	.	5	5
---	---	---	---	---	---	---

[MEMO ITEM]

Subitemization of ADP, Inc (06/28/13)

Full Name (Last, First, Middle Initial)

B. MN State Unemployment

Mailing Address 332 Minnesota Street

City Saint Paul State MN Zip Code 55101-1314

Purpose of Disbursement
FEA 100% Federal: FEA Payroll taxes

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	1	3

Transaction ID : SB30b422710849649V

Amount of Each Disbursement this Period

1	2	6	3	.	7	1
---	---	---	---	---	---	---

[MEMO ITEM]

Subitemization of ADP, Inc (06/28/13)

Full Name (Last, First, Middle Initial)

C. MN Dept of Revenue

Mailing Address 658 Cedar Street
Suite 400

City Saint Paul State MN Zip Code 55155-1603

Purpose of Disbursement
FEA 100% Federal: FEA Payroll taxes

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	1	3

Transaction ID : SB30b421278849648V

Amount of Each Disbursement this Period

7	4	0	.	1
---	---	---	---	---

[MEMO ITEM]

Subitemization of ADP, Inc (06/28/13)

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

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

0	0	0
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0	0	0
---	---	---

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)

A. ADP, Inc

Mailing Address 504 Clinton Center Drive
Suite 4400

City Clinton State MS Zip Code 39056-5610

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 28 / 2013

Transaction ID : **SB30b514577920467e**

Amount of Each Disbursement this Period

18716.7

Full Name (Last, First, Middle Initial)

B. Aaron Heidebrink

Mailing Address 1975 W University Ave
#242

City St Paul State MN Zip Code 55105

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 28 / 2013

Transaction ID : **SB30b173146849662V**

Amount of Each Disbursement this Period

539.72

[MEMO ITEM]
Subitemization of ADP, Inc (06/28/13)

Full Name (Last, First, Middle Initial)

C. Sarah Hansen-Jones

Mailing Address 505 Hoyt Avenue E

City Saint Paul State MN Zip Code 55130-3016

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 28 / 2013

Transaction ID : **SB30b173067849661V**

Amount of Each Disbursement this Period

243.2

[MEMO ITEM]
Subitemization of ADP, Inc (06/28/13)

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

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

18716.70

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)

A. William Milbach

Mailing Address 1438 Pascal Street N

City State Zip Code
Saint Paul MN 55108-2437

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	1	3

Transaction ID : SB30b172986849667V

Amount of Each Disbursement this Period

9	3	7	.	3	4
---	---	---	---	---	---

[MEMO ITEM]

Subitemization of ADP, Inc (06/28/13)

Full Name (Last, First, Middle Initial)

B. Steven Mcallister

Mailing Address 14793 Sherbrooke Beach Road

City State Zip Code
Pelican Rapids MN 56572-9333

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	1	3

Transaction ID : SB30b132626849666V

Amount of Each Disbursement this Period

1	5	0	.	4	3
---	---	---	---	---	---

[MEMO ITEM]

Subitemization of ADP, Inc (06/28/13)

Full Name (Last, First, Middle Initial)

C. Thomas Hoffman

Mailing Address 1543 Goose Lake Road

City State Zip Code
Saint Paul MN 55110-4169

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	1	3

Transaction ID : SB30b124560849664V

Amount of Each Disbursement this Period

6	1	7	.	5	6
---	---	---	---	---	---

[MEMO ITEM]

Subitemization of ADP, Inc (06/28/13)

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

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

0	0	0	.	0	0
---	---	---	---	---	---

0	0	0	.	0	0
---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)

A. Breanna Barr

Mailing Address 736 Wilson Avenue

City State Zip Code
Saint Paul MN 55106-5526

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	1	3

Transaction ID : SB30b189404849652V

Amount of Each Disbursement this Period

1	1	0	9	0	0	0	0	0	0
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[MEMO ITEM]

Subitemization of ADP, Inc (06/28/13)

Full Name (Last, First, Middle Initial)

B. Ronald Huettl

Mailing Address 1905 Bluestem Lane

City State Zip Code
Shoreview MN 55126-5017

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	1	3

Transaction ID : SB30b174233849676V

Amount of Each Disbursement this Period

1	6	6	2	3	5	0	0	0	0
---	---	---	---	---	---	---	---	---	---

[MEMO ITEM]

Subitemization of ADP, Inc (06/28/13)

Full Name (Last, First, Middle Initial)

C. Robert C. Salender

Mailing Address 435 University Avenue E

City State Zip Code
Saint Paul MN 55130-4437

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	1	3

Transaction ID : SB30b226071849673V

Amount of Each Disbursement this Period

6	5	8	6	6	0	0	0	0	0
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[MEMO ITEM]

Subitemization of ADP, Inc (06/28/13)

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

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

0	0	0	0	0	0	0	0	0	0
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0	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)

A. Kathleen Hupalo

Mailing Address 684 Delaware Avenue

City State Zip Code
Saint Paul MN 55107-2534

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	1	3

Transaction ID : SB30b176320849665V

Amount of Each Disbursement this Period

2	5	6	.	9	3
---	---	---	---	---	---

[MEMO ITEM]

Subitemization of ADP, Inc (06/28/13)

Full Name (Last, First, Middle Initial)

B. Shawn Ricks

Mailing Address 1871 7th Street E
Apt. 6

City State Zip Code
Saint Paul MN 55119-4850

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	1	3

Transaction ID : SB30b175468849672V

Amount of Each Disbursement this Period

6	0	1	.	6
---	---	---	---	---

[MEMO ITEM]

Subitemization of ADP, Inc (06/28/13)

Full Name (Last, First, Middle Initial)

C. Alexander Argo

Mailing Address 9428 Erin Court

City State Zip Code
Woodbury MN 55129-9756

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	1	3

Transaction ID : SB30b178956849651V

Amount of Each Disbursement this Period

3	8	6	.	2	7
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[MEMO ITEM]

Subitemization of ADP, Inc (06/28/13)

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

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

0	0	0
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0	0	0
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial) A. Lori-Anne Pizzella		Date of Disbursement MM / DD / YYYY 06 / 28 / 2013
Mailing Address 680 Stewart Avenue		Transaction ID : SB30b174562849671V
City Saint Paul	State MN	
Purpose of Disbursement FEA 100% Federal: FEA Payroll		Amount of Each Disbursement this Period 508.41
Candidate Name		[MEMO ITEM] Subitemization of ADP, Inc (06/28/13)
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:	Category/Type	

Full Name (Last, First, Middle Initial) B. Keith Downey		Date of Disbursement MM / DD / YYYY 06 / 28 / 2013
Mailing Address 6413 Rolf Avenue		Transaction ID : SB30b182805849680V
City Minneapolis	State MN	
Purpose of Disbursement FEA 100% Federal: FEA Payroll		Amount of Each Disbursement this Period 887.99
Candidate Name		[MEMO ITEM] Subitemization of ADP, Inc (06/28/13)
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:	Category/Type	

Full Name (Last, First, Middle Initial) C. Christian G Darouni		Date of Disbursement MM / DD / YYYY 06 / 28 / 2013
Mailing Address 565 Sandhurst Drive W Apt. 103		Transaction ID : SB30b176787849655V
City Roseville	State MN	
Purpose of Disbursement FEA 100% Federal: FEA Payroll		Amount of Each Disbursement this Period 1214.11
Candidate Name		[MEMO ITEM] Subitemization of ADP, Inc (06/28/13)
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:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)

