

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

1. NAME OF COMMITTEE (in full)

Minge for Congress

ADDRESS (number and street) Check if different than previously reported.

380 10th Avenue

CITY, STATE and ZIP CODE

Granite Falls, MN 56241

STATE/DISTRICT

MN 02

2. FEC IDENTIFICATION NUMBER

C00264848

3. IS THIS REPORT AN AMENDMENT?

YES NO

4. TYPE OF REPORT

April 15 Quarterly Report

Twelfth day report preceding _____ (Type of Election)

July 15 Quarterly Report

election on _____ in the State of _____

October 15 Quarterly Report

Thirtieth day report following the General Election on

January 31 Year End Report

_____ in the State of _____

July 31 Mid-Year Report (Non-election Year Only)

Termination Report

This report contains activity for

Primary Election

General Election

Special Election

Runoff Election

SUMMARY

	COLUMN A This Period	COLUMN B Calendar Year-to-date
5. Covering Period <u>01/01/98</u> through <u>03/31/98</u>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(a))	\$52832.15	\$52832.15
(b) Total Contribution Refunds (From Line 20(d))	\$0.00	\$0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	\$52832.15	\$52832.15
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	\$33581.87	\$33581.87
(b) Total Offsets to Operating Expenditures (from Line 14)	\$0.00	\$0.00
(c) Net Operating Expenditures (Subtract Line 7(b) from 7(a))	\$33581.87	\$33581.87
8. Cash on Hand at Close of Reporting Period (from Line 27)	\$142054.91	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$1454.20	

For further information:
Federal Election Commission
999 E Street, N.W.
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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

Type or Print Name of Treasurer

Patricia E. Thomas

Signature of Treasurer

Date

04/15/98

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

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FEC FORM 3
(Revised 4/87)

Detailed Summary Page

of Receipts and Disbursements

(Page 2, FEC FORM 3)

Name of Committee (In full) Minge for Congress	Report Covering the Period: From: 01/01/98 To: 03/31/98	C00264846	Column A Total This Period	Column B Calendar Year-To-Date
I. RECEIPTS				
11. CONTRIBUTIONS (other than loans) FROM:				
(a) Individuals/Persons Other Than Political Committees				
(i) Itemized (Use Schedule A)			\$15300.00	
(ii) Unitemized			\$14187.00	
(iii) Total of contributions from Individual			\$29487.00	\$29487.00
(b) Political Party Committees			\$835.15	\$835.15
(c) Other Political Committees (such as PACs)			\$22500.00	\$22500.00
(d) The Candidate			\$0.00	\$0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11 (a)(i), (b), (c) and (d))			\$62832.15	\$62832.15
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES			\$0.00	\$0.00
13. LOANS:				
(a) Made or Guaranteed by the Candidate			\$0.00	\$0.00
(b) All Other Loans			\$0.00	\$0.00
(c) TOTAL LOANS (add 13(a) and (b))			\$0.00	\$0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)			\$0.00	\$0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)			\$1282.74	\$1282.74
16. TOTAL RECEIPTS (add 11 (e), 12, 13(c), 14 and 15)			\$64114.89	\$64114.89
II. DISBURSEMENTS				
17. OPERATING EXPENDITURES			\$33581.87	\$33581.87
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES			\$4500.00	\$4500.00
19. LOAN REPAYMENTS:				
(a) Of Loans Made or Guaranteed by the Candidate			\$0.00	\$0.00
(b) Of All Other Loans			\$0.00	\$0.00
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))			\$0.00	\$0.00
20. REFUNDS OF CONTRIBUTIONS TO:				
(a) Individuals/Persons Other Than Political Committees			\$0.00	\$0.00
(b) Political Party Committees			\$0.00	\$0.00
(c) Other Political Committees (such as PACs)			\$0.00	\$0.00
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))			\$0.00	\$0.00
21. OTHER DISBURSEMENTS			\$0.00	\$0.00
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)			\$38081.87	\$38081.87
III. CASH SUMMARY				
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD				\$128021.89
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)				\$64114.89
25. SUBTOTAL (add Line 23 and Line 24)				\$192136.78
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)				\$38081.87
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)				\$154054.91

SCHEDULE A

ITEMIZED RECEIPTS

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)
 Minge for Congress 000264846

