

2000 OCT 16 A 1:00

1. NAME OF COMMITTEE (in full)  
**Runbeck for Congress**

ADDRESS (number and street) ☐ Check if different than previously reported  
**PO Box 40340**

CITY, STATE and ZIP CODE STATE/DISTRICT  
**Saint Paul, MN 55104 MN D4**

2. FEC IDENTIFICATION NUMBER  
**c00325670**

3. IS THIS REPORT AN AMENDMENT?  
☐ YES ☒ NO

**4. TYPE OF REPORT**

- ☐ April 15 Quarterly Report ☐ Twelfth day report preceding (Type of Election) \_\_\_\_\_  
election on \_\_\_\_\_ in the State of \_\_\_\_\_
- ☐ July 15 Quarterly Report ☐ Thirtieth day report following the General Election on \_\_\_\_\_  
in the State of \_\_\_\_\_
- ☒ October 15 Quarterly Report ☐ Termination Report
- ☐ January 31 Year End Report
- ☐ July 31 Mid-Year Report (Non-election Year Only)

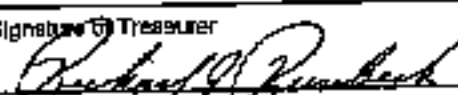
This Report Contains Activity For ☒ Primary Election ☒ General Election ☐ Special Election ☐ Runoff Election

**SUMMARY**

| 5. Covering Period                                                                               | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date                                                                                                                           |
|--------------------------------------------------------------------------------------------------|-------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>8/24/2000 through 9/30/2000</b>                                                               |                         |                                                                                                                                                             |
| 6. Net Contributions (other than loans)                                                          |                         |                                                                                                                                                             |
| (a) Total Contributions (other than loans) (from Line 11(e))                                     | \$216,889.35            | \$619,389.90                                                                                                                                                |
| (b) Total Contribution Refunds (from Line 20(d))                                                 | \$1,000.00              | \$1,000.00                                                                                                                                                  |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))                     | \$215,889.35            | \$618,389.90                                                                                                                                                |
| 7. Net Operating Expenditures                                                                    |                         |                                                                                                                                                             |
| (a) Total Operating Expenditures (from Line 17)                                                  | \$282,681.52            | \$439,753.38                                                                                                                                                |
| (b) Total Offsets to Operating Expenditures (from Line 14)                                       | \$0.00                  | \$0.00                                                                                                                                                      |
| (c) Net Operating Expenditures (subtract Line 7(b) from 7(a))                                    | \$282,681.52            | \$439,753.38                                                                                                                                                |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)                                      | \$238,961.59            | For further information contact:<br>Federal Election Commission<br>999 E Street, NW<br>Washington, DC 20463<br>Toll Free 800-424-9530<br>Local 202-218-3420 |
| 9. Debts and Obligations Owed TO the Committee<br>(itemize all on Schedule C and/or Schedule D)  | \$0.00                  |                                                                                                                                                             |
| 10. Debts and Obligations Owed BY the Committee<br>(itemize all on Schedule C and/or Schedule D) | \$69,709.24             |                                                                                                                                                             |

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 **Rich Runbeck**

Signature of Treasurer  Date **10/15/2000**

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

|  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|

# DETAILED SUMMARY PAGE

of Receipts and Disbursements

(Page 2, FEC FORM 3)

| Name of Committee (in full)<br>Runback for Congress                          |  | Report Covering the Period:<br>From: 8/24/2000 To: 9/30/2000 |                                          |
|------------------------------------------------------------------------------|--|--------------------------------------------------------------|------------------------------------------|
| C00325870                                                                    |  |                                                              |                                          |
| <b>I. RECEIPTS</b>                                                           |  | <b>COLUMN A</b><br>Total This Period                         | <b>COLUMN B</b><br>Calendar Year-to-Date |
| 11. CONTRIBUTIONS (other than loans) FROM:                                   |  |                                                              |                                          |
| (a) Individuals/Persons Other Than Political Committees                      |  |                                                              |                                          |
| (i) Itemized (use Schedule A)                                                |  | \$65,649.00                                                  |                                          |
| (ii) Unitemized                                                              |  | \$31,047.00                                                  |                                          |
| (iii) Total of Contributions from individuals                                |  | \$96,696.00                                                  | \$419,846.55                             |
| (b) Political Party Committees                                               |  | \$500.00                                                     | \$10,850.00                              |
| (c) Other Political Committees (such as PACs)                                |  | \$119,493.35                                                 | \$183,693.35                             |
| (d) The Candidate                                                            |  | \$0.00                                                       | \$5,000.00                               |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(i), (b), (c), and (d)) |  | \$216,689.35                                                 | \$619,389.90                             |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES                               |  | \$0.00                                                       | \$26,935.34                              |
| 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.)                               |  | \$0.00                                                       | \$0.00                                   |
| 16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14, and 15)                        |  | \$216,689.35                                                 | \$646,325.24                             |
| <b>II. DISBURSEMENTS</b>                                                     |  |                                                              |                                          |
| 17. OPERATING EXPENDITURES                                                   |  | \$282,681.52                                                 | \$439,753.38                             |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES                                 |  | \$0.00                                                       | \$0.00                                   |
| 19. LOAN REPAYMENTS:                                                         |  |                                                              |                                          |
| (a) Of Loans Made or Guaranteed by the Candidate                             |  | \$0.00                                                       | \$0.00                                   |
| (b) Of All Other Loans                                                       |  | \$0.00                                                       | \$0.00                                   |
| (c) TOTAL LOAN REPAYMENTS (add 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)                                |  | \$1,000.00                                                   | \$1,000.00                               |
| (d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b), and (c))                     |  | \$1,000.00                                                   | \$1,000.00                               |
| 21. OTHER DISBURSEMENTS                                                      |  | \$0.00                                                       | \$0.00                                   |
| 22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d), and 21)                   |  | \$283,681.52                                                 | \$440,753.38                             |
| <b>III. CASH SUMMARY</b>                                                     |  |                                                              |                                          |
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD                            |  |                                                              | \$305,953.76                             |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16)                                |  |                                                              | \$216,689.35                             |
| 25. SUBTOTAL (add Line 23 and Line 24)                                       |  |                                                              | \$522,643.11                             |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)                           |  |                                                              | \$283,681.52                             |
| 27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25) |  |                                                              | \$238,961.59                             |

# SCHEDULE A

# ITEMIZED RECEIPTS

Use separate  
schedules for each  
category of the

PAGE 1 OF 21

FOR LINE NUMBER

11(a)(i)

## Contributions from Individuals

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)

Runbeck for Congress

c00325670

|                                                                                                                                                                                                                                                                     |                                                                                                         |                                      |                                                  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|--------------------------------------|--------------------------------------------------|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br>Allen, Gene<br>118 White Oaks LN.<br>Saint Paul MN 56127<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):             | Name of Employer<br>Self<br>Occupation<br>CPA<br>Aggregate Year-to-Date > \$1,250.00                    | Date (month, day, year)<br>9/29/2000 | Amount of Each Receipt this Period<br>\$250.00   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br>Amlic, B.N.<br>4715 N. Victoria<br>Saint Paul MN 55126<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):               | Name of Employer<br>First Union<br>Occupation<br>Financial Advisor<br>Aggregate Year-to-Date > \$500.00 | Date (month, day, year)<br>9/12/2000 | Amount of Each Receipt this Period<br>\$500.00   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br>Anderlik, Joseph<br>5120 Lexington Avenue N.<br>Saint Paul MN 55126<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):  | Name of Employer<br>Bonestroo and Anderlik<br>Occupation<br>Exec<br>Aggregate Year-to-Date > \$300.00   | Date (month, day, year)<br>8/27/2000 | Amount of Each Receipt this Period<br>\$150.00   |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br>Anderson Jr., Warren<br>1045 Barrett St.<br>Saint Paul MN 55103<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):      | Name of Employer<br>Self<br>Occupation<br>Small Business Owner<br>Aggregate Year-to-Date > \$250.00     | Date (month, day, year)<br>9/20/2000 | Amount of Each Receipt this Period<br>\$250.00   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br>Aplikowski, Beverly, Mrs.<br>1443 Bussard Ct.<br>Saint Paul MN 55112<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | Name of Employer<br>Self<br>Occupation<br>Owner and Operator<br>Aggregate Year-to-Date > \$1,000.00     | Date (month, day, year)<br>9/8/2000  | Amount of Each Receipt this Period<br>\$350.00   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br>Azzone, Tom<br>1110 Arcade St.<br>Saint Paul MN 55106<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                | Name of Employer<br>Self<br>Occupation<br>Business Owner<br>Aggregate Year-to-Date > \$1,000.00         | Date (month, day, year)<br>9/20/2000 | Amount of Each Receipt this Period<br>\$1,000.00 |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br>Baer, Elam, Mr.<br>195 East 6th Street 2601<br>Saint Paul MN 55101<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):   | Name of Employer<br>QAI<br>Occupation<br>Executive<br>Aggregate Year-to-Date > \$500.00                 | Date (month, day, year)<br>8/24/2000 | Amount of Each Receipt this Period<br>\$250.00   |

SUBTOTAL of Receipts This Page (optional)

\$2,750.00

TOTAL This Period (last page this line number only)

# SCHEDULE A

## ITEMIZED RECEIPTS

Use separate  
schedules for each  
category of the

PAGE 2 OF 21

FOR LINE NUMBER

11(a)(1)

### Contributions from Individuals

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)

Runbeck for Congress

c00326670

|                                                                                                                                                                                                                                                                                             |                                                                                                                             |                                             |                                                         |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|---------------------------------------------------------|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Barton, Raymond</b><br><b>5915 Christmas Lake Rd.</b><br><b>Excelsior MN 55331</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):        | <b>Name of Employer</b><br>Great Clips<br><b>Occupation</b><br>CEO<br><b>Aggregate Year-to-Date</b> > \$1,000.00            | <b>Date (month, day, year)</b><br>9/30/2000 | <b>Amount of Each Receipt this Period</b><br>\$1,000.00 |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Beale, Rebecca</b><br><b>692 Annemore Lane</b><br><b>Naples FL 34108</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                  | <b>Name of Employer</b><br>Retired<br><b>Occupation</b><br>Retired<br><b>Aggregate Year-to-Date</b> > \$2,000.00            | <b>Date (month, day, year)</b><br>9/5/2000  | <b>Amount of Each Receipt this Period</b><br>\$1,000.00 |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Beale, Rebecca</b><br><b>692 Annemore Lane</b><br><b>Naples FL 34108</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                  | <b>Name of Employer</b><br>Retired<br><b>Occupation</b><br>Retired<br><b>Aggregate Year-to-Date</b> > \$2,000.00            | <b>Date (month, day, year)</b><br>9/5/2000  | <b>Amount of Each Receipt this Period</b><br>\$1,000.00 |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Beale, Robert</b><br><b>692 Annemore Lane</b><br><b>Naples FL 34108</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                   | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$2,000.00                          | <b>Date (month, day, year)</b><br>9/5/2000  | <b>Amount of Each Receipt this Period</b><br>\$1,000.00 |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Beale, Robert</b><br><b>692 Annemore Lane</b><br><b>Naples FL 34108</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                   | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$2,000.00                          | <b>Date (month, day, year)</b><br>9/5/2000  | <b>Amount of Each Receipt this Period</b><br>\$1,000.00 |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Bedlow, Thomas</b><br><b>5327 Village Road</b><br><b>Saline MI 48176</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                  | <b>Name of Employer</b><br>3M<br><b>Occupation</b><br>VP<br><b>Aggregate Year-to-Date</b> > \$500.00                        | <b>Date (month, day, year)</b><br>9/18/2000 | <b>Amount of Each Receipt this Period</b><br>\$500.00   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Bentson, N.L.</b><br><b>7900 Xerxes Ave. S. Suite 1100</b><br><b>Minneapolis MN 55431</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | <b>Name of Employer</b><br>MidContinent Media Inc.<br><b>Occupation</b><br>Exec<br><b>Aggregate Year-to-Date</b> > \$250.00 | <b>Date (month, day, year)</b><br>9/22/2000 | <b>Amount of Each Receipt this Period</b><br>\$250.00   |

SUBTOTAL of Receipts This Page (optional)

\$5,750.00

TOTAL This Period (last page this line number only)

# SCHEDULE A

# ITEMIZED RECEIPTS

Use separate  
schedule(s) for each  
category of the

PAGE 3 OF 21  
FOR LINE NUMBER  
11(a)(i)

## Contributions from Individuals

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)

Runback for Congress

c00325670

|                                                                                                                                                                                                                                                                                           |                                                                                                           |                                      |                                                  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|--------------------------------------|--------------------------------------------------|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Berkness, Tim</b><br><b>4115 Drew Ave S</b><br><b>Minneapolis MN 55410</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):              | Name of Employer<br>Pinnacle Direct/ Self<br>Occupation<br>President<br>Aggregate Year-to-Date > \$250.00 | Date (month, day, year)<br>8/24/2000 | Amount of Each Receipt this Period<br>\$250.00   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Bjorklund, Alexandra</b><br><b>94 Dellwood Ave.</b><br><b>Saint Paul MN 55110</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):       | Name of Employer<br>Occupation<br>Aggregate Year-to-Date > \$250.00                                       | Date (month, day, year)<br>9/5/2000  | Amount of Each Receipt this Period<br>\$250.00   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Boehnen, David</b><br><b>71 Otis Lane</b><br><b>Saint Paul MN 55104</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                 | Name of Employer<br>SuperValue<br>Occupation<br>Exec<br>Aggregate Year-to-Date > \$1,000.00               | Date (month, day, year)<br>9/20/2000 | Amount of Each Receipt this Period<br>\$1,000.00 |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Boss, John E., Mr.</b><br><b>2426 Holton</b><br><b>Saint Paul MN 55113</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):              | Name of Employer<br>Occupation<br>Aggregate Year-to-Date > \$1,000.00                                     | Date (month, day, year)<br>9/8/2000  | Amount of Each Receipt this Period<br>\$500.00   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Brandt, J.R., Dr.</b><br><b>330 Northdale Blvd.</b><br><b>Minneapolis MN 55433</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):      | Name of Employer<br>Requested<br>Occupation<br>requested<br>Aggregate Year-to-Date > \$750.00             | Date (month, day, year)<br>8/24/2000 | Amount of Each Receipt this Period<br>\$250.00   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Brost, Betty, Mrs.</b><br><b>81 E. Pleasant Lake Road</b><br><b>Saint Paul MN 55127</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | Name of Employer<br>Requested<br>Occupation<br>Management<br>Aggregate Year-to-Date > \$350.00            | Date (month, day, year)<br>9/23/2000 | Amount of Each Receipt this Period<br>\$100.00   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Bujan, John, Mr.</b><br><b>325 Station Lane North</b><br><b>Hudson WI 54016</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):         | Name of Employer<br>Occupation<br>Aggregate Year-to-Date > \$500.00                                       | Date (month, day, year)<br>9/5/2000  | Amount of Each Receipt this Period<br>\$250.00   |