A. Michael A. Wright

Mailing Address 2477 Indian Way

City State Zip Code
Saint Paul MN 55109-1613

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	8			2	0	1	3		

Transaction ID : SB30b173236849674V

Amount of Each Disbursement this Period

2	0	6	.	6	2
---	---	---	---	---	---

[MEMO ITEM]

Subitemization of ADP, Inc (06/28/13)

Full Name (Last, First, Middle Initial)

B. Landrey L Darouni

Mailing Address 565 Sandhurst Drive W
Apt. 103

City State Zip Code
Saint Paul MN 55113-4663

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	8			2	0	1	3		

Transaction ID : SB30b508290849656V

Amount of Each Disbursement this Period

3	4	9	.	5	8
---	---	---	---	---	---

[MEMO ITEM]

Subitemization of ADP, Inc (06/28/13)

Full Name (Last, First, Middle Initial)

C. Rebekah Clearman

Mailing Address 21311 Rum River Drive

City State Zip Code
Anoka MN 55303-8999

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	8			2	0	1	3		

Transaction ID : SB30b525129849677V

Amount of Each Disbursement this Period

1	5	5	.	1	4
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[MEMO ITEM]

Subitemization of ADP, Inc (06/28/13)

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

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

0	0	0
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0	0	0
---	---	---

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial) A. Robert DeHaven		Date of Disbursement MM / DD / YYYY 06 / 28 / 2013
Mailing Address 5112 14th Avenue S		Transaction ID : SB30b525130849678V
City Minneapolis	State MN	
Purpose of Disbursement FEA 100% Federal: FEA Payroll		Amount of Each Disbursement this Period 3620.61
Candidate Name		[MEMO ITEM] Subitemization of ADP, Inc (06/28/13)
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:	Category/Type	

Full Name (Last, First, Middle Initial) B. Julie C Moy		Date of Disbursement MM / DD / YYYY 06 / 28 / 2013
Mailing Address 85 Leech Street		Transaction ID : SB30b480238849668V
City Saint Paul	State MN	
Purpose of Disbursement FEA 100% Federal: FEA Payroll		Amount of Each Disbursement this Period 368.91
Candidate Name		[MEMO ITEM] Subitemization of ADP, Inc (06/28/13)
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:	Category/Type	

Full Name (Last, First, Middle Initial) C. Francis Dana Payne III		Date of Disbursement MM / DD / YYYY 06 / 28 / 2013
Mailing Address 1314 Marquette Avenue Apt. 605		Transaction ID : SB30b476812849670V
City Minneapolis	State MN	
Purpose of Disbursement FEA 100% Federal: FEA Payroll		Amount of Each Disbursement this Period 889.95
Candidate Name		[MEMO ITEM] Subitemization of ADP, Inc (06/28/13)
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:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)

A. Larena Gray

Mailing Address 786 Rose Avenue E
1

City State Zip Code
Saint Paul MN 55106-2538

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	8			2	0	1	3		

Transaction ID : SB30b525128849659V

Amount of Each Disbursement this Period

9	4	.	1	7
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[MEMO ITEM]

Subitemization of ADP, Inc (06/28/13)

Full Name (Last, First, Middle Initial)

B. Dana Alpeter

Mailing Address 4405 Browndale Avenue

City State Zip Code
Edina MN 55424-1017

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	8			2	0	1	3		

Transaction ID : SB30b525126849679V

Amount of Each Disbursement this Period

8	2	4	.	6	3
---	---	---	---	---	---

[MEMO ITEM]

Subitemization of ADP, Inc (06/28/13)

Full Name (Last, First, Middle Initial)

C. Stephanie D Highley

Mailing Address 782 Geranium Avenue E

City State Zip Code
Saint Paul MN 55106-2534

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	8			2	0	1	3		

Transaction ID : SB30b455989849663V

Amount of Each Disbursement this Period

6	1	.	9	3
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[MEMO ITEM]

Subitemization of ADP, Inc (06/28/13)

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

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

0	0	0
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)

A. Kelly Fenton

Mailing Address 11333 Sundance Way

City Woodbury State MN Zip Code 55129-5301

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	1	3

Transaction ID : SB30b518654849681V

Amount of Each Disbursement this Period

1	0	0	2	3	2
---	---	---	---	---	---

[MEMO ITEM]

Subitemization of ADP, Inc (06/28/13)

Full Name (Last, First, Middle Initial)

B. John L Nelson

Mailing Address 685 Maryland Avenue E
Apt. 1

City Saint Paul State MN Zip Code 55106-2524

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	1	3

Transaction ID : SB30b456372849669V

Amount of Each Disbursement this Period

1	3	4	9	3
---	---	---	---	---

[MEMO ITEM]

Subitemization of ADP, Inc (06/28/13)

Full Name (Last, First, Middle Initial)

C. Crystal Gardner

Mailing Address 591 Bay Street

City Saint Paul State MN Zip Code 55102-3903

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	1	3

Transaction ID : SB30b223561849658V

Amount of Each Disbursement this Period

1	7	4	7	6
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[MEMO ITEM]

Subitemization of ADP, Inc (06/28/13)

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

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

0	0	0	0
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0	0	0	0
---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)

A. Eugene Fields

Mailing Address 417 Grand Avenue
Apt. 10

City Saint Paul State MN Zip Code 55102-2635

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 28 / 2013

Transaction ID : SB30b480157849657V

Amount of Each Disbursement this Period

226.24

[MEMO ITEM]

Subitemization of ADP, Inc (06/28/13)

Full Name (Last, First, Middle Initial)

B. Loland L Crocket

Mailing Address 1164 Mackubin Street
Apt. 208

City Saint Paul State MN Zip Code 55117-4744

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 28 / 2013

Transaction ID : SB30b455216849654V

Amount of Each Disbursement this Period

323.04

[MEMO ITEM]

Subitemization of ADP, Inc (06/28/13)

Full Name (Last, First, Middle Initial)

C. Joseph R Bauman

Mailing Address 435 University Avenue E

City Saint Paul State MN Zip Code 55130-4437

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 28 / 2013

Transaction ID : SB30b463485849653V

Amount of Each Disbursement this Period

251.43

[MEMO ITEM]

Subitemization of ADP, Inc (06/28/13)

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

Full Name (Last, First, Middle Initial)

A. Stephen D Greene

Mailing Address 325 Marie

City State Zip Code
Saint Paul MN 55106

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	8			2	0	1	3		

Transaction ID : SB30b455563849660V

Amount of Each Disbursement this Period

1	7	6	.	7	2
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[MEMO ITEM]

Subitemization of ADP, Inc (06/28/13)

Full Name (Last, First, Middle Initial)

B. William Hastreiter

Mailing Address 580 Grand Avenue
Apt. 2

City State Zip Code
Saint Paul MN 55102-2687

Purpose of Disbursement
FEA 100% Federal: FEA Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	8			2	0	1	3		

Transaction ID : SB30b222320849675V

Amount of Each Disbursement this Period

1	0	8	.	0	9	6
---	---	---	---	---	---	---

[MEMO ITEM]

Subitemization of ADP, Inc (06/28/13)

Full Name (Last, First, Middle Initial)

C. Sarah Hansen-Jones

Mailing Address 505 Hoyt Avenue E

City State Zip Code
Saint Paul MN 55130-3016

Purpose of Disbursement
FEA 100% Federal: FEA Salary

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	4			2	0	1	3		

Transaction ID : SB30b173067920471e

Amount of Each Disbursement this Period

4	8	.	0	3
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SUBTOTAL of Disbursements This Page (optional)..... ▶