Full Name, Mailing Address and Zip Code David A Raker 18 Eastwood Drive Orinda, CA 94563 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Univ. of California Occupation Professor Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 03/19/98	Amount of Each Receipt this Period \$250.00
Full Name, Mailing Address and Zip Code Ford Watson Bell 522 Harrington Rd Wayzata, MN 55391 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Mpls Heart Institute Occupation Administration/Pres. Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 03/14/98	Amount of Each Receipt this Period \$300.00
Full Name, Mailing Address and Zip Code Richard J Bernick 800 N 6th Ave Saint Cloud, MN 56301- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Bernick Pepsi Occupation Owner Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 03/31/98	Amount of Each Receipt this Period \$250.00
Full Name, Mailing Address and Zip Code Thomas H Borran 3300 Norwest Center Minneapolis, MN 55402-4140 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Maslon - Edelman ETAL Occupation Attorney Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 01/05/98	Amount of Each Receipt this Period \$500.00
Full Name, Mailing Address and Zip Code E. Jerome Carlson 6950 Galpin Lake Rd Excelsior, MN 55331- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer The Instant Web Cos. Occupation Chairman/CEO Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 03/13/98	Amount of Each Receipt this Period \$250.00
Full Name, Mailing Address and Zip Code Mille Lacs Chippewa HCR 67 - Box 194 Onamia, MN 56359 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Indian Tribe Occupation Native American Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 01/31/98	Amount of Each Receipt this Period \$500.00
Full Name, Mailing Address and Zip Code Thomas C Connolly One Sunset Park Box 19 Danvers, MN 56231 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer State Bank of Danvers Occupation Banker/CEO Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 03/11/98	Amount of Each Receipt this Period \$250.00

SUBTOTAL of Receipts This Page (optional)	\$2300.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of the data - 4-5-89, 1999

PAGE 2 OF 5
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Minge for Congress C00264846

Full Name, Mailing Address and Zip Code Robert Cunningham P O Box 126 St. James, MN 56081-0126 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Cunningham Implement Occupation John Deere Dealer Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 03/14/98	Amount of Each Receipt this Period \$250.00
Full Name, Mailing Address and Zip Code H. Theodore Grindal 9517 Bennett Place Eden Prairie, MN 55347 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Heins -Schatz&Paquin Occupation Attorney Aggregate Year-to-Date -> \$1000.00	Date (month, day, year) 01/31/98	Amount of Each Receipt this Period \$1000.00
Full Name, Mailing Address and Zip Code Stanley E Hubbard 1495 Riviera Ave S Lakeland, MN 55043 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Hubbard Broadcasting Occupation President & CEO Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 03/27/98	Amount of Each Receipt this Period \$500.00
Full Name, Mailing Address and Zip Code Whitney MacMillan 1560 Fox St Wayzata, MN 55391- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer None Occupation Retired Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 03/31/98	Amount of Each Receipt this Period \$250.00
Full Name, Mailing Address and Zip Code Arthur J Massolo 573 Longwood Ave Glencoe, IL 60022 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer First Chicago Corp Occupation Banker Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 03/31/98	Amount of Each Receipt this Period \$250.00
Full Name, Mailing Address and Zip Code Richard D McFarland 6341 Murray Hill Rd Excelsior, MN 55331 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Dain Bosworth Occupation Chairman/Investments Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 02/20/98	Amount of Each Receipt this Period \$500.00
Full Name, Mailing Address and Zip Code John McShane 6480 Packard Ave Elk River, MN 55330- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Northern Dewatering Occupation Owner Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 03/20/98	Amount of Each Receipt this Period \$250.00

SUBTOTAL of Receipts This Page (optional)	\$3000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
Minge for Congress **C00264846**

Full Name, Mailing Address and Zip Code Kingsley E Murphy - Jr. 2265 North Shore Drive Wayzata, MN 55391 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Occupation Broadcaster Aggregate Year-to-Date -> \$1000.00	Date (month, day, year) 03/10/98	Amount of Each Receipt this Period \$1000.00
Full Name, Mailing Address and Zip Code Loren H Noeldner RR 1 Box 1AA Madison, MN 56256 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Klein National Bank Occupation Banker Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 03/05/98	Amount of Each Receipt this Period \$250.00
Full Name, Mailing Address and Zip Code Darin Beth Opperman 2159 Springwood Rd Wayzata, MN 55391- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Occupation Consultant Aggregate Year-to-Date -> \$1000.00	Date (month, day, year) 01/31/98	Amount of Each Receipt this Period \$1000.00
Full Name, Mailing Address and Zip Code Dwight D Opperman 610 Opperman Dr Eagan, MN 55123 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Key Investments Inc Occupation Chairman Aggregate Year-to-Date -> \$1000.00	Date (month, day, year) 03/25/98	Amount of Each Receipt this Period \$1000.00
Full Name, Mailing Address and Zip Code Vance K Opperman 601 2nd Ave S Ste#5200 Minneapolis, MN 55402 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Key Investments Inc Occupation President Aggregate Year-to-Date -> \$1000.00	Date (month, day, year) 01/31/98	Amount of Each Receipt this Period \$1000.00
Full Name, Mailing Address and Zip Code Nancy M Pflager 100 - 2nd St SE #101 Minneapolis, MN 55414 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer None Occupation Retired Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 03/30/98	Amount of Each Receipt this Period \$250.00
Full Name, Mailing Address and Zip Code Lawrence M Redmond 1920 S 1st St Minneapolis, MN 55454 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Occupation Consultant Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 02/20/98	Amount of Each Receipt this Period \$500.00