SUBTOTAL of Receipts This Page (optional)

\$2,600.00

TOTAL This Period (last page this line number only)

# SCHEDULE A

## ITEMIZED RECEIPTS

Use separate  
schedule(s) for each  
category of the

PAGE 4 OF 21

FOR LINE NUMBER

11(a)(i)

### Contributions from Individuals

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)

Runbeck for Congress

c00326670

|                                                                                                                                                                                                                                                                                         |                                                                                                              |                                      |                                                  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|--------------------------------------|--------------------------------------------------|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Carlson, Jarome</b><br><b>6950 Galpin Blvd.</b><br><b>Excelsior MN 55331</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):          | Name of Employer<br>self<br>Occupation<br>Retired<br>Aggregate Year-to-Date > \$500.00                       | Date (month, day, year)<br>9/14/2000 | Amount of Each Receipt this Period<br>\$500.00   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Carpenter, Elsa</b><br><b>4724 Emerson Ave. S.</b><br><b>Minneapolis MN 55409</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):     | Name of Employer<br>Self<br>Occupation<br>Homemaker<br>Aggregate Year-to-Date > \$500.00                     | Date (month, day, year)<br>9/27/2000 | Amount of Each Receipt this Period<br>\$500.00   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Coleman, Douglas, Mr.</b><br><b>140 South Brown Rd.</b><br><b>Long Lake MN 55356</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):  | Name of Employer<br>Retired<br>Occupation<br>Aggregate Year-to-Date > \$1,500.00                             | Date (month, day, year)<br>9/15/2000 | Amount of Each Receipt this Period<br>\$1,000.00 |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Daudi, Robert</b><br><b>6116 Scotia Dr.</b><br><b>Minneapolis MN 55439</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):            | Name of Employer<br>Self<br>Occupation<br>Aggregate Year-to-Date > \$250.00                                  | Date (month, day, year)<br>9/8/2000  | Amount of Each Receipt this Period<br>\$250.00   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Dayton, W. Alan</b><br><b>241 Tangier Ave.</b><br><b>Palm Beach FL 33480</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):          | Name of Employer<br>Retired<br>Occupation<br>Retired<br>Aggregate Year-to-Date > \$500.00                    | Date (month, day, year)<br>9/12/2000 | Amount of Each Receipt this Period<br>\$500.00   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>De Simone, L.</b><br><b>3M Center, Building 220-14W</b><br><b>Saint Paul MN 55144</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | Name of Employer<br>3M General Offices<br>Occupation<br>CEO<br>Aggregate Year-to-Date > \$1,000.00           | Date (month, day, year)<br>9/11/2000 | Amount of Each Receipt this Period<br>\$1,000.00 |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Dempsey, Patrick</b><br><b>1126 St. Clair Avenue</b><br><b>Saint Paul MN 55105</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):    | Name of Employer<br>Open-C Solutions<br>Occupation<br>software engineer<br>Aggregate Year-to-Date > \$250.00 | Date (month, day, year)<br>9/15/2000 | Amount of Each Receipt this Period<br>\$50.00    |

SUBTOTAL of Receipts This Page (optional)

\$3,800.00

TOTAL This Period (last page this line number only)

# SCHEDULE A

# ITEMIZED RECEIPTS

Use separate  
schedules for each  
category of the

PAGE 5 OF 21

FOR LINE NUMBER

11(a)(i)

## Contributions from Individuals

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)

Runbeck for Congress

c00325670

|                                                                                                                                                                                                                                                                        |                                                                                                              |                                      |                                                  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|--------------------------------------|--------------------------------------------------|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br>Dempsey, Patrick<br>1126 St. Clair Avenue<br>Saint Paul MN 55105<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):        | Name of Employer<br>Open-C Solutions<br>Occupation<br>software engineer<br>Aggregate Year-to-Date > \$250.00 | Date (month, day, year)<br>9/29/2000 | Amount of Each Receipt this Period<br>\$50.00    |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br>Diehl, John, Mr.<br>26 Kernwood Parkway<br>Saint Paul MN 55105<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):          | Name of Employer<br>Larken Hoffman<br>Occupation<br>Lawyer<br>Aggregate Year-to-Date > \$300.00              | Date (month, day, year)<br>8/24/2000 | Amount of Each Receipt this Period<br>\$200.00   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br>Dietz, Charlton, Mr.<br>1 Birch Lane<br>Saint Paul MN 55127<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):             | Name of Employer<br>Self<br>Occupation<br>Retired<br>Aggregate Year-to-Date > \$2,000.00                     | Date (month, day, year)<br>9/17/2000 | Amount of Each Receipt this Period<br>\$1,000.00 |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br>Dietzen, C.J., Mr.<br>21 E. 107th Street Circle<br>Minneapolis MN 55420<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | Name of Employer<br>Occupation<br>Aggregate Year-to-Date > \$250.00                                          | Date (month, day, year)<br>8/24/2000 | Amount of Each Receipt this Period<br>\$150.00   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br>Dodge, Olivia<br>1668 Delaware Ave.<br>Saint Paul MN 55118<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):              | Name of Employer<br>Retired<br>Occupation<br>Homemaker<br>Aggregate Year-to-Date > \$500.00                  | Date (month, day, year)<br>9/8/2000  | Amount of Each Receipt this Period<br>\$500.00   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br>Dolan, John<br>19562 Waterford Court<br>Excelsior MN 55331<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):              | Name of Employer<br>Retired<br>Occupation<br>Retired<br>Aggregate Year-to-Date > \$300.00                    | Date (month, day, year)<br>9/28/2000 | Amount of Each Receipt this Period<br>\$100.00   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br>Dolan, John<br>19562 Waterford Court<br>Excelsior MN 55331<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):              | Name of Employer<br>Retired<br>Occupation<br>Retired<br>Aggregate Year-to-Date > \$300.00                    | Date (month, day, year)<br>9/24/2000 | Amount of Each Receipt this Period<br>\$100.00   |

SUBTOTAL of Receipts This Page (optional)

\$2,100.00

TOTAL This Period (last page this line number only)

# SCHEDULE A

## ITEMIZED RECEIPTS

Use separate  
schedules for each  
category of the

PAGE 8 OF 21

FOR LINE NUMBER  
11(a)(i)

### Contributions from Individuals

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)

Runbeck for Congress

c00325670

|                                                                                                                                                                                                                                                                  |                                                                                                        |                                      |                                                           |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|--------------------------------------|-----------------------------------------------------------|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br>Donovan, G.J.<br>160 Woodlawn Ave.<br>Saint Paul MN 55105<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):         | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date > \$500.00                            | Date (month, day, year)<br>9/19/2000 | Amount of Each Receipt this Period<br>\$500.00            |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br>Driscoll, Elizabeth<br>357 Salem Church Rd<br>Saint Paul MN 55118<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | Name of Employer<br>Retired<br>Occupation<br>Retired<br>Aggregate Year-to-Date > \$2,000.00            | Date (month, day, year)<br>9/19/2000 | Amount of Each Receipt this Period<br>\$1,000.00          |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br>Driscoll, Elizabeth<br>357 Salem Church Rd<br>Saint Paul MN 55118<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | Name of Employer<br>Retired<br>Occupation<br>Retired<br>Aggregate Year-to-Date > \$2,000.00            | Date (month, day, year)<br>8/24/2000 | Amount of Each Receipt this Period<br>\$1,000.00          |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br>Duffy, Lois West, Ms.<br>550 Summit Avenue<br>Saint Paul MN 55102<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | Name of Employer<br>Ecolab<br>Occupation<br>Government Relations<br>Aggregate Year-to-Date > \$500.00  | Date (month, day, year)<br>8/24/2000 | Amount of Each Receipt this Period<br>\$250.00            |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br>Ellis, Steve<br>637 North Snelling Ave.<br>Saint Paul MN 55104<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):    | Name of Employer<br>Self Employed<br>Occupation<br>Photographer<br>Aggregate Year-to-Date > \$1,919.00 | Date (month, day, year)<br>8/24/2000 | Amount of Each Receipt this Period<br>\$50.00<br>In-Kind  |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br>Ellis, Steve<br>637 North Snelling Ave.<br>Saint Paul MN 55104<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):    | Name of Employer<br>Self Employed<br>Occupation<br>Photographer<br>Aggregate Year-to-Date > \$1,919.00 | Date (month, day, year)<br>8/24/2000 | Amount of Each Receipt this Period<br>\$50.00<br>In-Kind  |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br>Ellis, Steve<br>637 North Snelling Ave.<br>Saint Paul MN 55104<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):    | Name of Employer<br>Self Employed<br>Occupation<br>Photographer<br>Aggregate Year-to-Date > \$1,919.00 | Date (month, day, year)<br>8/31/2000 | Amount of Each Receipt this Period<br>\$819.00<br>In-Kind |

SUBTOTAL of Receipts This Page (optional)

\$3,659.00

TOTAL This Period (last page this line number only)



# SCHEDULE A

## ITEMIZED RECEIPTS

Use separate  
schedules for each  
category of the

PAGE 7 OF 21

FOR LINE NUMBER  
11(a)(i)

### Contributions from Individuals

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)

Runbeck for Congress

c00325670

|                                                                                                                                                                                                                                                                                                |                                                                                                                                            |                                                      |                                                                                      |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------|--------------------------------------------------------------------------------------|
| <p>A. Full Name, Mailing Address and ZIP Code<br/> <b>Ellis, Steve</b><br/> <b>637 North Snelling Ave.</b><br/> <b>Saint Paul MN 55104</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br/> <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer<br/> <b>Self Employed</b></p> <p>Occupation<br/> <b>Photographer</b></p> <p>Aggregate Year-to-Date &gt; \$1,919.00</p> | <p>Date (month, day, year)<br/> <b>8/31/2000</b></p> | <p>Amount of Each Receipt this Period<br/> <b>\$1,000.00</b><br/> <b>In-Kind</b></p> |
| <p>B. Full Name, Mailing Address and ZIP Code<br/> <b>Elsholtz Jr., W.E.</b><br/> <b>7 Island Road</b><br/> <b>Saint Paul MN 55127</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br/> <input type="checkbox"/> Other (Specify):</p>     | <p>Name of Employer<br/> <b>Overnight Express</b></p> <p>Occupation<br/> <b>Exec</b></p> <p>Aggregate Year-to-Date &gt; \$500.00</p>       | <p>Date (month, day, year)<br/> <b>9/25/2000</b></p> | <p>Amount of Each Receipt this Period<br/> <b>\$500.00</b></p>                       |
| <p>C. Full Name, Mailing Address and ZIP Code<br/> <b>Fesler, David</b><br/> <b>1573 Selby Avenue</b><br/> <b>Saint Paul MN 55104</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br/> <input type="checkbox"/> Other (Specify):</p>      | <p>Name of Employer<br/> <b>Requested</b></p> <p>Occupation<br/> <b>Requested</b></p> <p>Aggregate Year-to-Date &gt; \$350.00</p>          | <p>Date (month, day, year)<br/> <b>9/27/2000</b></p> | <p>Amount of Each Receipt this Period<br/> <b>\$100.00</b></p>                       |
| <p>D. Full Name, Mailing Address and ZIP Code<br/> <b>Fink, James</b><br/> <b>2689 Sumac Ridge</b><br/> <b>Saint Paul MN 55110</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (Specify):</p>         | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$250.00</p>                                                      | <p>Date (month, day, year)<br/> <b>8/26/2000</b></p> | <p>Amount of Each Receipt this Period<br/> <b>\$50.00</b></p>                        |
| <p>E. Full Name, Mailing Address and ZIP Code<br/> <b>Frels, William, Mr.</b><br/> <b>2 Nuthatch Lane</b><br/> <b>Saint Paul MN 55127</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (Specify):</p>  | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$350.00</p>                                                      | <p>Date (month, day, year)<br/> <b>8/28/2000</b></p> | <p>Amount of Each Receipt this Period<br/> <b>\$250.00</b></p>                       |
| <p>F. Full Name, Mailing Address and ZIP Code<br/> <b>Friedman, Audrey</b><br/> <b>2 Gadwall Lane</b><br/> <b>Saint Paul MN 55127</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (Specify):</p>      | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$250.00</p>                                                      | <p>Date (month, day, year)<br/> <b>9/4/2000</b></p>  | <p>Amount of Each Receipt this Period<br/> <b>\$250.00</b></p>                       |
| <p>G. Full Name, Mailing Address and ZIP Code<br/> <b>Froistad, Thomas</b><br/> <b>2065 E. 14th Ave</b><br/> <b>Saint Paul MN 55109</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (Specify):</p>    | <p>Name of Employer</p> <p>Occupation<br/> <b>Printing</b></p> <p>Aggregate Year-to-Date &gt; \$250.00</p>                                 | <p>Date (month, day, year)<br/> <b>8/24/2000</b></p> | <p>Amount of Each Receipt this Period<br/> <b>\$250.00</b></p>                       |

SUBTOTAL of Receipts This Page (optional)

\$2,400.00

TOTAL This Period (last page this line number only)

# SCHEDULE A

# ITEMIZED RECEIPTS

Use separate  
schedule(s) for each  
category of the

PAGE 8 OF 21

FOR LINE NUMBER

11(a)(8)

## Contributions from Individuals

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)

Runbeck for Congress

c00325670

|                                                                                                                                                                                                                                                                                           |                                                                                                                                      |                                             |                                                         |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|---------------------------------------------------------|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Fudge, David, Mr.</b><br><b>7421 Commerca Lane NE</b><br><b>Minneapolis MN 55432</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):    | <b>Name of Employer</b><br>Larsen's Meg. Co.<br><b>Occupation</b><br>President and CEO<br><b>Aggregate Year-to-Date</b> > \$2,000.00 | <b>Date (month, day, year)</b><br>9/15/2000 | <b>Amount of Each Receipt this Period</b><br>\$1,000.00 |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Gaerlson, Charles</b><br><b>2600 Arcoretum Blvd.</b><br><b>Excelsior MN 55331</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):       | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$250.00                                     | <b>Date (month, day, year)</b><br>8/24/2000 | <b>Amount of Each Receipt this Period</b><br>\$250.00   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Gorman, Steven, Dr.</b><br><b>25 Raven Road</b><br><b>Saint Paul MN 55127</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):           | <b>Name of Employer</b><br><br><b>Occupation</b><br>Doctor<br><b>Aggregate Year-to-Date</b> > \$250.00                               | <b>Date (month, day, year)</b><br>9/30/2000 | <b>Amount of Each Receipt this Period</b><br>\$250.00   |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Granlund, Leland, Mr.</b><br><b>795 Millwood Avenue</b><br><b>Saint Paul MN 56113</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):   | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$1,000.00                                   | <b>Date (month, day, year)</b><br>9/26/2000 | <b>Amount of Each Receipt this Period</b><br>\$500.00   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Guthmann, Howard, Mr.</b><br><b>683 Wentworth Avenue</b><br><b>Saint Paul MN 55118</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):  | <b>Name of Employer</b><br>Wilkerson, Guthmann, Johnson<br><b>Occupation</b><br>Partner<br><b>Aggregate Year-to-Date</b> > \$600.00  | <b>Date (month, day, year)</b><br>9/16/2000 | <b>Amount of Each Receipt this Period</b><br>\$300.00   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Hagfors, Evangeline</b><br><b>1599 Trollhagen Dr. NE</b><br><b>Minneapolis MN 55421</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$500.00                                     | <b>Date (month, day, year)</b><br>9/12/2000 | <b>Amount of Each Receipt this Period</b><br>\$500.00   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Halverson, Kenneth, Mr.</b><br><b>21080 Olinda Trail N.</b><br><b>Scandia MN 55073</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):  | <b>Name of Employer</b><br><br><b>Occupation</b><br>CPA<br><b>Aggregate Year-to-Date</b> > \$350.00                                  | <b>Date (month, day, year)</b><br>9/8/2000  | <b>Amount of Each Receipt this Period</b><br>\$100.00   |