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

4	8	.	0	3
---	---	---	---	---

6	0	6	9	0	.	9	6
---	---	---	---	---	---	---	---

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Republican Party of Minnesota - Federal** Transaction ID : **SC/10-L575213**

LOAN SOURCE Full Name (Last, First, Middle Initial) Alliance Bank	Election: 1990 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 444 Cedar Street	
City Saint Paul State MN ZIP Code 55101-2179	

Original Amount of Loan 20000	Cumulative Payment To Date 0	Balance Outstanding at Close of This Period 20000
----------------------------------	---------------------------------	------------------------------------------------------

TERMS

Date Incurred: MM / DD / YYYY (07 / 01 / 2010) Date Due: MM / DD / YYYY (02 / 24 / 2014) Interest Rate: 5.00 % (apr) Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....▶	20000.00
TOTALS This Period (last page in this line only).....▶	[]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Republican Party of Minnesota - Federal** Transaction ID : **SC/10-L802079**

LOAN SOURCE Full Name (Last, First, Middle Initial) Alliance Bank	Election: 1990 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 444 Cedar Street	
City Saint Paul State MN ZIP Code 55101-2179	

Original Amount of Loan 208043.66	Cumulative Payment To Date 119229.42	Balance Outstanding at Close of This Period 88814.24
--------------------------------------	-----------------------------------------	---------------------------------------------------------

TERMS

Date Incurred: MM / DD / YYYY (08 / 13 / 2010) Date Due: MM / DD / YYYY (08 / 09 / 2013) Interest Rate: 5.00 % (apr) Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....▶	88814.24
TOTALS This Period (last page in this line only).....▶	[]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Republican Party of Minnesota - Federal** Transaction ID : **SC/10-L802082**

LOAN SOURCE Full Name (Last, First, Middle Initial) Alliance Bank	Election: 1990 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 444 Cedar Street	
City Saint Paul State MN ZIP Code 55101-2179	

Original Amount of Loan 25000	Cumulative Payment To Date 0	Balance Outstanding at Close of This Period 25000
----------------------------------	---------------------------------	------------------------------------------------------

TERMS

Date Incurred MM / DD / YYYY 12 / 18 / 2012	Date Due MM / DD / YYYY 08 / 09 / 2013	Interest Rate 5.00 % (apr)	Secured: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
---------------------------------------------------	----------------------------------------------	-------------------------------	---------------------------------------------------------------------------------

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶	25000.00
TOTALS This Period (last page in this line only)..... ▶	133814.24

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 77 OF 111
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Trimble & Associates	Nature of Debt (Purpose): 1000:ADMINISTRATION B 211: Legal Fees
Mailing Address 10210 WAYZATA BLVD SUITE 130	
City State Zip Code Hopkins MN 55305	

Outstanding Balance Beginning This Period <input type="text" value="38289.82"/>	Transaction ID : SD10-DEBT872719	
Amount Incurred This Period <input type="text" value="0"/>	Payment This Period <input type="text" value="0"/>	Outstanding Balance at Close of This Period <input type="text" value="38289.82"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Whatever Services	Nature of Debt (Purpose): 1000:ADMINISTRATION B 211: Accounting services
Mailing Address 240 Wyndham Circle W	
City State Zip Code New Brighton MN 55112-3167	

Outstanding Balance Beginning This Period <input type="text" value="660"/>	Transaction ID : SD10-DEBT920122	
Amount Incurred This Period <input type="text" value="675"/>	Payment This Period <input type="text" value="660"/>	Outstanding Balance at Close of This Period <input type="text" value="675"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Cardinals FEC Compliance Services	Nature of Debt (Purpose): 1000:ADMINISTRATION B 211: FEC Compliance Services/Accounting
Mailing Address 6053 Hudson Road	
City State Zip Code Woodbury MN 55125-1015	

Outstanding Balance Beginning This Period <input type="text" value="87323.28"/>	Transaction ID : SD10-DEBT904824	
Amount Incurred This Period <input type="text" value="0"/>	Payment This Period <input type="text" value="0"/>	Outstanding Balance at Close of This Period <input type="text" value="87323.28"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="126288.10"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 78 OF 111
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Bryan Cave LLP	Nature of Debt (Purpose): 1000:ADMINISTRATION B 211: Legal Fees
Mailing Address 700 13th Street NW	
City State Zip Code Washington DC 20005-3960	

Outstanding Balance Beginning This Period 25482.92	Transaction ID : SD10-DEBT873512	
Amount Incurred This Period 0	Payment This Period 0	Outstanding Balance at Close of This Period 25482.92

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Zayo Enterprise Networks	Nature of Debt (Purpose): 1000:ADMINISTRATION B 211: NOTE: VENDOR CREDIT FOR INTERNET
Mailing Address PO Box 952151	
City State Zip Code Dallas TX 75395-0001	

Outstanding Balance Beginning This Period 3228.9	Transaction ID : SD10-DEBT901544	
Amount Incurred This Period 0	Payment This Period 0	Outstanding Balance at Close of This Period 3228.9

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Popp.com	Nature of Debt (Purpose): 1000:ADMINISTRATION B 211: Office phones
Mailing Address PO Box 27110	
City State Zip Code Minneapolis MN 55427-0110	

Outstanding Balance Beginning This Period 4227.31	Transaction ID : SD10-DEBT917803	
Amount Incurred This Period 0	Payment This Period 0	Outstanding Balance at Close of This Period 4227.31

1) SUBTOTALS This Period This Page (optional)..... ▶	32939.13
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 79 OF 111
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor RBA Consulting	Nature of Debt (Purpose): 1000:ADMINISTRATION B 211: Party Software Consulting
Mailing Address 445 Lake Street E Suite 120	
City State Zip Code Wayzata MN 55391-1670	

Outstanding Balance Beginning This Period <input type="text" value="10000"/>	Transaction ID : SD10-DEBT871984	
Amount Incurred This Period <input type="text" value="0"/>	Payment This Period <input type="text" value="0"/>	Outstanding Balance at Close of This Period <input type="text" value="10000"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Amato & Associates, llc	Nature of Debt (Purpose): 1000:ADMINISTRATION B 211: Party IT/Web Services
Mailing Address PO Box 879	
City State Zip Code Hopkins MN 55343-0879	

Outstanding Balance Beginning This Period <input type="text" value="5000"/>	Transaction ID : SD10-DEBT872973	
Amount Incurred This Period <input type="text" value="0"/>	Payment This Period <input type="text" value="0"/>	Outstanding Balance at Close of This Period <input type="text" value="5000"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Business Data Records	Nature of Debt (Purpose): 1000:ADMINISTRATION B 211: Equipment Maintenance
Mailing Address 201 9th Avenue SW	
City State Zip Code Saint Paul MN 55112-3211	

Outstanding Balance Beginning This Period <input type="text" value="46.88"/>	Transaction ID : SD10-DEBT920128	
Amount Incurred This Period <input type="text" value="93.04"/>	Payment This Period <input type="text" value="46.88"/>	Outstanding Balance at Close of This Period <input type="text" value="93.04"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="15093.04"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 80 OF 111
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Verizon Wireless	Nature of Debt (Purpose): 1000:ADMINISTRATION B 211: Party cell phones
Mailing Address PO Box 25505	
City State Zip Code Lehigh Valley PA 18002-5505	

Outstanding Balance Beginning This Period 406.36	Transaction ID : SD10-DEBT920121	
Amount Incurred This Period 412.13	Payment This Period 0	Outstanding Balance at Close of This Period 818.49