SUBTOTAL of Receipts This Page (optional)

\$5000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
Minge for Congress **C00264846**

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
S. Walter Richey 900 S 2nd Ave 1710 Internat'l Ctr Minneapolis, MN 55402	Meritex Inc Occupation CEO/Real Estate	02/23/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$500.00
James N Rieth 10011 N Shore Drive Spicer, MN 56288	Jennie-O Foods Occupation President & CEO	03/04/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$250.00
Harold Roitenberg 3512 W Calhoun Pkwy Minneapolis, MN 55416	Roitenberg Invest. - Inc Occupation President	02/26/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$500.00
Curtis A Sampson Box 698 Hector, MN 55342-0698	Comm Systems - Inc Occupation CEO/Business Exec	03/11/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$500.00
Robert D Sparboe 420 Golf Terrace Litchfield, MN 55355	Sparboe Egg Co - Inc. Occupation President	02/25/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$500.00
Paul N Steiner 1117 Sugarbush Lane Waconia, MN 55387	Self Occupation Retired Builder	02/20/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$500.00
Paul N Steiner 1117 Sugarbush Lane Waconia, MN 55387	Self Occupation Retired Builder	03/20/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$750.00

SUBTOTAL of Receipts This Page (optional)

\$3000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
 Minge for Congress C00254846

Full Name, Mailing Address and Zip Code Sheila Steiner 1117 Sugarbush Lane Waconia, MN 55387 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer None Occupation Retired Date (month, day, year) 02/20/98 Aggregate Year-to-Date -> \$500.00	Amount of Each Receipt this Period \$500.00
Full Name, Mailing Address and Zip Code Sheila Steiner 1117 Sugarbush Lane Waconia, MN 55387 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer None Occupation Retired Date (month, day, year) 03/28/98 Aggregate Year-to-Date -> \$750.00	Amount of Each Receipt this Period \$250.00
Full Name, Mailing Address and Zip Code George Thelen Box 696 Montevideo, MN 56265-0696 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Thelen Oil Co Occupation Gasoline Retailer Date (month, day, year) 03/19/98 Aggregate Year-to-Date -> \$1000.00	Amount of Each Receipt this Period \$1000.00
Full Name, Mailing Address and Zip Code Irving Weiser Dain Rauscher Plaza 60 S 6th St Minneapolis, MN 55402-4422 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Dain Rauscher Occupation Executive Date (month, day, year) 03/24/98 Aggregate Year-to-Date -> \$250.00	Amount of Each Receipt this Period \$250.00
Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Date (month, day, year) / / Aggregate Year-to-Date ->	Amount of Each Receipt this Period
Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Date (month, day, year) / / Aggregate Year-to-Date ->	Amount of Each Receipt this Period
Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Date (month, day, year) / / Aggregate Year-to-Date ->	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	\$2000.00
TOTAL This Period (last page this line number only)	\$15300.00

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
 Minge for Congress C00264846

Full Name, Mailing Address and Zip Code Democratic Congressional Campaign Comm. 430 So Capitol St Washington, DC 20003 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 02/28/98 (Fundraising Services) \$21.49	Amount of Each Receipt this Period \$21.49 IN-KIND
Full Name, Mailing Address and Zip Code Democratic Congressional Campaign Comm. 430 So Capitol St Washington, DC 20003 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/09/98 Research Materials \$321.49	Amount of Each Receipt this Period \$300.00 IN-KIND
Full Name, Mailing Address and Zip Code Democratic Congressional Campaign Comm. 430 So Capitol St Washington, DC 20003 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/31/98 (Fundraising Services) \$335.15	Amount of Each Receipt this Period \$13.66 IN-KIND
Full Name, Mailing Address and Zip Code Rock County DFL C/O J. Sanden 905 N Kniss Laverne, MN 56156 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 02/18/98 \$500.00	Amount of Each Receipt this Period \$500.00 (Permissible Funds)
Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / / \$0.00	Amount of Each Receipt this Period \$0.00
Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / / \$0.00	Amount of Each Receipt this Period \$0.00
Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / / \$0.00	Amount of Each Receipt this Period \$0.00

SUBTOTAL of Receipts This Page (optional)	\$835.15
TOTAL This Period (last page this line number only)	\$835.15

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full) C00264846
 Minge for Congress