SUBTOTAL of Receipts This Page (optional)

\$2,900.00

TOTAL This Period (last page this line number only)

# SCHEDULE A

# ITEMIZED RECEIPTS

Use separate  
schedules for each  
category of the

PAGE 9 OF 21

FOR LINE NUMBER

11(a)(i)

## Contributions from Individuals

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)

Runbeck for Congress

c00325670

|                                                                                                                                                                                                                                                                                       |                                                                                                                                              |                                             |                                                         |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|---------------------------------------------------------|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Hamilton, Jane</b><br><b>5 Polo Club Road</b><br><b>Denver CO 80209</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):             | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$1,000.00                                           | <b>Date (month, day, year)</b><br>9/13/2000 | <b>Amount of Each Receipt this Period</b><br>\$1,000.00 |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Hanson, Dale</b><br><b>15707 Afton Hills Dr. S.</b><br><b>Afton MN 55001</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):        | <b>Name of Employer</b><br><br><b>Occupation</b><br>Retired<br><b>Aggregate Year-to-Date</b> > \$250.00                                      | <b>Date (month, day, year)</b><br>9/24/2000 | <b>Amount of Each Receipt this Period</b><br>\$250.00   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Hartle, Allyson</b><br><b>1046 Prior Avenue South</b><br><b>Saint Paul MN 55116</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | <b>Name of Employer</b><br>Lockridge Grindal<br><b>Occupation</b><br>Lobbyist<br><b>Aggregate Year-to-Date</b> > \$350.00                    | <b>Date (month, day, year)</b><br>8/24/2000 | <b>Amount of Each Receipt this Period</b><br>\$250.00   |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Haselow, Robert</b><br><b>6408 Interlachen Blvd.</b><br><b>Minneapolis MN 55436</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | <b>Name of Employer</b><br>Minneapolis Radiation<br>Oncology<br><b>Occupation</b><br>Physician<br><b>Aggregate Year-to-Date</b> > \$1,000.00 | <b>Date (month, day, year)</b><br>9/4/2000  | <b>Amount of Each Receipt this Period</b><br>\$500.00   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Haselow, Robert</b><br><b>6408 Interlachen Blvd.</b><br><b>Minneapolis MN 55436</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | <b>Name of Employer</b><br>Minneapolis Radiation<br>Oncology<br><b>Occupation</b><br>Physician<br><b>Aggregate Year-to-Date</b> > \$1,000.00 | <b>Date (month, day, year)</b><br>9/30/2000 | <b>Amount of Each Receipt this Period</b><br>\$500.00   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Hellervik, Lowell</b><br><b>PO Box 160527</b><br><b>Irving TX 75018</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):             | <b>Name of Employer</b><br>PDI Inc.<br><b>Occupation</b><br>CBO<br><b>Aggregate Year-to-Date</b> > \$1,000.00                                | <b>Date (month, day, year)</b><br>9/22/2000 | <b>Amount of Each Receipt this Period</b><br>\$1,000.00 |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Handrickson, John</b><br><b>643 154th Ave. N.E.</b><br><b>Anoka MN 55304</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):        | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$250.00                                             | <b>Date (month, day, year)</b><br>8/28/2000 | <b>Amount of Each Receipt this Period</b><br>\$250.00   |

SUBTOTAL of Receipts This Page (optional)

\$3,750.00

TOTAL This Period (last page this line number only)

# SCHEDULE A

## ITEMIZED RECEIPTS

Use separate  
schedules for each  
category of the

PAGE 10 OF 21

FOR LINE NUMBER  
11(a)(i)

### Contributions from Individuals

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)

Runbeck for Congress

c00325670

|                                                                                                                                                                                                                                                                                                 |                                                                                             |                                      |                                                |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|--------------------------------------|------------------------------------------------|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Hill, J. Howard, Mr.</b><br><b>4 Oriole Lane</b><br><b>Saint Paul MN 55127</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date > \$400.00                 | Date (month, day, year)<br>9/26/2000 | Amount of Each Receipt this Period<br>\$200.00 |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Hunt, William</b><br><b>14244 Skog Rd.</b><br><b>Grantsburg WI 54840</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                      | Name of Employer<br><br>Occupation<br>Retired<br>Aggregate Year-to-Date > \$300.00          | Date (month, day, year)<br>9/30/2000 | Amount of Each Receipt this Period<br>\$300.00 |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Jalonack, Thomas, Mr.</b><br><b>1915 Arcade Street Apt. 302</b><br><b>Saint Paul MN 55109</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | Name of Employer<br>Self<br>Occupation<br>Real estate<br>Aggregate Year-to-Date > \$400.00  | Date (month, day, year)<br>9/25/2000 | Amount of Each Receipt this Period<br>\$200.00 |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Jeddeloh, Ann</b><br><b>6 Ski Lane</b><br><b>Saint Paul MN 55127</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                          | Name of Employer<br><br>Occupation<br>Doctor<br>Aggregate Year-to-Date > \$250.00           | Date (month, day, year)<br>8/24/2000 | Amount of Each Receipt this Period<br>\$250.00 |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Jerome, Jerome</b><br><b>1396 14 1/2 Ave.</b><br><b>Barron WI 54812</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                       | Name of Employer<br><br>Occupation<br>Aggregate Year-to-Date > \$250.00                     | Date (month, day, year)<br>8/24/2000 | Amount of Each Receipt this Period<br>\$250.00 |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Johnson, James</b><br><b>2034 Lower Saint Dennis Road</b><br><b>Saint Paul MN 55116</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):       | Name of Employer<br><br>Occupation<br>Aggregate Year-to-Date > \$250.00                     | Date (month, day, year)<br>9/24/2000 | Amount of Each Receipt this Period<br>\$250.00 |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Kellogg, Esther</b><br><b>339 Mt. Curve Blvd.</b><br><b>Saint Paul MN 55105</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):               | Name of Employer<br>Homemaker<br>Occupation<br>Retired<br>Aggregate Year-to-Date > \$250.00 | Date (month, day, year)<br>8/24/2000 | Amount of Each Receipt this Period<br>\$250.00 |

SUBTOTAL of Receipts This Page (optional)

\$1,700.00

TOTAL This Period (last page this line number only)

# SCHEDULE A

## ITEMIZED RECEIPTS

Use separate  
schedules for each  
category of the

PAGE 11 OF 21

FOR LINE NUMBER  
11(a)(i)

### Contributions from individuals

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)

Runbeck for Congress

c00328670

|                                                                                                                                                                                                                                                                            |                                                                                                                                    |                                              |                                                          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|----------------------------------------------------------|
| <p>A. Full Name, Mailing Address and ZIP Code<br/>Kellogg, Martin, Mr.<br/>339 Mt. Curve Blvd.<br/>Saint Paul MN 55105</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br/><input type="checkbox"/> Other (Specify):</p>  | <p>Name of Employer<br/>UPB Inc.</p> <p>Occupation<br/>Owner</p> <p>Aggregate Year-to-Date &gt; \$2,000.00</p>                     | <p>Date (month, day, year)<br/>9/30/2000</p> | <p>Amount of Each Receipt this Period<br/>\$750.00</p>   |
| <p>B. Full Name, Mailing Address and ZIP Code<br/>Klas, Robert<br/>892 Marie Ave. W.<br/>Saint Paul MN 55118</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br/><input type="checkbox"/> Other (Specify):</p>            | <p>Name of Employer<br/>Tapemark</p> <p>Occupation<br/>Executive</p> <p>Aggregate Year-to-Date &gt; \$1,120.00</p>                 | <p>Date (month, day, year)<br/>8/30/2000</p> | <p>Amount of Each Receipt this Period<br/>\$20.00</p>    |
| <p>C. Full Name, Mailing Address and ZIP Code<br/>Klas, Robert<br/>892 Marie Ave. W.<br/>Saint Paul MN 55118</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br/><input type="checkbox"/> Other (Specify):</p>            | <p>Name of Employer<br/>Tapemark</p> <p>Occupation<br/>Executive</p> <p>Aggregate Year-to-Date &gt; \$1,120.00</p>                 | <p>Date (month, day, year)<br/>8/27/2000</p> | <p>Amount of Each Receipt this Period<br/>\$500.00</p>   |
| <p>D. Full Name, Mailing Address and ZIP Code<br/>Klein, William<br/>1210 Bayard Ave.<br/>Saint Paul MN 55116</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br/><input type="checkbox"/> Other (Specify):</p>           | <p>Name of Employer<br/>Requested</p> <p>Occupation<br/>Requested</p> <p>Aggregate Year-to-Date &gt; \$500.00</p>                  | <p>Date (month, day, year)<br/>9/29/2000</p> | <p>Amount of Each Receipt this Period<br/>\$100.00</p>   |
| <p>E. Full Name, Mailing Address and ZIP Code<br/>Kristal, Henry B., Mr.<br/>1044 Overlook Road<br/>Saint Paul MN 55118</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br/><input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer<br/>Owner</p> <p>Occupation<br/>Ember s</p> <p>Aggregate Year-to-Date &gt; \$350.00</p>                        | <p>Date (month, day, year)<br/>9/11/2000</p> | <p>Amount of Each Receipt this Period<br/>\$150.00</p>   |
| <p>F. Full Name, Mailing Address and ZIP Code<br/>Kroll, Randall, Mr.<br/>1485 18th Ave.<br/>Saint Paul MN 55112</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (Specify):</p>        | <p>Name of Employer<br/>Wilkerson Guthmann &amp; Johnson</p> <p>Occupation<br/>CPA</p> <p>Aggregate Year-to-Date &gt; \$650.00</p> | <p>Date (month, day, year)<br/>8/26/2000</p> | <p>Amount of Each Receipt this Period<br/>\$50.00</p>    |
| <p>G. Full Name, Mailing Address and ZIP Code<br/>Kuhmeyer, Carl<br/>13 Oriola Ln.<br/>Saint Paul MN 55127</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (Specify):</p>              | <p>Name of Employer<br/>3M</p> <p>Occupation<br/>Retired</p> <p>Aggregate Year-to-Date &gt; \$1,000.00</p>                         | <p>Date (month, day, year)<br/>9/6/2000</p>  | <p>Amount of Each Receipt this Period<br/>\$1,000.00</p> |

SUBTOTAL of Receipts This Page (optional)

\$2,570.00

TOTAL This Period (last page this line number only)

# SCHEDULE A

## ITEMIZED RECEIPTS

Use separate  
schedules for each  
category of tax

PAGE 12 OF 21  
FOR LINE NUMBER  
11(a)(1)

### Contributions from Individuals

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)

Runbeck for Congress

c00325670

|                                                                                                                                                                                                                                                                |                                                                                                     |                                      |                                                |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|--------------------------------------|------------------------------------------------|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br>Larsen, Turid, Mrs.<br>17309 97th Place SW<br>Vashon WA 98070<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):   | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date > \$300.00                         | Date (month, day, year)<br>8/24/2000 | Amount of Each Receipt this Period<br>\$100.00 |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br>Larson, Jeffery, Mr.<br>P.O. Box 1324<br>Hudson WI 54016<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):        | Name of Employer<br>Self<br>Occupation<br>President<br>Aggregate Year-to-Date > \$500.00            | Date (month, day, year)<br>8/24/2000 | Amount of Each Receipt this Period<br>\$250.00 |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br>Lentsch, Eugene, Mr.<br>882 Highview Cr.<br>Saint Paul MN 55118<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date > \$500.00                         | Date (month, day, year)<br>8/24/2000 | Amount of Each Receipt this Period<br>\$100.00 |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br>Lentsch, Eugene, Mr.<br>882 Highview Cr.<br>Saint Paul MN 55118<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date > \$500.00                         | Date (month, day, year)<br>9/17/2000 | Amount of Each Receipt this Period<br>\$100.00 |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br>Lentsch, Eugene, Mr.<br>882 Highview Cr.<br>Saint Paul MN 55118<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date > \$500.00                         | Date (month, day, year)<br>9/21/2000 | Amount of Each Receipt this Period<br>\$150.00 |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br>Levahn, Noreen<br>1669 Blueberry Lane<br>Saint Paul MN 55112<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):    | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date > \$500.00                         | Date (month, day, year)<br>8/29/2000 | Amount of Each Receipt this Period<br>\$500.00 |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br>Macke, Timothy<br>1313 Medora Road<br>Saint Paul MN 55118<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):       | Name of Employer<br>Liberty State Bank<br>Occupation<br>Banker<br>Aggregate Year-to-Date > \$500.00 | Date (month, day, year)<br>9/27/2000 | Amount of Each Receipt this Period<br>\$500.00 |

SUBTOTAL of Receipts This Page (optional)

\$1,700.00

TOTAL This Period (last page this line number only)

# SCHEDULE A

## ITEMIZED RECEIPTS

Use separate  
schedule(s) for each  
category of the

PAGE 13 OF 21

FOR LINE NUMBER

11(a)(1)

### Contributions from Individuals

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)