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Wiley Rein LLP	Nature of Debt (Purpose): 1000:ADMINISTRATION B 211: Legal Fees
Mailing Address 1776 K Street NW	
City State Zip Code Washington DC 20006-2304	

Outstanding Balance Beginning This Period 18795.26	Transaction ID : SD10-DEBT872798	
Amount Incurred This Period 0	Payment This Period 0	Outstanding Balance at Close of This Period 18795.26

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor QBE	Nature of Debt (Purpose): 1000:ADMINISTRATION B 211: Party insurance
Mailing Address PO Box 3109	
City State Zip Code Milwaukee WI 53201-3109	

Outstanding Balance Beginning This Period 687.82	Transaction ID : SD10-DEBT920091	
Amount Incurred This Period 687.77	Payment This Period 687.82	Outstanding Balance at Close of This Period 687.77

1) SUBTOTALS This Period This Page (optional)..... ▶	20301.52
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 81 OF 111
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor BUSINESSWARE SOLUTIONS	Nature of Debt (Purpose): 1000:ADMINISTRATION B 211: IT Consultants
Mailing Address 500 W 79th Street Suite 3	
City State Zip Code Chanhassen MN 55317-8316	

Outstanding Balance Beginning This Period <input type="text" value="0"/>	Transaction ID : SD10-DEBT918922	
Amount Incurred This Period <input type="text" value="553.93"/>	Payment This Period <input type="text" value="0"/>	Outstanding Balance at Close of This Period <input type="text" value="553.93"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jeffrey Johnson	Nature of Debt (Purpose): Administrative/Salary/Overhead: Reimbursed Travel
Mailing Address 4620 Minnesota Lane N	
City State Zip Code Minneapolis MN 55446-2160	

Outstanding Balance Beginning This Period <input type="text" value="1197.3"/>	Transaction ID : SD10-DEBT917929	
Amount Incurred This Period <input type="text" value="0"/>	Payment This Period <input type="text" value="0"/>	Outstanding Balance at Close of This Period <input type="text" value="1197.3"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Thomas Petters	Nature of Debt (Purpose): Administrative/Salary/Overhead: Contribution Refund
Mailing Address 6429 Margarets Lane	
City State Zip Code Edina MN 55439-1017	

Outstanding Balance Beginning This Period <input type="text" value="10000"/>	Transaction ID : SD10-DEBT897208	
Amount Incurred This Period <input type="text" value="0"/>	Payment This Period <input type="text" value="0"/>	Outstanding Balance at Close of This Period <input type="text" value="10000"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="11751.23"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 82 OF 111
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Christian G Darouni	Nature of Debt (Purpose): Administrative/Salary/Overhead: Expense reimbursement
Mailing Address 565 Sandhurst Drive W Apt. 103	
City State Zip Code Roseville MN 55113-4663	

Outstanding Balance Beginning This Period	Transaction ID : SD10-DEBT920124	
<input type="text" value="14.13"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="61.43"/>	<input type="text" value="14.13"/>	<input type="text" value="61.43"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Janet Beihoffer	Nature of Debt (Purpose): Administrative/Salary/Overhead: Milleage Reimbursement
Mailing Address 16558 Irwindale Way	
City State Zip Code Lakeville MN 55044-4514	

Outstanding Balance Beginning This Period	Transaction ID : SD10-DEBT915346	
<input type="text" value="1288.6"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="1288.6"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Health Partners	Nature of Debt (Purpose): Administrative/Salary/Overhead: NOTE: Vendor credit
Mailing Address PO Box 1309	
City State Zip Code Minneapolis MN 55440-1309	

Outstanding Balance Beginning This Period	Transaction ID : SD10-DEBT920473	
<input type="text" value="3174.9"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="-1423.1"/>	<input type="text" value="3174.9"/>	<input type="text" value="-1423.1"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="-73.07"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 83 OF 111
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor William Hastreiter	Nature of Debt (Purpose): Administrative/Salary/Overhead: Expense reimbursement-cell phone
Mailing Address 580 Grand Avenue Apt. 2	
City State Zip Code Saint Paul MN 55102-2687	

Outstanding Balance Beginning This Period <input type="text" value="0"/>	Transaction ID : SD10-DEBT920126	
Amount Incurred This Period <input type="text" value="100"/>	Payment This Period <input type="text" value="0"/>	Outstanding Balance at Close of This Period <input type="text" value="100"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Direct Mail Systems	Nature of Debt (Purpose): Administrative/Salary/Overhead: Party Direct Mailing
Mailing Address 12450 Automobile Boulevard	
City State Zip Code Clearwater FL 33762-4427	

Outstanding Balance Beginning This Period <input type="text" value="36891.26"/>	Transaction ID : SD10-DEBT872734	
Amount Incurred This Period <input type="text" value="0"/>	Payment This Period <input type="text" value="0"/>	Outstanding Balance at Close of This Period <input type="text" value="36891.26"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Trimble & Associates	Nature of Debt (Purpose): Administrative/Salary/Overhead: Legal Fees
Mailing Address 10210 WAYZATA BLVD SUITE 130	
City State Zip Code Hopkins MN 55305	

Outstanding Balance Beginning This Period <input type="text" value="9714.92"/>	Transaction ID : SD10-DEBT920134	
Amount Incurred This Period <input type="text" value="0"/>	Payment This Period <input type="text" value="3500"/>	Outstanding Balance at Close of This Period <input type="text" value="6214.92"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="43206.18"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 84 OF 111
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Resolution Graphics	Nature of Debt (Purpose): Administrative/Salary/Overhead: Printing
Mailing Address 3725 Dunlap Street N	
City State Zip Code Saint Paul MN 55112-6968	

Outstanding Balance Beginning This Period 11375.02	Transaction ID : SD10-DEBT920092	
Amount Incurred This Period 559.65	Payment This Period 0	Outstanding Balance at Close of This Period 11934.67

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Neopost	Nature of Debt (Purpose): Administrative/Salary/Overhead: Party Fundraising Postage/Non-FEA
Mailing Address PO Box 73727	
City State Zip Code Chicago IL 60673-7727	

Outstanding Balance Beginning This Period 1942.27	Transaction ID : SD10-DEBT888406	
Amount Incurred This Period 0	Payment This Period 0	Outstanding Balance at Close of This Period 1942.27

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Public Opinion Strategies	Nature of Debt (Purpose): Administrative/Salary/Overhead: Polling
Mailing Address 277 S Washington Street Suite 320	
City State Zip Code Alexandria VA 22314-3646	

Outstanding Balance Beginning This Period 29500	Transaction ID : SD10-DEBT871981	
Amount Incurred This Period 0	Payment This Period 0	Outstanding Balance at Close of This Period 29500

1) SUBTOTALS This Period This Page (optional)..... ▶	43376.94
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 85 OF 111
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Minneapolis Hilton		Nature of Debt (Purpose): Administrative/Salary/Overhead: Facility rent
Mailing Address 1001 Marquette Avenue		
City State	Zip Code	
Minneapolis	MN 55403-2418	

Outstanding Balance Beginning This Period	Transaction ID : SD10-DEBT917800	
<input type="text" value="998.15"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0"/>	<input type="text" value="998.15"/>	<input type="text" value="0"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor FLS Connect		Nature of Debt (Purpose): Administrative/Salary/Overhead: Party Telemarketing
Mailing Address 7300 Hudson Boulevard N Suite 270		
City State	Zip Code	
Saint Paul	MN 55128-7143	