Full Name, Mailing Address and Zip Code Alabama Farmers Federation PAC P O Box 11033 Montgomery, AL 36198 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	Name of Employer Occupation Date (month, day, year) 03/30/98 Aggregate Year-to-Date -> \$500.00	Amount of Each Receipt this Period \$500.00
Full Name, Mailing Address and Zip Code Am Asso of Nurse Anesthetists 222 S Prospect Ave Park Ridge, IL 60068- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> other (specify) '98	Name of Employer Occupation Date (month, day, year) 01/26/98 Aggregate Year-to-Date -> \$500.00	Amount of Each Receipt this Period \$500.00
Full Name, Mailing Address and Zip Code Am Health Care Assn (AHCA-PAC) 1201 L St NW Washington, DC 20005- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	Name of Employer Occupation Date (month, day, year) 03/31/98 Aggregate Year-to-Date -> \$500.00	Amount of Each Receipt this Period \$500.00
Full Name, Mailing Address and Zip Code American Crystal Sugar PAC 101 North Third St Moorhead, MN 56560 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	Name of Employer Occupation Date (month, day, year) 03/30/98 Aggregate Year-to-Date -> \$2000.00	Amount of Each Receipt this Period \$2000.00
Full Name, Mailing Address and Zip Code American Meat Institute (AMI-PAC) 1700 N Moore St Ste 1600 Arlington, VA 22209 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> other (specify) '98	Name of Employer Occupation Date (month, day, year) 03/31/98 Aggregate Year-to-Date -> \$500.00	Amount of Each Receipt this Period \$500.00
Full Name, Mailing Address and Zip Code BLUEPAC (Blue Cross/Blue Shield Assoc) 1310 G St - NW 12th Floor Washington, DC 20005 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	Name of Employer Occupation Date (month, day, year) 03/31/98 Aggregate Year-to-Date -> \$500.00	Amount of Each Receipt this Period \$500.00
Full Name, Mailing Address and Zip Code CAPPAC-Advancement of Psychiatry 1400 K St - N.W. Washington, DC 20005 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	Name of Employer Occupation Date (month, day, year) 03/28/98 Aggregate Year-to-Date -> \$500.00	Amount of Each Receipt this Period \$500.00

SUBTOTAL of Receipts This Page (optional)	\$5000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
 Minge for Congress 000264846

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Crop Protection PAC 1156 - 15th St Ste 400 Washington, DC 20005- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Aggregate Year-to-Date ->	03/31/98 \$500.00	\$500.00
DH CITIZENS FEDERAL FORUM 777 Nicollet Mall Minneapolis, MN 55402 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Aggregate Year-to-Date ->	03/28/98 \$500.00	\$500.00
Dairy Farmers of America (DEPAC) 3253 E Chestnut Expressway Springfield, MO 65802- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Aggregate Year-to-Date ->	03/31/98 \$500.00	\$500.00
Deere & Company Civic Action Fund John Deere Road Moline, IL 61265-0098 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Aggregate Year-to-Date ->	03/28/98 \$500.00	\$500.00
Deloitte & Touche PAC P O Box 365 Washington, DC 20044-0365 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Aggregate Year-to-Date ->	03/31/98 \$1000.00	\$1000.00
Ecolab Inc. (ECOPAC) Osborn Bldg 370 Wabasha St N St. Paul, MN 55102 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Aggregate Year-to-Date ->	03/27/98 \$1000.00	\$1000.00
Ernst & Young PAC 1225 Conn Ave NW Ste 600 Washington, DC 20036 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Aggregate Year-to-Date ->	03/28/98 \$1000.00	\$1000.00

SUBTOTAL of Receipts This Page (optional) \$5000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule (a) for 1998 category of 529 Detailed Sundry Page

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NAME OF COMMITTEE (In Full) Minge for Congress 000254846

Full Name, Mailing Address and Zip Code General Mills - Inc. PAC P O Box 113 Minneapolis, MN 55440-0113 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Date (month, day, year) 03/31/98 Aggregate Year-to-Date -> \$500.00	Amount of Each Receipt this Period \$500.00
Full Name, Mailing Address and Zip Code Holland & Knight PAC 2100 Pennsylvania Ave NW Suite 400 Washington, DC 20037- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Date (month, day, year) 03/31/98 Aggregate Year-to-Date -> \$500.00	Amount of Each Receipt this Period \$500.00
Full Name, Mailing Address and Zip Code Hotel & Restaurant Employees Internat'l 1219 - 28th St - NW Washington, DC 20007 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Date (month, day, year) 03/31/98 Aggregate Year-to-Date -> \$500.00	Amount of Each Receipt this Period \$500.00
Full Name, Mailing Address and Zip Code Independent Bankers (IBFAC) 1 Thomas Circle -NW Ste950 Washington, DC 20005 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Date (month, day, year) 03/31/98 Aggregate Year-to-Date -> \$500.00	Amount of Each Receipt this Period \$500.00
Full Name, Mailing Address and Zip Code Lockridge Grindal Nauen & Holstein PAC 100 Washington Ave - 3 Minneapolis, MN 55401 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Date (month, day, year) 01/31/98 Aggregate Year-to-Date -> \$1000.00	Amount of Each Receipt this Period \$1000.00
Full Name, Mailing Address and Zip Code Machinists Non-Partisan Political League 9000 Machinist Place Upper Marlboro, MD 20772 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Date (month, day, year) 03/31/99 Aggregate Year-to-Date -> \$1000.00	Amount of Each Receipt this Period \$1000.00
Full Name, Mailing Address and Zip Code Manufactured Housing Institute PAC 2101 Wilson Blvd -Ste#613 Arlington, VA 22201-3062 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Date (month, day, year) 03/28/98 Aggregate Year-to-Date -> \$500.00	Amount of Each Receipt this Period \$500.00