Runbeck for Congress

c00325670

|                                                                                                                                                                                                                                                                                           |                                                                                                   |                                      |                                                  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|--------------------------------------|--------------------------------------------------|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Madsen, Robert</b><br><b>2353 Youngman Ave Apt 106</b><br><b>Saint Paul MN 55116</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):    | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date > \$235.00                       | Date (month, day, year)<br>9/26/2000 | Amount of Each Receipt this Period<br>\$100.00   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Mairs, George</b><br><b>332 Minnesota St</b><br><b>Saint Paul MN 55101</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):              | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date > \$1,000.00                     | Date (month, day, year)<br>9/7/2000  | Amount of Each Receipt this Period<br>\$1,000.00 |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Mairs, Robert G.</b><br><b>234 Exchange St</b><br><b>Saint Paul MN 55102</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):            | Name of Employer<br>Mairs Co.<br>Occupation<br>CEO<br>Aggregate Year-to-Date > \$250.00           | Date (month, day, year)<br>8/24/2000 | Amount of Each Receipt this Period<br>\$250.00   |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Mairs, Thomas</b><br><b>894 S. Highview Circle</b><br><b>Saint Paul MN 55118</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):        | Name of Employer<br>Retired<br>Occupation<br>Retired<br>Aggregate Year-to-Date > \$450.00         | Date (month, day, year)<br>9/29/2000 | Amount of Each Receipt this Period<br>\$50.00    |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>McCarthy, Edwin</b><br><b>336 Robert St. N. Ste. 1124</b><br><b>Saint Paul MN 55101</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date > \$1,000.00                     | Date (month, day, year)<br>9/19/2000 | Amount of Each Receipt this Period<br>\$1,000.00 |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>McMahon, Robert</b><br><b>1371 Medora Road</b><br><b>Saint Paul MN 55118</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):            | Name of Employer<br>Dayton Hudson<br>Occupation<br>Exec.<br>Aggregate Year-to-Date > \$1,000.00   | Date (month, day, year)<br>9/18/2000 | Amount of Each Receipt this Period<br>\$1,000.00 |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>McMillan, Douglas, Mr.</b><br><b>707 Goodrich Avenue</b><br><b>Saint Paul MN 55105</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):  | Name of Employer<br>Self Employed<br>Occupation<br>Retired<br>Aggregate Year-to-Date > \$1,000.00 | Date (month, day, year)<br>9/1/2000  | Amount of Each Receipt this Period<br>\$500.00   |

SUBTOTAL of Receipts This Page (optional)

\$3,900.00

TOTAL This Period (last page this line number only)

# SCHEDULE A

## ITEMIZED RECEIPTS

Use separate  
schedules for each  
category of the

PAGE 14 OF 21  
FOR LINE NUMBER  
11(a)(i)

### Contributions from Individuals

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)

Runback for Congress

c00326670

|                                                                                                                                                                                                                                                                                                |                                                                                                                                                             |                                                    |                                                              |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|--------------------------------------------------------------|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Molin, Thomas, Mr.</b><br><b>78 E. Golden Lake Road</b><br><b>Circle Pines MN 55014</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):      | <b>Name of Employer</b><br><b>Molin Concrete Prod.</b><br><b>Co.</b><br><b>Occupation</b><br><b>President</b><br><b>Aggregate Year-to-Date</b> > \$1,750.00 | <b>Date (month, day, year)</b><br><b>8/31/2000</b> | <b>Amount of Each Receipt this Period</b><br><b>\$500.00</b> |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Mullen, John</b><br><b>1126 Kingsley Circle N.</b><br><b>Saint Paul MN 55118</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):             | <b>Name of Employer</b><br><b>Occupation</b><br><b>Aggregate Year-to-Date</b> > \$250.00                                                                    | <b>Date (month, day, year)</b><br><b>8/29/2000</b> | <b>Amount of Each Receipt this Period</b><br><b>\$250.00</b> |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Naegels, William</b><br><b>1 Watertower Place 4300 Baker Road</b><br><b>Hopkins MN 55343</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | <b>Name of Employer</b><br><b>MN Wild</b><br><b>Occupation</b><br><b>Owner</b><br><b>Aggregate Year-to-Date</b> > \$500.00                                  | <b>Date (month, day, year)</b><br><b>9/12/2000</b> | <b>Amount of Each Receipt this Period</b><br><b>\$500.00</b> |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Nazarenko, Alexander</b><br><b>4511 Strawberry Lane</b><br><b>Minneapolis MN 55416</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):       | <b>Name of Employer</b><br><b>Occupation</b><br><b>Aggregate Year-to-Date</b> > \$250.00                                                                    | <b>Date (month, day, year)</b><br><b>8/29/2000</b> | <b>Amount of Each Receipt this Period</b><br><b>\$250.00</b> |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Nelson, Marilyn</b><br><b>301 Carlson Pkwy. Suite 102</b><br><b>Hopkins MN 55305</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):         | <b>Name of Employer</b><br><b>Carlson Co.</b><br><b>Occupation</b><br><b>President</b><br><b>Aggregate Year-to-Date</b> > \$500.00                          | <b>Date (month, day, year)</b><br><b>8/29/2000</b> | <b>Amount of Each Receipt this Period</b><br><b>\$500.00</b> |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Nelson, Marlys</b><br><b>5644 Heather Ridge Court</b><br><b>Saint Paul MN 55126</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):          | <b>Name of Employer</b><br><b>Occupation</b><br><b>Aggregate Year-to-Date</b> > \$250.00                                                                    | <b>Date (month, day, year)</b><br><b>8/27/2000</b> | <b>Amount of Each Receipt this Period</b><br><b>\$250.00</b> |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Oberman, Jeffrey</b><br><b>1999 Lower 8L Dennis Rd.</b><br><b>Saint Paul MN 55116</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):        | <b>Name of Employer</b><br><b>Oppenheimer</b><br><b>Occupation</b><br><b>Attorney</b><br><b>Aggregate Year-to-Date</b> > \$250.00                           | <b>Date (month, day, year)</b><br><b>9/11/2000</b> | <b>Amount of Each Receipt this Period</b><br><b>\$250.00</b> |

SUBTOTAL of Receipts This Page (optional)

\$2,500.00

TOTAL This Period (last page this line number only)



# SCHEDULE A

## ITEMIZED RECEIPTS

Use separate  
schedule(s) for each  
category of the

PAGE 15 OF 21

FOR LINE NUMBER  
11(a)(1)

### Contributions from Individuals

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)

Runbeck for Congress

c00325670

|                                                                                                                                                                                                                                                                                                   |                                                                                                                            |                                      |                                                             |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|--------------------------------------|-------------------------------------------------------------|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Ordway, John</b><br><b>73 Tamarack St.</b><br><b>Saint Paul MN 56115</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                        | Name of Employer<br>Retired<br>Occupation<br>Retired<br>Aggregate Year-to-Date > \$250.00                                  | Date (month, day, year)<br>9/6/2000  | Amount of Each Receipt this Period<br>\$250.00              |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Ordway, Philip</b><br><b>1500 Pioneer Bldg. 336 N. Robert St.</b><br><b>Saint Paul MN 55101</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | Name of Employer<br>Occupation<br>President<br>Aggregate Year-to-Date > \$1,000.00                                         | Date (month, day, year)<br>9/12/2000 | Amount of Each Receipt this Period<br>\$1,000.00            |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Papenfuss, Jerry</b><br><b>276 Peasant Hill Drive</b><br><b>Winona MN 55987</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                 | Name of Employer<br>Winona Radio Station<br>Occupation<br>CBO<br>Aggregate Year-to-Date > \$500.00                         | Date (month, day, year)<br>8/25/2000 | Amount of Each Receipt this Period<br>\$500.00              |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Pappas, Michael</b><br><b>4841 Lake Ave</b><br><b>Saint Paul MN 55110</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                       | Name of Employer<br>Occupation<br>Aggregate Year-to-Date > \$300.00                                                        | Date (month, day, year)<br>8/29/2000 | Amount of Each Receipt this Period<br>\$300.00              |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Payne, Elizabeth</b><br><b>400 Sycamore Lane</b><br><b>Minneapolis MN 55441</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                 | Name of Employer<br>Occupation<br>Aggregate Year-to-Date > \$500.00                                                        | Date (month, day, year)<br>8/28/2000 | Amount of Each Receipt this Period<br>\$500.00              |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Pellow, Rod</b><br><b>Street Required</b><br><b>City ST 00000</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                               | Name of Employer<br>Twin Cities Auto Wrecker Sales<br>Occupation<br>Auto Sales/Self<br>Aggregate Year-to-Date > \$1,000.00 | Date (month, day, year)<br>9/6/2000  | Amount of Each Receipt this Period<br>\$1,000.00<br>In-Kind |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Peltier, Gerald R.</b><br><b>21940 Finley Court N.</b><br><b>Forest Lake MN 55025</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):           | Name of Employer<br>Occupation<br>Aggregate Year-to-Date > \$250.00                                                        | Date (month, day, year)<br>9/11/2000 | Amount of Each Receipt this Period<br>\$250.00              |

SUBTOTAL of Receipts This Page (optional)

\$3,800.00

TOTAL This Period (last page this line number only)

# SCHEDULE A

## ITEMIZED RECEIPTS

Use separate  
schedules for each  
category of the

PAGE 16 OF 21

FOR LINE NUMBER  
11(a)(1)

### Contributions from Individuals

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)

Runbeck for Congress

c00325670

|                                                                                                                                                                                                                                                                                                  |                                                                                                                     |                                             |                                                         |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------|---------------------------------------------|---------------------------------------------------------|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Phillips, Raymond</b><br><b>19147 Maple Leaf Dr. S.</b><br><b>Eden Prairie MN 55344</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):        | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$500.00                    | <b>Date (month, day, year)</b><br>9/11/2000 | <b>Amount of Each Receipt this Period</b><br>\$500.00   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Quigley, Terence J., Mr.</b><br><b>4284 Virginia Avenue</b><br><b>Saint Paul MN 55126</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):      | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$500.00                    | <b>Date (month, day, year)</b><br>9/1/2000  | <b>Amount of Each Receipt this Period</b><br>\$500.00   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Quilhot, Jeanette</b><br><b>5535 Reed Road</b><br><b>Fort Wayne IN 46835</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                   | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$1,000.00                  | <b>Date (month, day, year)</b><br>9/22/2000 | <b>Amount of Each Receipt this Period</b><br>\$1,000.00 |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Rapport, Phillip, Dr.</b><br><b>5601 River Bluff Curve</b><br><b>Minneapolis MN 55437</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):      | <b>Name of Employer</b><br><br><b>Occupation</b><br>Doctor<br><b>Aggregate Year-to-Date</b> > \$300.00              | <b>Date (month, day, year)</b><br>9/23/2000 | <b>Amount of Each Receipt this Period</b><br>\$300.00   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Reedy, Darwin</b><br><b>51 Peninsula Rd</b><br><b>Saint Paul MN 55110</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                      | <b>Name of Employer</b><br>Burnet Realty<br><b>Occupation</b><br>Exec<br><b>Aggregate Year-to-Date</b> > \$1,000.00 | <b>Date (month, day, year)</b><br>9/7/2000  | <b>Amount of Each Receipt this Period</b><br>\$1,000.00 |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Regan, Donald</b><br><b>2550 E. Poplar</b><br><b>Saint Paul MN 55109</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                       | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$500.00                    | <b>Date (month, day, year)</b><br>9/8/2000  | <b>Amount of Each Receipt this Period</b><br>\$500.00   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Reuter, Charlene</b><br><b>30 East Seventh Street Suite 3050</b><br><b>Saint Paul MN 55101</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$500.00                    | <b>Date (month, day, year)</b><br>9/21/2000 | <b>Amount of Each Receipt this Period</b><br>\$500.00   |

SUBTOTAL of Receipts This Page (optional)

\$4,300.00

TOTAL This Period (last page this line number only)

# SCHEDULE A

# ITEMIZED RECEIPTS

Use separate  
schedules for each  
category of the

PAGE 17 OF 21

FOR LINE NUMBER  
11(a)(i)

## Contributions from Individuals

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)

Runbeck for Congress

c00325670

|                                                                                                                                                                                                                                                                             |                                                                                                      |                                      |                                                  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------|--------------------------------------------------|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br>Rogers, Michael, Mr.<br>4026 Thrushwood Lane<br>Minnetonka MN 55345<br><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):      | Name of Employer<br><br>Occupation<br>Engineer<br><br>Aggregate Year-to-Date > \$1,010.00            | Date (month, day, year)<br>9/11/2000 | Amount of Each Receipt this Period<br>\$10.00    |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br>Ronning, Joel<br>5300 Smithtown Rd.<br>Excelsior MN 55331<br><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date > \$1,000.00                        | Date (month, day, year)<br>9/19/2000 | Amount of Each Receipt this Period<br>\$1,000.00 |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br>Rorke, Herbert F., Mr.<br>4801 Irving Ave. S.<br>Minneapolis MN 55409<br><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):    | Name of Employer<br>Rorke Data<br><br>Occupation<br>Owner<br><br>Aggregate Year-to-Date > \$2,000.00 | Date (month, day, year)<br>9/11/2000 | Amount of Each Receipt this Period<br>\$1,000.00 |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br>Ruane, Vincent, Mr.<br>4 Swallow Lane<br>Saint Paul MN 55127<br><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):             | Name of Employer<br>3M<br><br>Occupation<br>Exec VP<br><br>Aggregate Year-to-Date > \$750.00         | Date (month, day, year)<br>9/19/2000 | Amount of Each Receipt this Period<br>\$500.00   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br>Rupprecht, Jaffery, Mr.<br>646 Saratoga Street S.<br>Saint Paul MN 55116<br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date > \$270.00                          | Date (month, day, year)<br>8/29/2000 | Amount of Each Receipt this Period<br>\$250.00   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br>Sall, A.G.<br>75 E. Pleasant Lake Rd<br>Saint Paul MN 55127<br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):              | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date > \$1,000.00                        | Date (month, day, year)<br>9/5/2000  | Amount of Each Receipt this Period<br>\$1,000.00 |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br>Scherer, Roger<br>12001 Bass Lake Rd<br>Minneapolis MN 55442<br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):             | Name of Employer<br>Scherer Lumber<br><br>Occupation<br>CEO<br><br>Aggregate Year-to-Date > \$500.00 | Date (month, day, year)<br>9/2/2000  | Amount of Each Receipt this Period<br>\$500.00   |

SUBTOTAL of Receipts This Page (optional)

\$4,260.00

TOTAL This Period (last page this line number only)

# SCHEDULE A

# ITEMIZED RECEIPTS

Use separate  
schedule(s) for each  
category of the

PAGE 18 OF 21

FOR LINE NUMBER

11(a)(i)

## Contributions from Individuals

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)