Outstanding Balance Beginning This Period	Transaction ID : SD10-DEBT908274	
<input type="text" value="123970.58"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="123970.58"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Pinnacle Direct, Inc.		Nature of Debt (Purpose): Administrative/Salary/Overhead: Party Mailing Finance Charge
Mailing Address 15260 113th Street N		
City State	Zip Code	
Stillwater	MN 55082-9575	

Outstanding Balance Beginning This Period	Transaction ID : SD10-DEBT920137	
<input type="text" value="10079.14"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="6185.54"/>	<input type="text" value="2500"/>	<input type="text" value="13764.68"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="137735.26"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 86 OF 111
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Clientserv, LLC	Nature of Debt (Purpose): Administrative/Salary/Overhead: Cobra Service Fee
Mailing Address 7201 Juniper Avenue	
City State Zip Code Excelsior MN 55331-9614	

Outstanding Balance Beginning This Period 51.25	Transaction ID : SD10-DEBT917612	
Amount Incurred This Period 0	Payment This Period 51.25	Outstanding Balance at Close of This Period 0

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Aristotle International, Inc.	Nature of Debt (Purpose): Administrative/Salary/Overhead: FEC reporting software
Mailing Address 205 Pennsylvania Avenue SE	
City State Zip Code Washington DC 20003-1164	

Outstanding Balance Beginning This Period 1800	Transaction ID : SD10-DEBT917609	
Amount Incurred This Period 0	Payment This Period 0	Outstanding Balance at Close of This Period 1800

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Minnesota Dept of Health	Nature of Debt (Purpose): Administrative/Salary/Overhead: List Enhancement
Mailing Address PO Box 64882	
City State Zip Code Saint Paul MN 55164-0882	

Outstanding Balance Beginning This Period 90	Transaction ID : SD10-DEBT919981	
Amount Incurred This Period 15	Payment This Period 0	Outstanding Balance at Close of This Period 105

1) SUBTOTALS This Period This Page (optional)..... ▶	1905.00
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 87 OF 111
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Cardinals FEC Compliance Services	Nature of Debt (Purpose): Administrative/Salary/Overhead: FEC Compliance Services
Mailing Address 6053 Hudson Road	
City State Zip Code Woodbury MN 55125-1015	

Outstanding Balance Beginning This Period <input type="text" value="42312.3"/>	Transaction ID : SD10-DEBT920135	
Amount Incurred This Period <input type="text" value="0"/>	Payment This Period <input type="text" value="1660.8"/>	Outstanding Balance at Close of This Period <input type="text" value="40651.5"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Staples Business Advantage	Nature of Debt (Purpose): Administrative/Salary/Overhead: Office Supplies
Mailing Address PO Box 9368	
City State Zip Code Framingham MA 01701-9368	

Outstanding Balance Beginning This Period <input type="text" value="0"/>	Transaction ID : SD10-DEBT920120	
Amount Incurred This Period <input type="text" value="1211.52"/>	Payment This Period <input type="text" value="0"/>	Outstanding Balance at Close of This Period <input type="text" value="1211.52"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Bryan Cave LLP	Nature of Debt (Purpose): Administrative/Salary/Overhead: Legal Fees
Mailing Address 700 13th Street NW	
City State Zip Code Washington DC 20005-3960	

Outstanding Balance Beginning This Period <input type="text" value="52930.3"/>	Transaction ID : SD10-DEBT845289	
Amount Incurred This Period <input type="text" value="0"/>	Payment This Period <input type="text" value="0"/>	Outstanding Balance at Close of This Period <input type="text" value="52930.3"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="94793.32"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 88 OF 111
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Comcast Corporation PAC	Nature of Debt (Purpose): Administrative/Salary/Overhead: Refund of Contribution
Mailing Address 1500 Market Street	
City State Zip Code Philadelphia PA 19102-2100	

Outstanding Balance Beginning This Period 5000	Transaction ID : SD10-DEBT871944	
Amount Incurred This Period 0	Payment This Period 0	Outstanding Balance at Close of This Period 5000

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Southwest Publishing	Nature of Debt (Purpose): Administrative/Salary/Overhead: Party Mailhouse Printing
Mailing Address 2600 NW Topeka Boulevard	
City State Zip Code Topeka KS 66617-1160	

Outstanding Balance Beginning This Period 13959.38	Transaction ID : SD10-DEBT920331	
Amount Incurred This Period 0	Payment This Period 1200	Outstanding Balance at Close of This Period 12759.38

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Pinnacle List Company	Nature of Debt (Purpose): Administrative/Salary/Overhead: Generic Party Printing
Mailing Address 2800 S Shirlington Road Suite 401	
City State Zip Code Arlington VA 22206-3608	

Outstanding Balance Beginning This Period 4236.37	Transaction ID : SD10-DEBT831921	
Amount Incurred This Period 0	Payment This Period 0	Outstanding Balance at Close of This Period 4236.37

1) SUBTOTALS This Period This Page (optional)..... ▶	21995.75
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 89 OF 111
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Cardmember Services	Nature of Debt (Purpose): Administrative/Salary/Overhead: Credit Card Interest
Mailing Address PO Box 790408	
City State Zip Code Saint Louis MO 63179-0408	

Outstanding Balance Beginning This Period 22237.53	Transaction ID : SD10-DEBT920127	
Amount Incurred This Period 221.62	Payment This Period 0	Outstanding Balance at Close of This Period 22459.15

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Assurant Employee Benefits	Nature of Debt (Purpose): Administrative/Salary/Overhead: NOTE: Vendor credit
Mailing Address 2323 Grand Boulevard	
City State Zip Code Kansas City MO 64108-2670	

Outstanding Balance Beginning This Period 0	Transaction ID : SD10-DEBT920475	
Amount Incurred This Period -30.88	Payment This Period 0	Outstanding Balance at Close of This Period -30.88

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Popp.com	Nature of Debt (Purpose): Administrative/Salary/Overhead: Office phones
Mailing Address PO Box 27110	
City State Zip Code Minneapolis MN 55427-0110	

Outstanding Balance Beginning This Period 4112.38	Transaction ID : SD10-DEBT915331	
Amount Incurred This Period 0	Payment This Period 0	Outstanding Balance at Close of This Period 4112.38

1) SUBTOTALS This Period This Page (optional)..... ▶	26540.65
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 90 OF 111
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Civis Communications	Nature of Debt (Purpose): Administrative/Salary/Overhead: Party Direct Mailing/Non-Candidate
Mailing Address 2 Carlson Parkway N Suite 375	
City State Zip Code Plymouth MN 55447-4446	

Outstanding Balance Beginning This Period <input type="text" value="17743.64"/>	Transaction ID : SD10-DEBT917611	
Amount Incurred This Period <input type="text" value="0"/>	Payment This Period <input type="text" value="17743.64"/>	Outstanding Balance at Close of This Period <input type="text" value="0"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor RBA Consulting	Nature of Debt (Purpose): Administrative/Salary/Overhead: Party Software Consulting
Mailing Address 445 Lake Street E Suite 120	
City State Zip Code Wayzata MN 55391-1670	

Outstanding Balance Beginning This Period <input type="text" value="4775"/>	Transaction ID : SD10-DEBT843537	
Amount Incurred This Period <input type="text" value="0"/>	Payment This Period <input type="text" value="0"/>	Outstanding Balance at Close of This Period <input type="text" value="4775"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor P2b Strategies, Inc	Nature of Debt (Purpose): Administrative/Salary/Overhead: Mail Design & Printing
Mailing Address 4750 E 53rd Street Apt. 206	
City State Zip Code Minneapolis MN 55417-2357	