SUBTOTAL of Receipts This Page (optional)

\$4500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
Minge for Congress C00264846

Full Name, Mailing Address and Zip Code Merck PAC: U.S. 601 Penn Ave -NW Ste1200 Washington, DC 20004 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Date (month, day, year) 03/30/98 Aggregate Year-to-Date -> \$500.00	Amount of Each Receipt this Period \$500.00
Full Name, Mailing Address and Zip Code Minnesota Mutual Life EAC 2385 Apache Court Mendota Heights, MN 55120 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Date (month, day, year) 03/21/98 Aggregate Year-to-Date -> \$1000.00	Amount of Each Receipt this Period \$1000.00
Full Name, Mailing Address and Zip Code Nat'l Assoc of Letter Carriers(NALC) 100 Indiana Avenue - NW Washington, DC 20001 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Date (month, day, year) 03/31/98 Aggregate Year-to-Date -> \$1000.00	Amount of Each Receipt this Period \$1000.00
Full Name, Mailing Address and Zip Code Nat'l Broker Council PAC 1155 - 15th St N W Ste614 Washington, DC 20005 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Date (month, day, year) 03/31/98 Aggregate Year-to-Date -> \$500.00	Amount of Each Receipt this Period \$500.00
Full Name, Mailing Address and Zip Code Nat'l Education Ass'n (NEAPAC) 1201 - 16th St - NW Washington, DC 20036 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Date (month, day, year) 03/31/98 Aggregate Year-to-Date -> \$500.00	Amount of Each Receipt this Period \$500.00
Full Name, Mailing Address and Zip Code Nat'l Treasury Employees (TEPAC) 901 E St - N.W. Suite 600 Washington, DC 20004 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Date (month, day, year) 03/31/98 Aggregate Year-to-Date -> \$500.00	Amount of Each Receipt this Period \$500.00
Full Name, Mailing Address and Zip Code Nat'l Council of Farmer Cooperatives 50 F St - NW Suite 900 Washington, DC 20001 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Date (month, day, year) 03/31/98 Aggregate Year-to-Date -> \$1000.00	Amount of Each Receipt this Period \$1000.00

SUBTOTAL of Receipts This Page (optional) \$5000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full) 000254846
 Minge for Congress

Full Name, Mailing Address and Zip Code National Funeral Directors Ass'n PAC 11121 W Oklahoma Ave Milwaukee, WI 53227 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	Name of Employer Occupation Date (month, day, year) 03/31/98 Aggregate Year-to-Date -> \$500.00	Amount of Each Receipt this Period \$500.00
Full Name, Mailing Address and Zip Code Pork Pac(Nat'l Pork Producers) P O Box 10383 Des Moines, IA 50306 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> other (specify) '98	Name of Employer Occupation Date (month, day, year) 03/31/98 Aggregate Year-to-Date -> \$500.00	Amount of Each Receipt this Period \$500.00
Full Name, Mailing Address and Zip Code Realtors Political Action (R.P.A.C.) 430 N Michigan Ave Chicago, IL 60611 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	Name of Employer Occupation Date (month, day, year) 03/28/98 Aggregate Year-to-Date -> \$1000.00	Amount of Each Receipt this Period \$1000.00
Full Name, Mailing Address and Zip Code The St Paul Volunteer Committee(PAC) P O Box 2209 St Paul, MN 55102 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	Name of Employer Occupation Date (month, day, year) 01/14/98 Aggregate Year-to-Date -> \$500.00	Amount of Each Receipt this Period \$500.00
Full Name, Mailing Address and Zip Code Transportation Communications Internat'l 3 Research Place Rockville, MD 20850 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	Name of Employer Occupation Date (month, day, year) 03/31/98 Aggregate Year-to-Date -> \$500.00	Amount of Each Receipt this Period \$500.00
Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	Name of Employer Occupation Date (month, day, year) / / Aggregate Year-to-Date ->	Amount of Each Receipt this Period
Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	Name of Employer Occupation Date (month, day, year) / / Aggregate Year-to-Date ->	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	\$3000.00
TOTAL This Period (last page this line number only)	\$22500.00

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Minge for Congress C00264845