Runbeck for Congress

c00325670

|                                                                                                                                                                                                                                                                                                                       |                                                                                                                                |                                               |                                                           |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|-----------------------------------------------------------|
| <p>A. Full Name, Mailing Address and ZIP Code<br/> <b>Schilling, Hugh</b><br/> <b>364 Woodlawn Ave.</b><br/> <b>Saint Paul MN 55105</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br/> <input type="checkbox"/> Other (Specify):</p>                           | <p>Name of Employer<br/> Horton Manufacturing</p> <p>Occupation<br/> Owner</p> <p>Aggregate Year-to-Date &gt; \$1,500.00</p>   | <p>Date (month, day, year)<br/> 8/24/2000</p> | <p>Amount of Each Receipt this Period<br/> \$500.00</p>   |
| <p>B. Full Name, Mailing Address and ZIP Code<br/> <b>Schmitz, Mary</b><br/> <b>285 Summit Ave.</b><br/> <b>Saint Paul MN 55102</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br/> <input type="checkbox"/> Other (Specify):</p>                               | <p>Name of Employer<br/> Jean Thorne</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$250.00</p>                         | <p>Date (month, day, year)<br/> 9/22/2000</p> | <p>Amount of Each Receipt this Period<br/> \$250.00</p>   |
| <p>C. Full Name, Mailing Address and ZIP Code<br/> <b>Schneeman, Christopher, Mr.</b><br/> <b>1581 Park Circle</b><br/> <b>Saint Paul MN 55118</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br/> <input type="checkbox"/> Other (Specify):</p>                | <p>Name of Employer<br/> Maguire Agency</p> <p>Occupation<br/> Insurance Agent</p> <p>Aggregate Year-to-Date &gt; \$500.00</p> | <p>Date (month, day, year)<br/> 9/12/2000</p> | <p>Amount of Each Receipt this Period<br/> \$250.00</p>   |
| <p>D. Full Name, Mailing Address and ZIP Code<br/> <b>Seaton, Douglas, Mr.</b><br/> <b>7301 - Ohms Lane No.320</b><br/> <b>Minneapolis MN 55438</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (Specify):</p>               | <p>Name of Employer<br/> Burke Seaton</p> <p>Occupation<br/> Attorney</p> <p>Aggregate Year-to-Date &gt; \$500.00</p>          | <p>Date (month, day, year)<br/> 9/1/2000</p>  | <p>Amount of Each Receipt this Period<br/> \$250.00</p>   |
| <p>E. Full Name, Mailing Address and ZIP Code<br/> <b>Segler, Eric</b><br/> <b>5800 Buffalo Lane</b><br/> <b>Saint Paul MN 55126</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br/> <input type="checkbox"/> Other (Specify):</p>                              | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$1,000.00</p>                                        | <p>Date (month, day, year)<br/> 9/29/2000</p> | <p>Amount of Each Receipt this Period<br/> \$1,000.00</p> |
| <p>F. Full Name, Mailing Address and ZIP Code<br/> <b>Shea Hellervik, Mary Catherine</b><br/> <b>59 W - 4th Street Suite 2600</b><br/> <b>Saint Paul MN 55102</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br/> <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer<br/> Self</p> <p>Occupation<br/> homemaker</p> <p>Aggregate Year-to-Date &gt; \$1,000.00</p>               | <p>Date (month, day, year)<br/> 9/23/2000</p> | <p>Amount of Each Receipt this Period<br/> \$900.00</p>   |
| <p>G. Full Name, Mailing Address and ZIP Code<br/> <b>Smith, Charles</b><br/> <b>1605 Fulham</b><br/> <b>Saint Paul MN 55108</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br/> <input type="checkbox"/> Other (Specify):</p>                                  | <p>Name of Employer<br/> Requested</p> <p>Occupation<br/> Requested</p> <p>Aggregate Year-to-Date &gt; \$350.00</p>            | <p>Date (month, day, year)<br/> 9/29/2000</p> | <p>Amount of Each Receipt this Period<br/> \$50.00</p>    |

SUBTOTAL of Receipts This Page (optional)

\$3,200.00

TOTAL This Period (last page this line number only)

# SCHEDULE A

# ITEMIZED RECEIPTS

Use separate  
schedules for each  
category of the

PAGE 19 OF 21  
FOR LINE NUMBER  
11(a)(i)

## Contributions from Individuals

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)

Runbeck for Congress

c00325670

|                                                                                                                                                                                                                                                                                       |                                                                                                                  |                                         |                                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|-----------------------------------------|-----------------------------------------------------|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Smith, Charles</b><br><b>1605 Fulham</b><br><b>Saint Paul MN 55108</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):              | Name of Employer<br>Requested<br>Occupation<br>Requested<br>Aggregate Year-to-Date > \$350.00                    | Date (month,<br>day, year)<br>9/15/2000 | Amount of Each<br>Receipt this Period<br>\$50.00    |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Spell, William</b><br><b>4706 White Oaks Road</b><br><b>Minneapolis MN 55424</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):    | Name of Employer<br>Occupation<br>Aggregate Year-to-Date > \$500.00                                              | Date (month,<br>day, year)<br>9/5/2000  | Amount of Each<br>Receipt this Period<br>\$500.00   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Sullivan, Brian</b><br><b>3126 Fox St.</b><br><b>Long Lake MN 55356</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):             | Name of Employer<br>Requested<br>Occupation<br>Requested<br>Aggregate Year-to-Date > \$2,000.00                  | Date (month,<br>day, year)<br>9/30/2000 | Amount of Each<br>Receipt this Period<br>\$1,000.00 |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Thomas, Richard</b><br><b>15970 West Ave. SE</b><br><b>Prior Lake MN 55372</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):      | Name of Employer<br>Ames Construction<br>Occupation<br>Government Relations<br>Aggregate Year-to-Date > \$250.00 | Date (month,<br>day, year)<br>9/13/2000 | Amount of Each<br>Receipt this Period<br>\$250.00   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Thompson, Robert</b><br><b>656 Summit Ave.</b><br><b>Saint Paul MN 55105</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):        | Name of Employer<br>Occupation<br>Aggregate Year-to-Date > \$500.00                                              | Date (month,<br>day, year)<br>9/11/2000 | Amount of Each<br>Receipt this Period<br>\$500.00   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Twogood, Mary, Mrs.</b><br><b>77 Apple Orchard Rd</b><br><b>Saint Paul MN 55110</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | Name of Employer<br>Occupation<br>Aggregate Year-to-Date > \$350.00                                              | Date (month,<br>day, year)<br>9/8/2000  | Amount of Each<br>Receipt this Period<br>\$250.00   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Ulmer, Dennis</b><br><b>4180 Bridgewater Ct.</b><br><b>Saint Paul MN 55127</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):      | Name of Employer<br>Occupation<br>Aggregate Year-to-Date > \$500.00                                              | Date (month,<br>day, year)<br>9/8/2000  | Amount of Each<br>Receipt this Period<br>\$500.00   |

SUBTOTAL of Receipts This Page (optional)

\$3,050.00

TOTAL This Period (last page this line number only)

# SCHEDULE A

# ITEMIZED RECEIPTS

Use separate  
schedule(s) for each  
category of this

PAGE 20 OF 21

FOR LINE NUMBER

11(a)(3)

## Contributions from Individuals

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)

Runbeck for Congress

c00326670

|                                                                                                                                                                                                                                                                                                               |                                                                                                                           |                                             |                                                         |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|---------------------------------------------------------|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Wagner, John</b><br><b>118 Amherst St.</b><br><b>Saint Paul MN 55105</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                                    | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$350.00                          | <b>Date (month, day, year)</b><br>8/24/2000 | <b>Amount of Each Receipt this Period</b><br>\$250.00   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Wagner, John</b><br><b>118 Amherst St.</b><br><b>Saint Paul MN 55105</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                                    | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$350.00                          | <b>Date (month, day, year)</b><br>9/20/2000 | <b>Amount of Each Receipt this Period</b><br>\$100.00   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Wenmark, Monica</b><br><b>18870 Rutledge Road</b><br><b>Wayzata MN 55391</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                                | <b>Name of Employer</b><br>Self<br><b>Occupation</b><br>Homemaker<br><b>Aggregate Year-to-Date</b> > \$500.00             | <b>Date (month, day, year)</b><br>9/29/2000 | <b>Amount of Each Receipt this Period</b><br>\$500.00   |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Wenmark, William, Mr.</b><br><b>18870 Rutledge Rd</b><br><b>Wayzata MN 55391</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                            | <b>Name of Employer</b><br>Health Care<br><b>Occupation</b><br>CEO<br><b>Aggregate Year-to-Date</b> > \$750.00            | <b>Date (month, day, year)</b><br>9/29/2000 | <b>Amount of Each Receipt this Period</b><br>\$500.00   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Weyerhaeuser, Nancy</b><br><b>610 Wentworth Ave. W.</b><br><b>Saint Paul MN 55118</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                       | <b>Name of Employer</b><br>Self<br><b>Occupation</b><br>Homemaker<br><b>Aggregate Year-to-Date</b> > \$2,000.00           | <b>Date (month, day, year)</b><br>9/5/2000  | <b>Amount of Each Receipt this Period</b><br>\$1,000.00 |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Weyerhaeuser, Nancy</b><br><b>610 Wentworth Ave. W.</b><br><b>Saint Paul MN 55118</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                       | <b>Name of Employer</b><br>Self<br><b>Occupation</b><br>Homemaker<br><b>Aggregate Year-to-Date</b> > \$2,000.00           | <b>Date (month, day, year)</b><br>9/5/2000  | <b>Amount of Each Receipt this Period</b><br>\$1,000.00 |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Whitney, Benson K., Mr.</b><br><b>1900 Foshay Tower 821 Marquette Avenue</b><br><b>Minneapolis MN 55402</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | <b>Name of Employer</b><br>Whitney Management<br><b>Occupation</b><br>Exec.<br><b>Aggregate Year-to-Date</b> > \$1,000.00 | <b>Date (month, day, year)</b><br>9/1/2000  | <b>Amount of Each Receipt this Period</b><br>\$500.00   |

SUBTOTAL of Receipts This Page (optional)

\$3,850.00

TOTAL This Period (last page this line number only)

# SCHEDULE A

## ITEMIZED RECEIPTS

Use separate  
schedule(s) for each  
category of the

PAGE 21 OF 21

FOR LINE NUMBER

t1(a)(i)

### Contributions from Individuals

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)

Runbeck for Congress

c00325670

|                                                                                                                                                                                                                                                                                                            |                                                                                                        |                                      |                                                |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|--------------------------------------|------------------------------------------------|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Whitney, Helen</b><br><b>1900 Foshay Tower 821 Marquette Av</b><br><b>Minneapolis MN 55402</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):           | Name of Employer<br>Self<br>Occupation<br>Homemaker<br>Aggregate Year-to-Date > \$300.00               | Date (month, day, year)<br>8/24/2000 | Amount of Each Receipt this Period<br>\$300.00 |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Whitney, J Kimball</b><br><b>559 Harrington Rd</b><br><b>Wayzata MN 55391</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                            | Name of Employer<br>Whitney Management<br>Occupation<br>Exec.<br>Aggregate Year-to-Date > \$300.00     | Date (month, day, year)<br>8/24/2000 | Amount of Each Receipt this Period<br>\$300.00 |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Whitney, Wheelock, Mr.</b><br><b>1900 Foshay Tower 821 Marquette Ave.</b><br><b>Minneapolis MN 55402</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | Name of Employer<br>Whitney Management<br>Occupation<br>Retired<br>Aggregate Year-to-Date > \$1,000.00 | Date (month, day, year)<br>5/14/2000 | Amount of Each Receipt this Period<br>\$500.00 |
| <b>Full Name, Mailing Address and ZIP Code</b><br><br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                                                                                                                          | Name of Employer<br><br>Occupation<br>Aggregate Year-to-Date >                                         | Date (month, day, year)              | Amount of Each Receipt this Period             |
| <b>Full Name, Mailing Address and ZIP Code</b><br><br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                                                                                                                          | Name of Employer<br><br>Occupation<br>Aggregate Year-to-Date >                                         | Date (month, day, year)              | Amount of Each Receipt this Period             |
| <b>Full Name, Mailing Address and ZIP Code</b><br><br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                                                                                                                          | Name of Employer<br><br>Occupation<br>Aggregate Year-to-Date >                                         | Date (month, day, year)              | Amount of Each Receipt this Period             |
| <b>Full Name, Mailing Address and ZIP Code</b><br><br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                                                                                                                          | Name of Employer<br><br>Occupation<br>Aggregate Year-to-Date >                                         | Date (month, day, year)              | Amount of Each Receipt this Period             |

SUBTOTAL of Receipts This Page (optional)

\$1,100.00

TOTAL This Period (last page this line number only)

\$65,649.00

# SCHEDULE A

# ITEMIZED RECEIPTS

Use separate  
schedules for each  
category of the

PAGE 1 OF 1

FOR LINE NUMBER  
11(b)

## Contributions from Party Committees

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)

Runbeck for Congress

c00326670

|                                                                                                                                                                                                                                                                                           |                                                                                       |                                                 |                                                           |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|-------------------------------------------------|-----------------------------------------------------------|
| <p>A. Full Name, Mailing Address and ZIP Code</p> <p>PAC, House Dist 55B</p> <p>1260 Hazelwood Street Apt 6</p> <p>Saint Paul MN 55106</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$600.00</p> | <p>Date (month, day, year)</p> <p>8/24/2000</p> | <p>Amount of Each Receipt this Period</p> <p>\$500.00</p> |
| <p>Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (Specify):</p>                                                                                                        | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt;</p>          | <p>Date (month, day, year)</p>                  | <p>Amount of Each Receipt this Period</p>                 |
| <p>Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (Specify):</p>                                                                                                        | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt;</p>          | <p>Date (month, day, year)</p>                  | <p>Amount of Each Receipt this Period</p>                 |
| <p>Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (Specify):</p>                                                                                                        | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt;</p>          | <p>Date (month, day, year)</p>                  | <p>Amount of Each Receipt this Period</p>                 |
| <p>Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (Specify):</p>                                                                                                        | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt;</p>          | <p>Date (month, day, year)</p>                  | <p>Amount of Each Receipt this Period</p>                 |
| <p>Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (Specify):</p>                                                                                                        | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt;</p>          | <p>Date (month, day, year)</p>                  | <p>Amount of Each Receipt this Period</p>                 |
| <p>Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (Specify):</p>                                                                                                        | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt;</p>          | <p>Date (month, day, year)</p>                  | <p>Amount of Each Receipt this Period</p>                 |

SUBTOTAL of Receipts This Page (optional)

\$500.00

TOTAL This Period (last page this line number only)

\$500.00



# SCHEDULE A

## ITEMIZED RECEIPTS

### Contributions from Other Political Committees

Use separate  
schedules for each  
category of the

PAGE 1 OF 9

FOR LINE NUMBER

11(c)

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)