Outstanding Balance Beginning This Period <input type="text" value="9816.08"/>	Transaction ID : SD10-DEBT920136	
Amount Incurred This Period <input type="text" value="0"/>	Payment This Period <input type="text" value="1950"/>	Outstanding Balance at Close of This Period <input type="text" value="7866.08"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="12641.08"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 91 OF 111
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Amato & Associates, Ilc	Nature of Debt (Purpose): Administrative/Salary/Overhead: Party IT/Web Services
Mailing Address PO Box 879	
City State Zip Code Hopkins MN 55343-0879	

Outstanding Balance Beginning This Period <input type="text" value="3007.5"/>	Transaction ID : SD10-DEBT840867	
Amount Incurred This Period <input type="text" value="0"/>	Payment This Period <input type="text" value="0"/>	Outstanding Balance at Close of This Period <input type="text" value="3007.5"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Capital Direct	Nature of Debt (Purpose): Administrative/Salary/Overhead: Mailing
Mailing Address 2915 Commers Drive Suite 1000	
City State Zip Code Saint Paul MN 55121-2470	

Outstanding Balance Beginning This Period <input type="text" value="3431.86"/>	Transaction ID : SD10-DEBT897213	
Amount Incurred This Period <input type="text" value="0"/>	Payment This Period <input type="text" value="0"/>	Outstanding Balance at Close of This Period <input type="text" value="3431.86"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Delta Dental	Nature of Debt (Purpose): Administrative/Salary/Overhead: NOTE: Vendor credit
Mailing Address 345 Saint Peter Street	
City State Zip Code Saint Paul MN 55102-1211	

Outstanding Balance Beginning This Period <input type="text" value="0"/>	Transaction ID : SD10-DEBT920474	
Amount Incurred This Period <input type="text" value="-75.5"/>	Payment This Period <input type="text" value="0"/>	Outstanding Balance at Close of This Period <input type="text" value="-75.5"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="6363.86"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 92 OF 111
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Newspaperclips.com	Nature of Debt (Purpose): Administrative/Salary/Overhead: Subscriptions
Mailing Address PO Box 193	
City State Zip Code Bell FL 32619-0193	

Outstanding Balance Beginning This Period <input type="text" value="676"/>	Transaction ID : SD10-DEBT880344	
Amount Incurred This Period <input type="text" value="0"/>	Payment This Period <input type="text" value="0"/>	Outstanding Balance at Close of This Period <input type="text" value="676"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Wiley Rein LLP	Nature of Debt (Purpose): Administrative/Salary/Overhead: Legal Services
Mailing Address 1776 K Street NW	
City State Zip Code Washington DC 20006-2304	

Outstanding Balance Beginning This Period <input type="text" value="723.03"/>	Transaction ID : SD10-DEBT908297	
Amount Incurred This Period <input type="text" value="0"/>	Payment This Period <input type="text" value="0"/>	Outstanding Balance at Close of This Period <input type="text" value="723.03"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Coffee Mill, Inc.	Nature of Debt (Purpose): Administrative/Salary/Overhead: Coffee supplies
Mailing Address 9200 Wyoming Ave North Suite 300	
City State Zip Code Brooklyn Park MN 55445-1845	

Outstanding Balance Beginning This Period <input type="text" value="0"/>	Transaction ID : SD10-DEBT918924	
Amount Incurred This Period <input type="text" value="322.89"/>	Payment This Period <input type="text" value="0"/>	Outstanding Balance at Close of This Period <input type="text" value="322.89"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="1721.92"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 93 OF 111
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor United States Treasury	Nature of Debt (Purpose): Administrative/Salary/Overhead: Contribution Refunds
Mailing Address 1500 Pennsylvania Avenue NW	
City State Zip Code Washington DC 20229-0003	

Outstanding Balance Beginning This Period 31000	Transaction ID : SD10-DEBT880337	
Amount Incurred This Period 0	Payment This Period 0	Outstanding Balance at Close of This Period 31000

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Francis Dana Payne III	Nature of Debt (Purpose): Administrative/Salary/Overhead: Expense reimbursement-coffee supplies
Mailing Address 1314 Marquette Avenue Apt. 605	
City State Zip Code Minneapolis MN 55403-4119	

Outstanding Balance Beginning This Period 28.54	Transaction ID : SD10-DEBT920125	
Amount Incurred This Period 31.86	Payment This Period 28.54	Outstanding Balance at Close of This Period 31.86

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Donehue Direct	Nature of Debt (Purpose): Administrative/Salary/Overhead: Fundraising Fees
Mailing Address PO Box 7431	
City State Zip Code Columbia SC 29202-7431	

Outstanding Balance Beginning This Period 2000	Transaction ID : SD10-DEBT908276	
Amount Incurred This Period 0	Payment This Period 0	Outstanding Balance at Close of This Period 2000

1) SUBTOTALS This Period This Page (optional)..... ▶	33031.86
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 94 OF 111
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor S & S Promotional Group	Nature of Debt (Purpose): Administrative/Salary/Overhead: Buttons
Mailing Address 3242 4th Avenue S	
City State Zip Code Fargo ND 58103-2242	

Outstanding Balance Beginning This Period <input type="text" value="2658.38"/>	Transaction ID : SD10-DEBT904879	
Amount Incurred This Period <input type="text" value="0"/>	Payment This Period <input type="text" value="0"/>	Outstanding Balance at Close of This Period <input type="text" value="2658.38"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor PCS Consulting	Nature of Debt (Purpose): Administrative/Salary/Overhead: Party Consulting Services
Mailing Address 1505 Osprey Court	
City State Zip Code Lino Lakes MN 55038-4607	

Outstanding Balance Beginning This Period <input type="text" value="8500"/>	Transaction ID : SD10-DEBT920130	
Amount Incurred This Period <input type="text" value="0"/>	Payment This Period <input type="text" value="500"/>	Outstanding Balance at Close of This Period <input type="text" value="8000"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Premier Business Partners, INC	Nature of Debt (Purpose): Administrative/Salary/Overhead: Consulting Fee
Mailing Address 617 Turnberry Court	
City State Zip Code Northfield MN 55057-3423	

Outstanding Balance Beginning This Period <input type="text" value="2000"/>	Transaction ID : SD10-DEBT915332	
Amount Incurred This Period <input type="text" value="0"/>	Payment This Period <input type="text" value="0"/>	Outstanding Balance at Close of This Period <input type="text" value="2000"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="12658.38"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 95 OF 111
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Create My Print, LLC	Nature of Debt (Purpose): Administrative/Salary/Overhead: Business Cards
Mailing Address 4579 Maple Leaf Circle	
City State Zip Code Eagan MN 55123-1922	

Outstanding Balance Beginning This Period <input type="text" value="759.26"/>	Transaction ID : SD10-DEBT917798	
Amount Incurred This Period <input type="text" value="0"/>	Payment This Period <input type="text" value="759.26"/>	Outstanding Balance at Close of This Period <input type="text" value="0"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Kelly Fenton	Nature of Debt (Purpose): Administrative/Salary/Overhead: Employee Expense Reimbursement
Mailing Address 11333 Sundance Way	
City State Zip Code Woodbury MN 55129-5301	