Full Name, Mailing Address and Zip Code Co-Op Credit Union Bank P O Box 472 Montevideo, MN 56265 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Interest Income Occupation Date (month, day, year) 03/31/98 Aggregate Year-to-Date -> \$38.35	Amount of Each Receipt this Period \$38.35
Full Name, Mailing Address and Zip Code Yellow Medicine Co Bank 180 - 8th Avenue Granite Falls, MN 56241 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Interest Income Occupation Date (month, day, year) 01/31/98 Aggregate Year-to-Date -> \$71.49	Amount of Each Receipt this Period \$71.49
Full Name, Mailing Address and Zip Code Yellow Medicine Co Bank 180 - 8th Avenue Granite Falls, MN 56241 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Interest Income Occupation Date (month, day, year) 02/28/98 Aggregate Year-to-Date -> \$946.77	Amount of Each Receipt this Period \$875.28
Full Name, Mailing Address and Zip Code Yellow Medicine Co Bank 180 - 8th Avenue Granite Falls, MN 56241 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Interest Income Occupation Date (month, day, year) 03/31/98 Aggregate Year-to-Date -> \$1244.39	Amount of Each Receipt this Period \$297.62
Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Date (month, day, year) / / Aggregate Year-to-Date ->	Amount of Each Receipt this Period
Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Date (month, day, year) / / Aggregate Year-to-Date ->	Amount of Each Receipt this Period
Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Date (month, day, year) / / Aggregate Year-to-Date ->	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	\$1282.74
TOTAL This Period (last page this line number only)	\$1282.74

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
 Minge for Congress C00254846

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
David L Andrukitis Inc 50 SE E St Washington, DC 20003-	Printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/27/98	\$550.75
Aristotle Publishing Inc 205 SE Pennsylvania Ave Washington, DC 20003-	Campaign Software Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/27/98	\$4500.00
Jocelyn Batko 3701 W Lake St - #106 Minneapolis, MN 55416	Net Wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/15/98	\$926.37
Jocelyn Batko 3701 W Lake St - #106 Minneapolis, MN 55416	Net Wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/01/98	\$926.37
Jocelyn Batko 3701 W Lake St - #106 Minneapolis, MN 55416	Net Wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/01/98	\$1389.56
Jocelyn Batko 3701 W Lake St - #106 Minneapolis, MN 55416	Reimb: Telephone Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/31/98	\$17.78
Jocelyn Batko 3701 W Lake St - #106 Minneapolis, MN 55416	Reimb: Travel Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/20/98	\$248.64

SUBTOTAL of Disbursements This Page (optional)	\$8559.47
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full) 000264846
 Minge for Congress

Full Name, Mailing Address and Zip Code Jocelyn Batko 3701 W Lake St - #106 Minneapolis, MN 55416	Purpose of Disbursement Reimb: Travel Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 03/31/98	Amount of Each Disbursement This Period \$125.44
Full Name, Mailing Address and Zip Code Jocelyn Batko 3701 W Lake St - #106 Minneapolis, MN 55416	Purpose of Disbursement Net Wages Disbursement for: <input type="checkbox"/> Salary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 02/15/98	Amount of Each Disbursement This Period \$926.37
Full Name, Mailing Address and Zip Code Jocelyn Batko 3701 W Lake St - #106 Minneapolis, MN 55416	Purpose of Disbursement Reimb: Office Supplies Disbursement for: <input type="checkbox"/> Salary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 02/10/98	Amount of Each Disbursement This Period \$192.41
Full Name, Mailing Address and Zip Code Kristin L Beckman 77 N Oxford Apt 8 St Paul, MN 55104-	Purpose of Disbursement Reimb: Telephone Expense Disbursement for: <input type="checkbox"/> Salary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 02/23/98	Amount of Each Disbursement This Period \$14.70
Full Name, Mailing Address and Zip Code Kristin L Beckman 77 N Oxford Apt 8 St Paul, MN 55104-	Purpose of Disbursement Reimb: Telephone Expense Disbursement for: <input type="checkbox"/> Salary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 01/12/98	Amount of Each Disbursement This Period \$33.43
Full Name, Mailing Address and Zip Code Kristin L Beckman 77 N Oxford Apt 8 St Paul, MN 55104-	Purpose of Disbursement Contract: Fundraising Consultant Disbursement for: <input type="checkbox"/> Salary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 01/02/98	Amount of Each Disbursement This Period \$2000.00
Full Name, Mailing Address and Zip Code Binder Printing Co 622 Sims Ave Saint Paul, MN 55101-	Purpose of Disbursement Printing Disbursement for: <input type="checkbox"/> Salary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 03/01/98	Amount of Each Disbursement This Period \$214.00

SUBTOTAL of Disbursements This Page (optional)	\$3506.35
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full) C00264846
 Minge for Congress