Runbeck for Congress

c00325670

|                                                                                                                                                                                                                                                                                                   |                                                                               |                                      |                                                  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|--------------------------------------|--------------------------------------------------|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>PAC, 34A House Dist.</b><br><b>837 Linwood</b><br><b>Saint Paul MN 55105</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                    | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date > \$250.00   | Date (month, day, year)<br>9/19/2000 | Amount of Each Receipt this Period<br>\$250.00   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>PAC, 3rd Cong. Dist.</b><br><b>Street Required</b><br><b>City ST 00000</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                      | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date > \$250.00   | Date (month, day, year)<br>9/14/2000 | Amount of Each Receipt this Period<br>\$250.00   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>PAC, 96</b><br><b>PO Box 15080</b><br><b>Washington DC 20003</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                                | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date > \$1,000.00 | Date (month, day, year)<br>9/18/2000 | Amount of Each Receipt this Period<br>\$1,000.00 |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>PAC, ACLI</b><br><b>Washington DC 20006</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                                                     | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date > \$1,000.00 | Date (month, day, year)<br>9/27/2000 | Amount of Each Receipt this Period<br>\$1,000.00 |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>PAC, ALL</b><br><b>PO Box 1884</b><br><b>Fort Smith AR 72902</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                                | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date > \$1,000.00 | Date (month, day, year)<br>9/28/2000 | Amount of Each Receipt this Period<br>\$1,000.00 |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>PAC, American Trucki</b><br><b>430 First St. S.E.</b><br><b>Washington DC 20003</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):             | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date > \$1,000.00 | Date (month, day, year)<br>9/7/2000  | Amount of Each Receipt this Period<br>\$1,000.00 |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>PAC, AmericanSuccess</b><br><b>1155 21st Street, N.W. Ste.300</b><br><b>Washington DC 20036</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date > \$5,000.00 | Date (month, day, year)<br>9/27/2000 | Amount of Each Receipt this Period<br>\$5,000.00 |

SUBTOTAL of Receipts This Page (optional)

\$9,500.00

TOTAL This Period (last page this line number only)

# SCHEDULE A

## ITEMIZED RECEIPTS

Use separate  
schedules for each  
category of the

PAGE 2 OF 9

FOR LINE NUMBER

11(c)

### Contributions from Other Political Committees

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)

Runbeck for Congress

c00325670

|                                                                                                                                                                                                                                                                                                      |                                                                                |                                      |                                                  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------|--------------------------------------|--------------------------------------------------|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>PAC, Archer Daniels</b><br><b>P.O. Box 1470</b><br><b>Decatur IL 62525</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                         | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date > \$2,000.00  | Date (month, day, year)<br>9/5/2000  | Amount of Each Receipt this Period<br>\$2,000.00 |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>PAC, ASA</b><br><b>520 N. Northwest Highway</b><br><b>Park Ridge IL 60068</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                      | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date > \$2,000.00  | Date (month, day, year)<br>9/28/2000 | Amount of Each Receipt this Period<br>\$2,000.00 |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>PAC, Assoc General C</b><br><b>333 John Carlyle Street Suite 200</b><br><b>Alexandria VA 22314</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date > \$6,000.00  | Date (month, day, year)<br>9/10/2000 | Amount of Each Receipt this Period<br>\$1,000.00 |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>PAC, Assoc General C</b><br><b>333 John Carlyle Street Suite 200</b><br><b>Alexandria VA 22314</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date > \$6,000.00  | Date (month, day, year)<br>9/29/2000 | Amount of Each Receipt this Period<br>\$5,000.00 |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>PAC, Assoc. Builders</b><br><b>1300 North 17th Street</b><br><b>Arlington VA 22209</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):             | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date > \$10,000.00 | Date (month, day, year)<br>9/12/2000 | Amount of Each Receipt this Period<br>\$5,000.00 |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>PAC, Bayou Leader</b><br><b>524 Ft. Williams Parkway</b><br><b>Alexandria VA 22304</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):             | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date > \$1,000.00  | Date (month, day, year)<br>9/21/2000 | Amount of Each Receipt this Period<br>\$1,000.00 |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>PAC, BIPAC</b><br><b>888 Sixteenth Street N.W.</b><br><b>Washington DC 20006</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                   | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date > \$2,155.39  | Date (month, day, year)<br>9/25/2000 | Amount of Each Receipt this Period<br>\$2,000.00 |

SUBTOTAL of Receipts This Page (optional)

\$18,000.00

TOTAL This Period (last page this line number only)

# SCHEDULE A

# ITEMIZED RECEIPTS

Use separate  
schedule(s) for each  
category of the

PAGE 3 OF 9

FOR LINE NUMBER

11(c)

## Contributions from Other Political Committees

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)

Runbeck for Congress

c00325670

|                                                                                                                                                                                                                                                                                                         |                                                                               |                                      |                                                           |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|--------------------------------------|-----------------------------------------------------------|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>PAC, BIPAC</b><br><b>888 Sixteenth Street N.W.</b><br><b>Washington DC 20006</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                      | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date > \$2,155.39 | Date (month, day, year)<br>9/30/2000 | Amount of Each Receipt this Period<br>\$155.39<br>In-Kind |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>PAC, Blue Cross Blue</b><br><b>1310 G Street NW</b><br><b>Washington DC 20005</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                     | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date > \$1,000.00 | Date (month, day, year)<br>9/29/2000 | Amount of Each Receipt this Period<br>\$500.00            |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>PAC, BNSF Rail</b><br><b>P.O. Box 961039</b><br><b>Fort Worth TX 76161</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                            | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date > \$250.00   | Date (month, day, year)<br>9/15/2000 | Amount of Each Receipt this Period<br>\$250.00            |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>PAC, BrownWilliamson</b><br><b>1701 Pennsylvania Ave. NW, Suite 960</b><br><b>Washington DC 20006</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date > \$2,500.00 | Date (month, day, year)<br>9/13/2000 | Amount of Each Receipt this Period<br>\$2,500.00          |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>PAC, Build</b><br><b>1201 15th Street N.W.</b><br><b>Washington DC 20005</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                          | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date > \$5,000.00 | Date (month, day, year)<br>9/26/2000 | Amount of Each Receipt this Period<br>\$5,000.00          |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>PAC, CAM</b><br><b>5915 Eastman Ave. Suite 100</b><br><b>Midland MI 48640</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                         | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date > \$1,000.00 | Date (month, day, year)<br>9/18/2000 | Amount of Each Receipt this Period<br>\$1,000.00          |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>PAC, Cargill Inc.</b><br><b>P.O. Box 9300</b><br><b>Minneapolis MN 55440</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                          | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date > \$5,000.00 | Date (month, day, year)<br>9/11/2000 | Amount of Each Receipt this Period<br>\$3,000.00          |

SUBTOTAL of Receipts This Page (optional)

\$12,405.39

TOTAL This Period (last page this line number only)

# SCHEDULE A

# ITEMIZED RECEIPTS

Use separate  
schedules for each  
category of the

PAGE 4 OF 9

FOR LINE NUMBER

11(c)

## Contributions from Other Political Committees

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)

Runbeck for Congress

c00325670

|                                                                                                                                        |                                     |                                      |                                                  |
|----------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------------------|--------------------------------------------------|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br>PAC, SIGNA<br>1650 Market Street<br>Philadelphia PA 19182                         | Name of Employer<br><br>Occupation  | Date (month, day, year)<br>9/19/2000 | Amount of Each Receipt this Period<br>\$500.00   |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | Aggregate Year-to-Date > \$500.00   |                                      |                                                  |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br>PAC, CME<br>30 S. Wacker Drive<br>Chicago IL 60606                                | Name of Employer<br><br>Occupation  | Date (month, day, year)<br>9/21/2000 | Amount of Each Receipt this Period<br>\$500.00   |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | Aggregate Year-to-Date > \$500.00   |                                      |                                                  |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br>PAC, Compac<br>19000 St. Edwards Court<br>Eden Prairie MN 55346                   | Name of Employer<br><br>Occupation  | Date (month, day, year)<br>8/31/2000 | Amount of Each Receipt this Period<br>\$250.00   |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | Aggregate Year-to-Date > \$250.00   |                                      |                                                  |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br>PAC, CPC<br>PO Box 22614<br>Alexandria VA 22304                                   | Name of Employer<br><br>Occupation  | Date (month, day, year)<br>9/29/2000 | Amount of Each Receipt this Period<br>\$5,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | Aggregate Year-to-Date > \$5,000.00 |                                      |                                                  |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br>PAC, Freedom Project<br>P.O. Box 507<br>West Chester OH 45069                     | Name of Employer<br><br>Occupation  | Date (month, day, year)<br>9/12/2000 | Amount of Each Receipt this Period<br>\$5,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | Aggregate Year-to-Date > \$5,000.00 |                                      |                                                  |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br>PAC, Future Leaders<br>1156 21st NW Ste. 300<br>Washington DC 20038               | Name of Employer<br><br>Occupation  | Date (month, day, year)<br>9/29/2000 | Amount of Each Receipt this Period<br>\$2,500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | Aggregate Year-to-Date > \$2,500.00 |                                      |                                                  |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br>PAC, Guidant Corp.<br>Street Required<br>Indianapolis IN 46204                    | Name of Employer<br><br>Occupation  | Date (month, day, year)<br>9/14/2000 | Amount of Each Receipt this Period<br>\$3,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | Aggregate Year-to-Date > \$3,000.00 |                                      |                                                  |

SUBTOTAL of Receipts This Page (optional)

\$16,750.00

TOTAL This Period (last page this line number only)

# SCHEDULE A ITEMIZED RECEIPTS

## Contributions from Other Political Committees

Use separate  
schedules for each  
category of the

PAGE 5 OF 9  
FOR LINE NUMBER  
11(c)

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)                                                                                                                                 |                                                                                                     | c00325670                                   |                                                                  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|---------------------------------------------|------------------------------------------------------------------|
| <b>Runbeck for Congress</b>                                                                                                                                 |                                                                                                     |                                             |                                                                  |
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Pac, Hunter For Cong</b><br><b>9340 Fuerte Drive Suite 302</b><br><b>La Mesa CA 91541</b>           | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$397.96    | <b>Date (month, day, year)</b><br>9/20/2000 | <b>Amount of Each Receipt this Period</b><br>\$397.96<br>In-Kind |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                      |                                                                                                     |                                             |                                                                  |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>PAC, John Doolittle</b><br><b>400 Capitol Mall Suite 1560</b><br><b>Sacramento CA 95814</b>         | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$1,000.00  | <b>Date (month, day, year)</b><br>9/14/2000 | <b>Amount of Each Receipt this Period</b><br>\$1,000.00          |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                      |                                                                                                     |                                             |                                                                  |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>PAC, Keep Our Maj.</b><br><b>P.O. Box 854</b><br><b>Washington DC 20044</b>                         | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$5,000.00  | <b>Date (month, day, year)</b><br>9/12/2000 | <b>Amount of Each Receipt this Period</b><br>\$5,000.00          |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                      |                                                                                                     |                                             |                                                                  |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Pac, Land O Lakes</b><br><b>PO Box 84101</b><br><b>Saint Paul MN 55154</b>                          | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$1,000.00  | <b>Date (month, day, year)</b><br>9/28/2000 | <b>Amount of Each Receipt this Period</b><br>\$1,000.00          |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                      |                                                                                                     |                                             |                                                                  |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>PAC, Lewis For Cong</b><br><b>P.O. Box 247</b><br><b>Redlands CA 92373</b>                          | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$1,000.00  | <b>Date (month, day, year)</b><br>9/29/2000 | <b>Amount of Each Receipt this Period</b><br>\$1,000.00          |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                      |                                                                                                     |                                             |                                                                  |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>PAC, Majority Leader</b><br><b>209 Pennsylvania Ave. SE Suite 200</b><br><b>Washington DC 20003</b> | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$10,000.00 | <b>Date (month, day, year)</b><br>9/29/2000 | <b>Amount of Each Receipt this Period</b><br>\$5,000.00          |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                      |                                                                                                     |                                             |                                                                  |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>PAC, Majority Leader</b><br><b>209 Pennsylvania Ave. SE Suite 200</b><br><b>Washington DC 20003</b> | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$10,000.00 | <b>Date (month, day, year)</b><br>9/12/2000 | <b>Amount of Each Receipt this Period</b><br>\$1,437.44          |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                      |                                                                                                     |                                             |                                                                  |

SUBTOTAL of Receipts This Page (optional)

\$14,835.40

TOTAL This Period (last page this line number only)

# SCHEDULE A

# ITEMIZED RECEIPTS

Use separate  
schedules for each  
category of the

PAGE 8 OF 9

FOR LINE NUMBER

11(c)

## Contributions from Other Political Committees

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)

Runbeck for Congress

c00325670

|                                                                                                                                                             |                                                  |                                                    |                                                                                  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------|----------------------------------------------------|----------------------------------------------------------------------------------|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>PAC, Majority Leader</b><br><b>209 Pennsylvania Ave. SE Suite 200</b><br><b>Washington DC 20003</b> | <b>Name of Employer</b><br><br><b>Occupation</b> | <b>Date (month, day, year)</b><br><b>8/30/2000</b> | <b>Amount of Each Receipt this Period</b><br><b>\$1,062.56</b><br><b>In-Kind</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):               | <b>Aggregate Year-to-Date</b> > \$10,000.00      |                                                    |                                                                                  |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>PAC, MINE</b><br><b>1130 17th St. NW</b><br><b>Washington DC 20035</b>                              | <b>Name of Employer</b><br><br><b>Occupation</b> | <b>Date (month, day, year)</b><br><b>9/26/2000</b> | <b>Amount of Each Receipt this Period</b><br><b>\$1,000.00</b>                   |
| <b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):               | <b>Aggregate Year-to-Date</b> > \$1,000.00       |                                                    |                                                                                  |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>PAC, NBWA</b><br><b>1100 S. Washington Street</b><br><b>Alexandria VA 22314</b>                     | <b>Name of Employer</b><br><br><b>Occupation</b> | <b>Date (month, day, year)</b><br><b>9/28/2000</b> | <b>Amount of Each Receipt this Period</b><br><b>\$5,000.00</b>                   |
| <b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):               | <b>Aggregate Year-to-Date</b> > \$5,000.00       |                                                    |                                                                                  |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>PAC, NELPAC</b><br><b>601 Boylston St.</b><br><b>Boston MA 02116</b>                                | <b>Name of Employer</b><br><br><b>Occupation</b> | <b>Date (month, day, year)</b><br><b>9/14/2000</b> | <b>Amount of Each Receipt this Period</b><br><b>\$500.00</b>                     |
| <b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):               | <b>Aggregate Year-to-Date</b> > \$500.00         |                                                    |                                                                                  |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>PAC, NRCC</b><br><b>310 First Street S.E.</b><br><b>Washington DC 20003</b>                         | <b>Name of Employer</b><br><br><b>Occupation</b> | <b>Date (month, day, year)</b><br><b>9/12/2000</b> | <b>Amount of Each Receipt this Period</b><br><b>\$5,000.00</b>                   |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):               | <b>Aggregate Year-to-Date</b> > \$5,000.00       |                                                    |                                                                                  |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>PAC, NSP</b><br><b>414 Nicollet Mall</b><br><b>Minneapolis MN 55401</b>                             | <b>Name of Employer</b><br><br><b>Occupation</b> | <b>Date (month, day, year)</b><br><b>9/27/2000</b> | <b>Amount of Each Receipt this Period</b><br><b>\$1,000.00</b>                   |
| <b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):               | <b>Aggregate Year-to-Date</b> > \$1,000.00       |                                                    |                                                                                  |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>PAC, Philip Morris</b><br><b>1341 G Street NW Suite 800</b><br><b>Washington DC 20005</b>           | <b>Name of Employer</b><br><br><b>Occupation</b> | <b>Date (month, day, year)</b><br><b>9/21/2000</b> | <b>Amount of Each Receipt this Period</b><br><b>\$5,000.00</b>                   |
| <b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):               | <b>Aggregate Year-to-Date</b> > \$7,500.00       |                                                    |                                                                                  |