Outstanding Balance Beginning This Period <input type="text" value="300"/>	Transaction ID : SD10-DEBT917930	
Amount Incurred This Period <input type="text" value="0"/>	Payment This Period <input type="text" value="300"/>	Outstanding Balance at Close of This Period <input type="text" value="0"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Alex Kharam	Nature of Debt (Purpose): Administrative/Salary/Overhead: Mileage Expense
Mailing Address 400 Selby Avenue Apt. 208	
City State Zip Code Saint Paul MN 55102-4509	

Outstanding Balance Beginning This Period <input type="text" value="0"/>	Transaction ID : SD10-DEBT920123	
Amount Incurred This Period <input type="text" value="447.48"/>	Payment This Period <input type="text" value="0"/>	Outstanding Balance at Close of This Period <input type="text" value="447.48"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="447.48"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 96 OF 111
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Donehue Direct	Nature of Debt (Purpose): FEA 100% Federal: Political Consulting
Mailing Address PO Box 7431	
City State Zip Code Columbia SC 29202-7431	

Outstanding Balance Beginning This Period <input type="text" value="8000"/>	Transaction ID : SD10-DEBT901526	
Amount Incurred This Period <input type="text" value="0"/>	Payment This Period <input type="text" value="0"/>	Outstanding Balance at Close of This Period <input type="text" value="8000"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="8000.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="650717.63"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="650717.63"/>

SCHEDULE H1 (FEC Form 3X)

METHOD OF ALLOCATION FOR:

- **ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)**
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE) (Separate Segregated Funds And Nonconnected Committees Only)**

NAME OF COMMITTEE (In Full)
 Republican Party of Minnesota - Federal

Transaction ID : H1

USE ONLY ONE SECTION, A or B

A. State and Local Party Committees

Fixed Percentage (select one)

- _____ Presidential-Only Election Year (28% Federal)
- _____ Presidential and Senate Election Year (36% Federal)
- _____ Senate-Only Election Year (21% Federal)
- _____ Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees

Flat Minimum Federal Percentage

If the committee will allocate using the flat minimum percentage of 50% federal funds, check
or

If the committee is spending more than 50% federal funds, indicate ratio below

Federal..... %
 Nonfederal %

This ratio applies to (check all that apply):

- Administrative
- Generic Voter Drive
- Public Communications Referencing Party Only

**SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Republican Party of Minnesota - Non-Fe	MM / DD / YYYY 06 / 04 / 2013	11749.89

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	11749.89
Transaction ID : H3A-41427-814697	
ii) Generic Voter Drive	
iii) Exempt Activities	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
vi) Public Communications Referring Only to Party (Made by PAC)	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred).....	

**SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Republican Party of Minnesota - Non-Fe	MM / DD / YYYY 06 / 21 / 2013	33677.46

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	33677.46
Transaction ID : H3A-41444-814698	
ii) Generic Voter Drive	
iii) Exempt Activities	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
vi) Public Communications Referring Only to Party (Made by PAC)	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred).....	

**SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Republican Party of Minnesota - Non-Fe	MM / DD / YYYY 06 / 27 / 2013	11749.89

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	11749.89
Transaction ID : H3A-41450-814699	
ii) Generic Voter Drive	
iii) Exempt Activities	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
vi) Public Communications Referring Only to Party (Made by PAC)	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred).....	

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
Republican Party of Minnesota - Federal

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Republican Party of Minnesota - Non-Fe	MM / DD / YYYY 06 / 28 / 2013	5177.5

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	5177.5
Transaction ID : H3A-41451-814700	
ii) Generic Voter Drive	
iii) Exempt Activities	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
vi) Public Communications Referring Only to Party (Made by PAC)	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	62354.74
TOTAL This Period (Generic Voter Drive)	0.00
TOTAL This Period (Exempt Activities)	0.00
TOTAL This Period (Direct Fundraising)	0.00
TOTAL This Period (Direct Candidate Support)	0.00
TOTAL This Period (Public Communications Referring Only to Party)	0.00
TOTAL This Period (Total Amount Transferred).....	62354.74

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota - Federal

Form A: All American Self Storage. Transaction ID: H4-407380-920146-e. Allocated Activity or Event: Administrative. Date: 06/28/2013. Total Amount: 256.

Form B: All American Self Storage. Transaction ID: H4-407380-920147-e. Allocated Activity or Event: Administrative. Date: 06/28/2013. Total Amount: 148.

Form C: Business Data Records. Transaction ID: H4-429366-917610-e. Allocated Activity or Event: Administrative. Date: 06/13/2013. Total Amount: 46.88.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 94.68, 356.20, 450.88.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota - Federal

Form A: Business Data Records. Transaction ID: H4-429366-920128-e. Allocated Activity or Event: Administrative (checked). Date: 06/13/2013. Total Amount: 46.52.

Form B: Business Data Records. Transaction ID: H4-429366-918918-e. Allocated Activity or Event: Administrative (checked). Date: 06/30/2013. Total Amount: 46.52.

Form C: BUSINESSWARE SOLUTIONS. Transaction ID: H4-526407-918920-e. Allocated Activity or Event: Administrative (checked). Date: 06/07/2013. Total Amount: 38.75.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota - Federal

Form A: Full Name (Last, First, Middle Initial) Transaction ID : H4-526407-918921-e
BUSINESSWARE SOLUTIONS
Mailing Address 500 W 79th Street Suite 3
City Chanhassen State MN Zip Code 55317-8316
Purpose of Disbursement: IT Consultants
Activity or Event Identifier: 1000:ADMINISTRATION B 211
[MEMO ITEM] Accrued Expense (also reported as debt on Schedule D)
Allocated Activity or Event: [X] Administrative [] Fundraising [] Exempt
[] Voter Drive [] Direct Candidate Support
[] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 231507.49
Date: 06 / 07 / 2013
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
83.78 + 315.15 = 398.93

Form B: Full Name (Last, First, Middle Initial) Transaction ID : H4-526407-918919-e
BUSINESSWARE SOLUTIONS
Mailing Address 500 W 79th Street Suite 3
City Chanhassen State MN Zip Code 55317-8316
Purpose of Disbursement: IT Consultants
Activity or Event Identifier: 1000:ADMINISTRATION B 211
Allocated Activity or Event: [X] Administrative [] Fundraising [] Exempt
[] Voter Drive [] Direct Candidate Support
[] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 231507.49
Date: 06 / 13 / 2013
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
122.06 + 459.19 = 581.25

Form C: Full Name (Last, First, Middle Initial) Transaction ID : H4-526407-918922-e
BUSINESSWARE SOLUTIONS
Mailing Address 500 W 79th Street Suite 3
City Chanhassen State MN Zip Code 55317-8316
Purpose of Disbursement: IT Consultants
Activity or Event Identifier: 1000:ADMINISTRATION B 211
[MEMO ITEM] Accrued Expense (also reported as debt on Schedule D)
Allocated Activity or Event: [X] Administrative [] Fundraising [] Exempt
[] Voter Drive [] Direct Candidate Support
[] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 231507.49
Date: 06 / 18 / 2013
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
24.41 + 91.84 = 116.25

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 122.06, 459.19, 581.25

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota - Federal

Form A: Civis Communications. Transaction ID: H4-424244-920139-e. Allocated Activity or Event: Administrative. Date: 06/10/2013. Total Amount: 4000.

Form B: Civis Communications. Transaction ID: H4-424244-920140-e. Allocated Activity or Event: Administrative. Date: 06/24/2013. Total Amount: 23400.

Form C: Hub Properties Trust. Transaction ID: H4-403860-920129-e. Allocated Activity or Event: Administrative. Date: 06/01/2013. Total Amount: 14873.28.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE (8877.39), NONFEDERAL SHARE (33395.89), TOTAL AMOUNT (42273.28).