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bridge Consultants Inc 640 Prior Ave Ste 203 Saint Paul, MN 55104-	Mailing Service Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02/27/98	\$500.00
Bridge Consultants Inc 640 Prior Ave Ste 203 Saint Paul, MN 55104-	Mailing Service Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/10/98	\$325.00
Democratic Congressional Campaign Comm. 430 So Capitol St Washington, DC 20003	(Fundraising Services) Phone, FAX, Copies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02/28/98	\$21.49 IN KIND
Democratic Congressional Campaign Comm. 430 So Capitol St Washington, DC 20003	(Fundraising Services) Phone, FAX, Copies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/31/98	\$13.66 IN KIND
Democratic Congressional Campaign Comm. 430 So Capitol St Washington, DC 20003	Research Materials Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/05/98	\$300.00 IN KIND
GWS/Accent Promotions 3700 Annapolis Ln Plymouth, MN 55447-	Campaign Promotional Material Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	01/27/98	\$1174.90
GWS/Accent Promotions 3700 Annapolis Ln Plymouth, MN 55447-	Campaign Promotional Materials Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	01/02/98	\$900.00

SUBTOTAL of Disbursements This Page (optional)	\$3235.05
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
 Minge for Congress C00264846

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Gateway2000 P O Box 2000 North Sioux City, SD 57049-2000	Computer Equipment Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/07/98	\$1515.51
IRS/Federal Depository Yellow Medicine Bank Granite Falls, MN 56241-	Withholding & Employer Taxes Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/15/98	\$249.90
IRS/Federal Depository Yellow Medicine Bank Granite Falls, MN 56241-	Taxes Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/15/98	\$390.20
IRS/Federal Depository Yellow Medicine Bank Granite Falls, MN 56241-	Unemployment Taxes Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/15/98	\$21.73
IRS/Federal Depository Yellow Medicine Bank Granite Falls, MN 56241-	Withholding & Employer Taxes Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/15/98	\$1079.22
Impact Printing 1067 Rice St Saint Paul, MN 55117-	Printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/10/98	\$898.92
MN Dept of Revenue St Paul, MN 55101-	Withholding Taxes Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/15/98	\$110.00

SUBTOTAL of Disbursements This Page (optional)	\$4265.48
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Minge for Congress

CC0264846

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
MN Dept of Revenue St Paul, MN 55101-	Taxes Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/15/98	\$255.00
MN Dept of Revenue St Paul, MN 55101-	Withholding Taxes Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/15/98	\$215.00
Meyer Associates Inc 114 N Seventh Ave St Cloud, MN 56303-	Telemarketing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/25/98	\$3000.00
Meyer Associates Inc 114 N Seventh Ave St Cloud, MN 56303-	Telemarketing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/11/98	\$1000.00
David Minge R R 4 Box 183 Montevideo, MN 56265-	Reimb: Campaign Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/31/98	\$61.03
David Minge R R 4 Box 183 Montevideo, MN 56265-	Reimb: Telephone Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/31/98	\$25.90
David Minge R R 4 Box 183 Montevideo, MN 56265-	Reimb: Travel Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/31/98	\$689.26

SUBTOTAL of Disbursements This Page (optional)	\$5246.19
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)
Minge for Congress

000254846

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Karen Minge RR 4 Box 183 Montevideo, MN 56265-8928	Reimb: Travel Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/31/98	\$780.75
Karen Minge RR 4 Box 183 Montevideo, MN 56265-8928	Reimb: Telephone Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/31/98	\$352.76
Minneapolis Club Inc 725 S 2nd Ave Minneapolis, MN 55402-	Catering & Room Rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/12/98	\$1241.42
Northwest Airlines 38905 W Six Mile Rd Livonia, MI 48152-	Travel Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/03/98	\$323.00
Postmaster Washington, DC 20001-	Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/23/98	\$640.00
Jeanne Slade 1742 Fairview Mc Lean, VA 22101-	Contract: Fundraising Consultant Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/01/98	\$750.00
Jeanne Slade 1742 fairview Mc Lean, VA 22101-	Reimb: Telephone & Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/31/98	\$59.37

SUBTOTAL of Disbursements This Page (optional)	54147.30
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Minge for Congress **C00264846**

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Jeanne Slade 1742 Fairview Mc Lean, VA 22101-	Reimb: Travel Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/31/98	\$29.00
Jeanne Slade 1742 Fairview Mc Lean, VA 22101-	Reimb: Security Service Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/31/98	\$52.50
Jeanne Slade 1742 Fairview Mc Lean, VA 22101-	Reimb: Event Food/Bev Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/31/98	\$145.40
Patricia E Thoma 360 - 10th Avenue Granite Falls, MN 56241-1443	Net Wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/13/98	\$535.46
Patricia E Thoma 360 - 10th Avenue Granite Falls, MN 56241-1443	Reimb: Telephone Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/13/98	\$19.86
Patricia E Thoma 360 - 10th Avenue Granite Falls, MN 56241-1443	Net Wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/15/98	\$419.04
Tortilla Coast 400 First St SE Washington, DC 20316-	Event Food Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/31/98	\$218.25