SUBTOTAL of Receipts This Page (optional)

\$18,562.56

TOTAL This Period (last page this line number only)

# SCHEDULE A

# ITEMIZED RECEIPTS

Use separate  
schedules for each  
category of the

PAGE 7 OF 9

FOR LINE NUMBER

11(c)

## Contributions from Other Political Committees

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)

Runbeck for Congress

c00325670

|                                                                                                                                                                                                                                                                                                   |                                                                                                    |                                             |                                                                    |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|---------------------------------------------|--------------------------------------------------------------------|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Pac, Pillsbury Co.</b><br><b>Pillsbury Center 39K5</b><br><b>Minneapolis MN 55402</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):           | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$1,000.00 | <b>Date (month, day, year)</b><br>9/14/2000 | <b>Amount of Each Receipt this Period</b><br>\$1,000.00            |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Pac, Pioneer</b><br><b>499 South Capitol St. S.W. Suite 2000A</b><br><b>Washington DC 20003</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$2,940.00 | <b>Date (month, day, year)</b><br>9/7/2000  | <b>Amount of Each Receipt this Period</b><br>\$2,500.00<br>In-Kind |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Pac, Pioneer</b><br><b>499 South Capitol St. S.W. Suite 2000A</b><br><b>Washington DC 20003</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$2,940.00 | <b>Date (month, day, year)</b><br>9/25/2000 | <b>Amount of Each Receipt this Period</b><br>\$440.00<br>In-Kind   |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>PAC, Pricewaterhouse</b><br><b>1900 K Street N.W.</b><br><b>Washington DC 20006</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):             | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$1,000.00 | <b>Date (month, day, year)</b><br>9/19/2000 | <b>Amount of Each Receipt this Period</b><br>\$1,000.00            |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>PAC, R Duffy Wall</b><br><b>601 13th St. NW STE. 410</b><br><b>Washington DC 20005</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):          | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$500.00   | <b>Date (month, day, year)</b><br>9/15/2000 | <b>Amount of Each Receipt this Period</b><br>\$500.00              |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>PAC, Rep National Cm</b><br><b>310 First Street SE</b><br><b>Washington DC 20003</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):            | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$5,000.00 | <b>Date (month, day, year)</b><br>9/10/2000 | <b>Amount of Each Receipt this Period</b><br>\$5,000.00            |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>PAC, SBA List</b><br><b>1800 Diagonal Road No. 285</b><br><b>Alexandria VA 22314</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):            | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$2,500.00 | <b>Date (month, day, year)</b><br>9/27/2000 | <b>Amount of Each Receipt this Period</b><br>\$2,500.00            |

SUBTOTAL of Receipts This Page (optional)

\$12,940.00

TOTAL This Period (last page this line number only)

# SCHEDULE A

# ITEMIZED RECEIPTS

## Contributions from Other Political Committees

Use separate  
schedules for each  
category of the

PAGE 8 OF 8

FOR LINE NUMBER

11(c)

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)

Runbeck for Congress

c00325670

|                                                                                                                                                                                                                                                                                                       |                                                                               |                                      |                                                  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|--------------------------------------|--------------------------------------------------|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>PAC, Schering-Plough</b><br><b>1130 Connecticut Ave. NW Suite 500</b><br><b>Washington DC 20036</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date > \$500.00   | Date (month, day, year)<br>9/1/2000  | Amount of Each Receipt this Period<br>\$500.00   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>PAC, Senate Dist 42</b><br><b>P.O. Box 24715</b><br><b>Minneapolis MN 55424</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                     | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date > \$100.00   | Date (month, day, year)<br>9/12/2000 | Amount of Each Receipt this Period<br>\$100.00   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Pac, T.E.A.M.</b><br><b>P.O. Box 14163</b><br><b>Scottsdale AZ 85267</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                            | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date > \$1,000.00 | Date (month, day, year)<br>9/24/2000 | Amount of Each Receipt this Period<br>\$1,000.00 |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>PAC, TCF</b><br><b>801 Marquette Ave</b><br><b>Minneapolis MN 55402</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                             | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date > \$1,000.00 | Date (month, day, year)<br>9/7/2000  | Amount of Each Receipt this Period<br>\$1,000.00 |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>PAC, Twin Cities Rep</b><br><b>1749 118th Ave NE</b><br><b>Minneapolis MN 55449</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                 | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date > \$400.00   | Date (month, day, year)<br>9/22/2000 | Amount of Each Receipt this Period<br>\$400.00   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>PAC, United Health</b><br><b>1225 New York Ave. NW. 475</b><br><b>Washington DC 20005</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):           | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date > \$1,000.00 | Date (month, day, year)<br>9/5/2000  | Amount of Each Receipt this Period<br>\$1,000.00 |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>PAC, USTeam</b><br><b>100 West Putnam Ave.</b><br><b>Greenwich CT 06830</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                         | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date > \$2,000.00 | Date (month, day, year)<br>9/20/2000 | Amount of Each Receipt this Period<br>\$2,000.00 |

SUBTOTAL of Receipts This Page (optional)

\$6,000.00

TOTAL This Period (last page this line number only)



# SCHEDULE A

# ITEMIZED RECEIPTS

## Contributions from Other Political Committees

Use separate  
schedules for each  
category of the

PAGE 9 OF 9

FOR LINE NUMBER

11(c)

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)

Runbeck for Congress

c00325670

|                                                                                                                                                                                                                                                                                            |                                                                                |                                      |                                                  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------|--------------------------------------|--------------------------------------------------|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>PAC, VIEW</b><br><b>1155 21st St. NW Ste. 300</b><br><b>Washington DC 20036</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):          | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date > \$10,000.00 | Date (month, day, year)<br>9/14/2000 | Amount of Each Receipt this Period<br>\$5,000.00 |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>PAC, VIEW</b><br><b>1155 21st St. NW Ste. 300</b><br><b>Washington DC 20036</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):          | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date > \$10,000.00 | Date (month, day, year)<br>9/11/2000 | Amount of Each Receipt this Period<br>\$5,000.00 |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>PAC, Weyerhaeuser</b><br><b>33663 Weyerhaeuser Way S.</b><br><b>Federal Way WA 98003</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date > \$500.00    | Date (month, day, year)<br>9/16/2000 | Amount of Each Receipt this Period<br>\$500.00   |
| <b>Full Name, Mailing Address and ZIP Code</b><br><br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                                                                                                          | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date >             | Date (month, day, year)              | Amount of Each Receipt this Period               |
| <b>Full Name, Mailing Address and ZIP Code</b><br><br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                                                                                                          | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date >             | Date (month, day, year)              | Amount of Each Receipt this Period               |
| <b>Full Name, Mailing Address and ZIP Code</b><br><br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                                                                                                          | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date >             | Date (month, day, year)              | Amount of Each Receipt this Period               |
| <b>Full Name, Mailing Address and ZIP Code</b><br><br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                                                                                                          | Name of Employer<br><br>Occupation<br><br>Aggregate Year-to-Date >             | Date (month, day, year)              | Amount of Each Receipt this Period               |

SUBTOTAL of Receipts This Page (optional)

\$10,500.00

TOTAL This Period (last page this line number only)

\$119,493.35

# SCHEDULE B

# ITEMIZED DISBURSEMENTS

Use separate  
schedules for each  
category of the

PAGE 1 OF 12

FOR LINE NUMBER

17

## Operating Expenditures

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)

Runbeck for Congress

c00325670

|                                                                                                                                              |                                                                                                                                                                                                                         |                                             |                                                              |
|----------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|--------------------------------------------------------------|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Aurich, Peter</b><br><b>14 Nelson Street</b><br><b>Saint Paul MN 55119</b>           | <b>Purpose of Disbursement</b><br><b>Campaign Workers' Salaries</b><br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):      | <b>Date (month, day, year)</b><br>9/6/2000  | <b>Amount of Each Disbursement this Period</b><br>\$558.36   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Aurich, Peter</b><br><b>14 Nelson Street</b><br><b>Saint Paul MN 55119</b>           | <b>Purpose of Disbursement</b><br><b>Campaign Workers' Salaries</b><br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):      | <b>Date (month, day, year)</b><br>9/19/2000 | <b>Amount of Each Disbursement this Period</b><br>\$558.36   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Aurich, Peter</b><br><b>14 Nelson Street</b><br><b>Saint Paul MN 55119</b>           | <b>Purpose of Disbursement</b><br><b>Office Expenses</b><br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                 | <b>Date (month, day, year)</b><br>9/13/2000 | <b>Amount of Each Disbursement this Period</b><br>\$259.63   |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Bosa Donuts</b><br><b>1462 University Ave. W.</b><br><b>Saint Paul MN 55104</b>      | <b>Purpose of Disbursement</b><br><b>Other (Enter Description) Other</b><br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | <b>Date (month, day, year)</b><br>9/9/2000  | <b>Amount of Each Disbursement this Period</b><br>\$15.48    |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Capitol Signs</b><br><b>1270 Eagan Industrial Road</b><br><b>Saint Paul MN 55121</b> | <b>Purpose of Disbursement</b><br><b>Campaign Literature Lawn Signs</b><br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):  | <b>Date (month, day, year)</b><br>8/24/2000 | <b>Amount of Each Disbursement this Period</b><br>\$4,260.00 |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Capitol Direct</b><br><b>1270 Industrial Blvd</b><br><b>Saint Paul MN 55121</b>      | <b>Purpose of Disbursement</b><br><b>Postage</b><br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                         | <b>Date (month, day, year)</b><br>8/31/2000 | <b>Amount of Each Disbursement this Period</b><br>\$6,880.41 |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Central Bank</b><br><b>PO Box 225</b><br><b>Stillwater MN 55082</b>                  | <b>Purpose of Disbursement</b><br><b>Bank Service Charge</b><br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):             | <b>Date (month, day, year)</b><br>9/19/2000 | <b>Amount of Each Disbursement this Period</b><br>\$15.00    |
| <b>H. Full Name, Mailing Address and ZIP Code</b><br><b>Central Bank</b><br><b>PO Box 225</b><br><b>Stillwater MN 55082</b>                  | <b>Purpose of Disbursement</b><br><b>Bank Service Charge</b><br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):             | <b>Date (month, day, year)</b><br>9/19/2000 | <b>Amount of Each Disbursement this Period</b><br>\$56.25    |
| <b>I. Full Name, Mailing Address and ZIP Code</b><br><b>Central Bank</b><br><b>PO Box 225</b><br><b>Stillwater MN 55082</b>                  | <b>Purpose of Disbursement</b><br><b>Bank Service Charge</b><br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):             | <b>Date (month, day, year)</b><br>9/26/2000 | <b>Amount of Each Disbursement this Period</b><br>\$21.00    |

SUBTOTAL of Disbursements This Page (optional)

\$12,624.49

TOTAL This Period (last page this line number only)

# SCHEDULE B

# ITEMIZED DISBURSEMENTS

## Operating Expenditures

Use separate  
schedules for each  
category of the

PAGE 2 OF 12

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)

Runbeck for Congress

c00326570

|                                                                                                              |                                                                                                                                                                                                           |                                         |                                                        |
|--------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|--------------------------------------------------------|
| A. Full Name, Mailing Address and ZIP Code<br>Central Bank<br>PO Box 226<br>Stillwater MN 55082              | Purpose of Disbursement<br>Bank Service Charge<br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):             | Date (month,<br>day, year)<br>9/27/2000 | Amount of Each<br>Disbursement this Period<br>\$21.00  |
| B. Full Name, Mailing Address and ZIP Code<br>Central Bank<br>PO Box 226<br>Stillwater MN 55082              | Purpose of Disbursement<br>Bank Service Charge<br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):             | Date (month,<br>day, year)<br>9/28/2000 | Amount of Each<br>Disbursement this Period<br>\$21.00  |
| C. Full Name, Mailing Address and ZIP Code<br>Central Bank<br>PO Box 226<br>Stillwater MN 55082              | Purpose of Disbursement<br>Bank Service Charge<br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):             | Date (month,<br>day, year)<br>9/29/2000 | Amount of Each<br>Disbursement this Period<br>\$21.00  |
| D. Full Name, Mailing Address and ZIP Code<br>Central Bank<br>PO Box 226<br>Stillwater MN 55082              | Purpose of Disbursement<br>Bank Service Charge<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):             | Date (month,<br>day, year)<br>8/25/2000 | Amount of Each<br>Disbursement this Period<br>\$15.00  |
| E. Full Name, Mailing Address and ZIP Code<br>Central Bank<br>PO Box 226<br>Stillwater MN 55082              | Purpose of Disbursement<br>Bank Service Charge<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):             | Date (month,<br>day, year)<br>9/1/2000  | Amount of Each<br>Disbursement this Period<br>\$15.00  |
| F. Full Name, Mailing Address and ZIP Code<br>Conlon, Tom<br>2183 Berkeley Ave.<br>Saint Paul MN 55106       | Purpose of Disbursement<br>Professional Services<br>Photos<br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | Date (month,<br>day, year)<br>9/14/2000 | Amount of Each<br>Disbursement this Period<br>\$75.00  |
| G. Full Name, Mailing Address and ZIP Code<br>Cub Foods<br>1440 University Ave. W.<br>Saint Paul MN 55104    | Purpose of Disbursement<br>Office Expenses<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                 | Date (month,<br>day, year)<br>9/1/2000  | Amount of Each<br>Disbursement this Period<br>\$21.01  |
| H. Full Name, Mailing Address and ZIP Code<br>DeGriselles, Denny<br>3685 E. 234th St.<br>Lakeville MN 56044  | Purpose of Disbursement<br>Other (Enter<br>Description)<br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):    | Date (month,<br>day, year)<br>9/25/2000 | Amount of Each<br>Disbursement this Period<br>\$318.00 |
| I. Full Name, Mailing Address and ZIP Code<br>Ellis, Steve<br>637 North Snelling Ave.<br>Saint Paul MN 55104 | Purpose of Disbursement<br>IN-KIND RECEIVED<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                | Date (month,<br>day, year)<br>8/24/2000 | Amount of Each<br>Disbursement this Period<br>\$50.00  |

SUBTOTAL of Disbursements This Page (optional)