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota - Federal

Form A: Full Name (Last, First, Middle Initial) Transaction ID : H4-407611-917806-e
Whatever Services
Mailing Address 240 Wyndham Circle W
City New Brighton State MN Zip Code 55112-3167
Purpose of Disbursement: Accounting services
Activity or Event Identifier: 1000:ADMINISTRATION B 211
Allocated Activity or Event: Administrative [X] Fundraising [] Exempt []
Voter Drive [] Direct Candidate Support []
Public Comm (ref to party only) by PAC []
Allocated Activity or Event Year-To-Date 231507.49
Date 06 / 06 / 2013
FEDERAL SHARE 138.6 + NONFEDERAL SHARE 521.4 = TOTAL AMOUNT 660

Form B: Full Name (Last, First, Middle Initial) Transaction ID : H4-407611-920131-e
Whatever Services
Mailing Address 240 Wyndham Circle W
City New Brighton State MN Zip Code 55112-3167
Purpose of Disbursement: Accounting services
Activity or Event Identifier: 1000:ADMINISTRATION B 211
Allocated Activity or Event: Administrative [X] Fundraising [] Exempt []
Voter Drive [] Direct Candidate Support []
Public Comm (ref to party only) by PAC []
Allocated Activity or Event Year-To-Date 231507.49
Date 06 / 06 / 2013
FEDERAL SHARE 148.05 + NONFEDERAL SHARE 556.95 = TOTAL AMOUNT 705

Form C: Full Name (Last, First, Middle Initial) Transaction ID : H4-407611-920133-e
Whatever Services
Mailing Address 240 Wyndham Circle W
City New Brighton State MN Zip Code 55112-3167
Purpose of Disbursement: Accounting services
Activity or Event Identifier: 1000:ADMINISTRATION B 211
Allocated Activity or Event: Administrative [X] Fundraising [] Exempt []
Voter Drive [] Direct Candidate Support []
Public Comm (ref to party only) by PAC []
Allocated Activity or Event Year-To-Date 231507.49
Date 06 / 06 / 2013
FEDERAL SHARE 223.65 + NONFEDERAL SHARE 841.35 = TOTAL AMOUNT 1065

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 510.30, 1919.70, 2430.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [], [], []

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota - Federal

Form A: Full Name (Last, First, Middle Initial) Transaction ID : H4-407611-920132-e
Whatever Services
Mailing Address 240 Wyndham Circle W
City New Brighton State MN Zip Code 55112-3167
Purpose of Disbursement: Accounting services
Activity or Event Identifier: 1000:ADMINISTRATION B 211
Allocated Activity or Event: Administrative [checked] Fundraising [] Exempt []
Voter Drive [] Direct Candidate Support []
Public Comm (ref to party only) by PAC []
Allocated Activity or Event Year-To-Date 231507.49
Date 06 / 20 / 2013
FEDERAL SHARE 239.4 + NONFEDERAL SHARE 900.6 = TOTAL AMOUNT 1140

Form B: Full Name (Last, First, Middle Initial) Transaction ID : H4-407611-920122-e
Whatever Services
Mailing Address 240 Wyndham Circle W
City New Brighton State MN Zip Code 55112-3167
Purpose of Disbursement: Accounting services
Activity or Event Identifier: 1000:ADMINISTRATION B 211
[MEMO ITEM] Accrued Expense (also reported as debt on Schedule D)
Allocated Activity or Event: Administrative [checked] Fundraising [] Exempt []
Voter Drive [] Direct Candidate Support []
Public Comm (ref to party only) by PAC []
Allocated Activity or Event Year-To-Date 231507.49
Date 06 / 24 / 2013
FEDERAL SHARE 141.75 + NONFEDERAL SHARE 533.25 = TOTAL AMOUNT 675

Form C: Full Name (Last, First, Middle Initial) Transaction ID : H4-464437-920340-e
Andrew De Jong
Mailing Address 12551 Queens Way N
City Stillwater State MN Zip Code 55082-9275
Purpose of Disbursement: Consulting fees
Activity or Event Identifier: 1000:ADMINISTRATION B 211
Allocated Activity or Event: Administrative [checked] Fundraising [] Exempt []
Voter Drive [] Direct Candidate Support []
Public Comm (ref to party only) by PAC []
Allocated Activity or Event Year-To-Date 231507.49
Date 06 / 28 / 2013
FEDERAL SHARE 73.5 + NONFEDERAL SHARE 276.5 = TOTAL AMOUNT 350

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 312.90, 1177.10, 1490.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [], [], []

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota - Federal

Form A: Alyssa Gunstrom, Transaction ID: H4-528007-920334-e. Includes fields for Name, Address, City/State/Zip, Purpose (Consulting Fees), Activity Identifier (1000:ADMINISTRATION B 211), Allocated Activity (Administrative checked), Year-To-Date (231507.49), Date (06/14/2013), and a summary table showing Federal Share (294) + Nonfederal Share (1106) = Total Amount (1400).

Form B: Andrew Hasek, Transaction ID: H4-528000-920336-e. Includes fields for Name, Address, City/State/Zip, Purpose (Consulting Fees), Activity Identifier (1000:ADMINISTRATION B 211), Allocated Activity (Administrative checked), Year-To-Date (231507.49), Date (06/14/2013), and a summary table showing Federal Share (131.25) + Nonfederal Share (493.75) = Total Amount (625).

Form C: Andrew Hasek, Transaction ID: H4-528000-920337-e. Includes fields for Name, Address, City/State/Zip, Purpose (Consulting Fees), Activity Identifier (1000:ADMINISTRATION B 211), Allocated Activity (Administrative checked), Year-To-Date (231507.49), Date (06/28/2013), and a summary table showing Federal Share (131.25) + Nonfederal Share (493.75) = Total Amount (625).

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE (556.50) + NONFEDERAL SHARE (2093.50) = TOTAL AMOUNT (2650.00)

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota - Federal

Form A: Alex Kharam, Transaction ID: H4-527796-920332-e. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Consulting Fees), Activity or Event Identifier (1000:ADMINISTRATION B 211), Allocated Activity or Event (Administrative checked), and Year-To-Date amounts (294 Federal, 1106 Nonfederal, 1400 Total).

Form B: Alex Kharam, Transaction ID: H4-527796-920333-e. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Consulting fees), Activity or Event Identifier (1000:ADMINISTRATION B 211), Allocated Activity or Event (Administrative checked), and Year-To-Date amounts (294 Federal, 1106 Nonfederal, 1400 Total).

Form C: Lucas Nesse, Transaction ID: H4-528008-920338-e. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Consulting fees), Activity or Event Identifier (1000:ADMINISTRATION B 211), Allocated Activity or Event (Administrative checked), and Year-To-Date amounts (147 Federal, 553 Nonfederal, 700 Total).

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE (735.00) + NONFEDERAL SHARE (2765.00) = TOTAL AMOUNT (3500.00)

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota - Federal

Form A: Lucas Nesse, Transaction ID: H4-528008-920339-e. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and Year-To-Date amounts.

Form B: William Walsh, Transaction ID: H4-84511-920138-e. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and Year-To-Date amounts.

Form C: Empty form for another disbursement entry, including fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and Year-To-Date amounts.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE 987.00, NONFEDERAL SHARE 3713.00, TOTAL AMOUNT 4700.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Summary table for total: FEDERAL SHARE 12340.27, NONFEDERAL SHARE 46422.96, TOTAL AMOUNT 58763.23