SUBTOTAL of Disbursements This Page (optional)	\$1426.51
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

See separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	8	9
FOR LINE NUMBER		
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)
Minge for Congress

C00264846

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Steve Tuttle Tuttle & Tuttle 12 Ft Williams PKY Alexandria, VA 22304-	Printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	01/02/98	\$950.00
U S West P O Box 1301 Minneapolis, MN 55483-0001	Telephone Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02/25/98	\$152.55
U S West P O Box 1301 Minneapolis, MN 55483-0001	Telephone Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/13/98	\$192.98
United Democratic Fund 352 Wacouta St St Paul, MN 55101-	License/Purchase Lists Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02/03/98	\$500.00
Valley Oil Co of Granite Falls Inc 360 - 10th Avenue Granite Falls, MN 56241-	Equipment Rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02/13/98	\$100.00
Valley Oil Co of Granite Falls Inc 360 - 10th Avenue Granite Falls, MN 56241-	Equipment Rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/15/98	\$30.00
Valley Oil Co of Granite Falls Inc 360 - 10th Avenue Granite Falls, MN 56241-	Reimb: Copies & Office Supply Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02/13/98	\$100.00

SUBTOTAL of Disbursements This Page (optional)	\$2026.33
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	9	9
FOR LINE NUMBER		
17		

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NAME OF COMMITTEE (In Full)
Minge for Congress

000264846

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Valley Oil Co of Granite Falls Inc 360 - 10th Avenue Granite Falls, MN 56241-	Reimb: Copies & Office Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/15/98	\$27.20
Viking Office Products 5001 N France Ave Minneapolis, MN 55429-	Office Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/02/98	\$193.21
Viking Office Products 5001 N France Ave Minneapolis, MN 55429-	Office Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/01/98	\$42.47
		/ /	
		/ /	
		/ /	
		/ /	

SUBTOTAL of Disbursements This Page (optional)	\$262.88
TOTAL This Period (last page this line number only)	\$32677.56

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Minge for Congress

CC0264846

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Lois Capps 25 W Anapamu Santa Barbara, CA 93101-	Federal Contribution (CA/22) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special RunOff	02/03/98	\$500.00
Friends of Lois Capps 25 W Anapamu Santa Barbara, CA 93101-	Federal Contribution (CA/22) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special Primary	01/02/98	\$500.00
Re-Elect Loretta Sanchez 12553 Harbor Blvd Garden Grove, CA 92840-	Federal Contribution (CA/46) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/02/98	\$500.00
United Democratic Fund 352 Wacouta St St Paul, MN 55101-	Transfer Excess Funds Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/30/98	\$3000.00
		/ /	
		/ /	
		/ /	

SUBTOTAL of Disbursements This Page (optional)	\$4500.00
TOTAL This Period (last page this line number only)	\$4500.00

SCHEDULE D
(Revised 3/80)DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)	Outstanding Balance beginning this period	Amount Incurred this period	Payment this period	Outstanding Balance at close of this period
Minge for Congress C00264846				
Full Name, Mailing Address and Zip Code David L Andrukitis Inc 50 SE 8 St Washington, DC 20003-	\$550.75	\$676.80	\$550.75	\$676.80
Nature of Debt (Purpose) Printing				
Full Name, Mailing Address and Zip Code IRS/Federal Depository Yellow Medicine Bank Granite Falls, MN 56241-	\$661.83	\$1079.22	\$21.73 \$249.90 \$390.20 \$1079.22	\$0.00
Nature of Debt (Purpose) Taxes				
Full Name, Mailing Address and Zip Code Steve Tuttle Tuttle & Tuttle 12 Ft Williams Pky Alexandria, VA 22304-	\$950.00		\$950.00	\$0.00
Nature of Debt (Purpose) Printing				

1) SUBTOTAL this period (this page optional):	\$676.80
2) TOTAL 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
 (Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

LINE NUMBER 10

(Use separate schedules for each numbered line)

NAME OF COMMITTEE (In Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Minge for Congress CO0264846				
Full Name, Mailing Address and Zip Code Minneapolis Club Inc 729 S 2nd Ave Minneapolis, MN 55402-				
	\$1241.42		\$1241.42	\$0.00
Nature of Debt (Purpose) Catering & Room Rent				
Full Name, Mailing Address and Zip Code W. Millar & Co 1335 - 14th St NW Washington, DC 20005-				
		\$777.40		\$777.40
Nature of Debt (Purpose) Catering				

1) SUBTOTAL (This period this page (optional))	\$777.40
2) TOTAL (This period (last page this line must add))	\$1454.20
3) TOTAL OUTSTANDING LOANS (from Schedule C (last page only))	
4) ADD (Grand total carry forward to appropriate line of Summary Page (last page only))	\$1454.20

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 4/15/98
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 JAO. PREPARER	 4/19/98 DATE PREPARED