\$557.01

TOTAL This Period (last page this line number only)

# SCHEDULE B

# ITEMIZED DISBURSEMENTS

## Operating Expenditures

Use separate  
schedules for each  
category of the

PAGE 3 OF 12

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)

Runbeck for Congress

c00325670

|                                                                                                                   |                                                                                                                                                                                                                 |                                         |                                                          |
|-------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|----------------------------------------------------------|
| A. Full Name, Mailing Address and ZIP Code<br>Ellis, Steve<br>637 North Snelling Ave.<br>Saint Paul MN 55104      | Purpose of Disbursement<br>IN-KIND RECEIVED<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                      | Date (month,<br>day, year)<br>6/24/2000 | Amount of Each<br>Disbursement this Period<br>\$50.00    |
| B. Full Name, Mailing Address and ZIP Code<br>Ellis, Steve<br>637 North Snelling Ave.<br>Saint Paul MN 55104      | Purpose of Disbursement<br>IN-KIND RECEIVED<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                      | Date (month,<br>day, year)<br>8/31/2000 | Amount of Each<br>Disbursement this Period<br>\$819.00   |
| C. Full Name, Mailing Address and ZIP Code<br>Ellis, Steve<br>637 North Snelling Ave.<br>Saint Paul MN 55104      | Purpose of Disbursement<br>IN-KIND RECEIVED<br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                      | Date (month,<br>day, year)<br>8/31/2000 | Amount of Each<br>Disbursement this Period<br>\$1,000.00 |
| D. Full Name, Mailing Address and ZIP Code<br>EMCB Development<br>4116 Drew Ave S<br>Minneapolis MN 55410         | Purpose of Disbursement<br>Campaign Consultant<br>Fundraising<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):    | Date (month,<br>day, year)<br>8/25/2000 | Amount of Each<br>Disbursement this Period<br>\$6,361.24 |
| E. Full Name, Mailing Address and ZIP Code<br>EMCB Development<br>4116 Drew Ave S<br>Minneapolis MN 55410         | Purpose of Disbursement<br>Campaign Consultant<br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                   | Date (month,<br>day, year)<br>9/20/2000 | Amount of Each<br>Disbursement this Period<br>\$6,500.60 |
| F. Full Name, Mailing Address and ZIP Code<br>Heritage Days Parade<br>2526 East 7th Ave.<br>Saint Paul MN 55109   | Purpose of Disbursement<br>Parade Fee<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                            | Date (month,<br>day, year)<br>9/7/2000  | Amount of Each<br>Disbursement this Period<br>\$150.00   |
| G. Full Name, Mailing Address and ZIP Code<br>Home Depot<br>2360 White Bear Ave<br>Saint Paul MN 55109            | Purpose of Disbursement<br>Office Expenses<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                       | Date (month,<br>day, year)<br>8/25/2000 | Amount of Each<br>Disbursement this Period<br>\$96.56    |
| H. Full Name, Mailing Address and ZIP Code<br>Home Of The Good Shepherd<br>5100 Hodgson Rd<br>Saint Paul MN 55126 | Purpose of Disbursement<br>Other (Enter<br>Description) Luncheon<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | Date (month,<br>day, year)<br>8/29/2000 | Amount of Each<br>Disbursement this Period<br>\$70.00    |
| I. Full Name, Mailing Address and ZIP Code<br>Johnson, Tonla<br>14716 Excelsior<br>Saint Paul MN 55124            | Purpose of Disbursement<br>Office Expenses<br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                       | Date (month,<br>day, year)<br>9/13/2000 | Amount of Each<br>Disbursement this Period<br>\$250.00   |

SUBTOTAL of Disbursements This Page (optional)

\$15,397.40

TOTAL This Period (last page this line number only)

# SCHEDULE B

# ITEMIZED DISBURSEMENTS

## Operating Expenditures

Use separate  
schedules for each  
category of the

PAGE 4 OF 12

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)

Runbeck for Congress

c00325570

|                                                                                                                       |                                                                                                                                                                                                             |                                             |                                                              |
|-----------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|--------------------------------------------------------------|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br>Johnson, Tonia<br>14716 Excelsior<br>Saint Paul MN 55124         | <b>Purpose of Disbursement</b><br>Campaign Workers' Salaries<br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | <b>Date (month, day, year)</b><br>9/18/2000 | <b>Amount of Each Disbursement this Period</b><br>\$1,015.38 |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br>Johnson, Tonia<br>14716 Excelsior<br>Saint Paul MN 55124         | <b>Purpose of Disbursement</b><br>Office Expenses<br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):            | <b>Date (month, day, year)</b><br>9/14/2000 | <b>Amount of Each Disbursement this Period</b><br>\$57.90    |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br>Johnson, Tonia<br>14716 Excelsior<br>Saint Paul MN 55124         | <b>Purpose of Disbursement</b><br>Campaign Workers' Salaries<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | <b>Date (month, day, year)</b><br>9/6/2000  | <b>Amount of Each Disbursement this Period</b><br>\$1,015.38 |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br>Johnson, Tonia<br>14716 Excelsior<br>Saint Paul MN 55124         | <b>Purpose of Disbursement</b><br>Campaign Workers' Salaries<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | <b>Date (month, day, year)</b><br>8/28/2000 | <b>Amount of Each Disbursement this Period</b><br>\$1,015.38 |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br>Kinkos<br>68 Snelling Avenue<br>Saint Paul MN 55105              | <b>Purpose of Disbursement</b><br>Office Expenses<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):            | <b>Date (month, day, year)</b><br>9/8/2000  | <b>Amount of Each Disbursement this Period</b><br>\$6.07     |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br>Kinkos<br>68 Snelling Avenue<br>Saint Paul MN 55105              | <b>Purpose of Disbursement</b><br>Office Expenses<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):            | <b>Date (month, day, year)</b><br>9/5/2000  | <b>Amount of Each Disbursement this Period</b><br>\$105.93   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br>Kinkos<br>68 Snelling Avenue<br>Saint Paul MN 55105              | <b>Purpose of Disbursement</b><br>Office Expenses<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):            | <b>Date (month, day, year)</b><br>9/7/2000  | <b>Amount of Each Disbursement this Period</b><br>\$40.26    |
| <b>H. Full Name, Mailing Address and ZIP Code</b><br>Kramer and Associates<br>1471 Barclay St.<br>Saint Paul MN 55106 | <b>Purpose of Disbursement</b><br>Campaign Literature<br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):        | <b>Date (month, day, year)</b><br>9/14/2000 | <b>Amount of Each Disbursement this Period</b><br>\$252.25   |
| <b>I. Full Name, Mailing Address and ZIP Code</b><br>Krinkle Company<br>1404 Concordia Ave<br>Saint Paul MN 55104     | <b>Purpose of Disbursement</b><br>Office Rent<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                | <b>Date (month, day, year)</b><br>8/25/2000 | <b>Amount of Each Disbursement this Period</b><br>\$1,120.00 |

SUBTOTAL of Disbursements This Page (optional)

\$4,628.55

TOTAL This Period (last page this line number only)

# SCHEDULE B

# ITEMIZED DISBURSEMENTS

## Operating Expenditures

Use separate  
schedule(s) for each  
category of the

PAGE 5 OF 12

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)

Runbeck for Congress

c00326670

|                                                                                                                  |                                                                                                                                                                                                   |                                         |                                                            |
|------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|------------------------------------------------------------|
| A. Full Name, Mailing Address and ZIP Code<br>Krinkle Company<br>1404 Concordia Ave<br>Saint Paul MN 55104       | Purpose of Disbursement<br>Office Rent Office Rent<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | Date (month,<br>day, year)<br>8/25/2000 | Amount of Each<br>Disbursement this Period<br>\$1,120.00   |
| B. Full Name, Mailing Address and ZIP Code<br>Krinkle Company<br>1404 Concordia Ave<br>Saint Paul MN 55104       | Purpose of Disbursement<br>Office Rent<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):             | Date (month,<br>day, year)<br>8/25/2000 | Amount of Each<br>Disbursement this Period<br>\$1,120.00   |
| C. Full Name, Mailing Address and ZIP Code<br>Lillie Suburban Newspaper<br>2515 7 Ave. E.<br>Saint Paul MN 55109 | Purpose of Disbursement<br>Print Ads<br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):               | Date (month,<br>day, year)<br>9/18/2000 | Amount of Each<br>Disbursement this Period<br>\$817.00     |
| D. Full Name, Mailing Address and ZIP Code<br>McKasy Travel<br>101 5th St. East<br>Saint Paul MN 55101           | Purpose of Disbursement<br>Travel Expense<br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):          | Date (month,<br>day, year)<br>9/14/2000 | Amount of Each<br>Disbursement this Period<br>\$449.00     |
| E. Full Name, Mailing Address and ZIP Code<br>Mentzer Media<br>600 Fairmount Ave.<br>Towson MD 21286             | Purpose of Disbursement<br>Radio Ads<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):               | Date (month,<br>day, year)<br>8/31/2000 | Amount of Each<br>Disbursement this Period<br>\$6,267.65   |
| F. Full Name, Mailing Address and ZIP Code<br>Mentzer Media<br>600 Fairmount Ave.<br>Towson MD 21286             | Purpose of Disbursement<br>Television Ads<br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):          | Date (month,<br>day, year)<br>9/23/2000 | Amount of Each<br>Disbursement this Period<br>\$32,959.50  |
| G. Full Name, Mailing Address and ZIP Code<br>Mentzer Media<br>600 Fairmount Ave.<br>Towson MD 21286             | Purpose of Disbursement<br>Television Ads<br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):          | Date (month,<br>day, year)<br>9/21/2000 | Amount of Each<br>Disbursement this Period<br>\$100,000.00 |
| H. Full Name, Mailing Address and ZIP Code<br>Mentzer Media<br>600 Fairmount Ave.<br>Towson MD 21286             | Purpose of Disbursement<br>Radio Ads<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):               | Date (month,<br>day, year)<br>8/25/2000 | Amount of Each<br>Disbursement this Period<br>\$3,892.65   |
| I. Full Name, Mailing Address and ZIP Code<br>Minneapolis Club<br>729 2nd Ave. S<br>Minneapolis MN 55402         | Purpose of Disbursement<br>Fundraising<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):             | Date (month,<br>day, year)<br>8/25/2000 | Amount of Each<br>Disbursement this Period<br>\$447.36     |

SUBTOTAL of Disbursements This Page (optional)

\$147,073.16

TOTAL This Period (last page this line number only)

# SCHEDULE B ITEMIZED DISBURSEMENTS

## Operating Expenditures

Use separate  
schedule(s) for each  
category of the

PAGE 6 OF 12

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)

Runbeck for Congress

c00325670

|                                                                                                                             |                                                                                                                                                                                                              |                                         |                                                           |
|-----------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|-----------------------------------------------------------|
| A. Full Name, Mailing Address and ZIP Code<br>Minneapolis Club<br>729 2nd Ave. S<br>Minneapolis MN 55402                    | Purpose of Disbursement<br>Fundraising<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                        | Date (month,<br>day, year)<br>9/7/2000  | Amount of Each<br>Disbursement this Period<br>\$59.39     |
| B. Full Name, Mailing Address and ZIP Code<br>Minuteman Press<br>519 Snelling Ave<br>Saint Paul MN 55104                    | Purpose of Disbursement<br>Office Expenses<br>Stationary<br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):      | Date (month,<br>day, year)<br>9/14/2000 | Amount of Each<br>Disbursement this Period<br>\$334.37    |
| C. Full Name, Mailing Address and ZIP Code<br>Mn Gop<br>480 Cedar Suite 570<br>Saint Paul MN 55101                          | Purpose of Disbursement<br>Other (Enter<br>Description) Misc.<br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | Date (month,<br>day, year)<br>9/27/2000 | Amount of Each<br>Disbursement this Period<br>\$25,000.00 |
| D. Full Name, Mailing Address and ZIP Code<br>North Second Street Steel<br>2212 North Second Street<br>Minneapolis MN 55411 | Purpose of Disbursement<br>Campaign Literature<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                | Date (month,<br>day, year)<br>8/24/2000 | Amount of Each<br>Disbursement this Period<br>\$1,224.84  |
| E. Full Name, Mailing Address and ZIP Code<br>North Second Street Steel<br>2212 North Second Street<br>Minneapolis MN 55411 | Purpose of Disbursement<br>Campaign Literature<br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                | Date (month,<br>day, year)<br>9/21/2000 | Amount of Each<br>Disbursement this Period<br>\$628.40    |
| F. Full Name, Mailing Address and ZIP Code<br>Office Max<br>1490 W University Ave<br>Saint Paul MN 55104                    | Purpose of Disbursement<br>Office Expenses<br>supplies<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):        | Date (month,<br>day, year)<br>9/1/2000  | Amount of Each<br>Disbursement this Period<br>\$70.52     |
| G. Full Name, Mailing Address and ZIP Code<br>Office Max<br>1490 W University Ave<br>Saint Paul MN 55104                    | Purpose of Disbursement<br>Office Expenses<br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                    | Date (month,<br>day, year)<br>9/27/2000 | Amount of Each<br>Disbursement this Period<br>\$82.35     |
| H. Full Name, Mailing Address and ZIP Code<br>Office Max<br>1490 W University Ave<br>Saint Paul MN 55104                    | Purpose of Disbursement<br>Office Expenses<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                    | Date (month,<br>day, year)<br>9/7/2000  | Amount of Each<br>Disbursement this Period<br>\$24.60     |
| I. Full Name, Mailing Address and ZIP Code<br>Office Max<br>1490 W University Ave<br>Saint Paul MN 55104                    | Purpose of Disbursement<br>Office Expenses<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                    | Date (month,<br>day, year)<br>9/8/2000  | Amount of Each<br>Disbursement this Period<br>\$14.97     |

SUBTOTAL of Disbursements This Page (optional)

\$27,439.44

TOTAL This Period (last page this line number only)

# SCHEDULE B

# ITEMIZED DISBURSEMENTS

## Operating Expenditures

Use separate  
schedules for each  
category of the

PAGE 7 OF 12

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)

Runbeck for Congress

c00325670

|                                                                                                                                 |                                                                                                                                                                                                       |                                         |                                                          |
|---------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|----------------------------------------------------------|
| A. Full Name, Mailing Address and ZIP Code<br>Office Max<br>1490 W University Ave<br>Saint Paul MN 55104                        | Purpose of Disbursement<br>Office Expenses<br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):             | Date (month,<br>day, year)<br>9/20/2000 | Amount of Each<br>Disbursement this Period<br>\$21.40    |
| B. Full Name, Mailing Address and ZIP Code<br>Office Max<br>1490 W University Ave<br>Saint Paul MN 55104                        | Purpose of Disbursement<br>Office Expenses<br>supplies<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | Date (month,<br>day, year)<br>8/28/2000 | Amount of Each<br>Disbursement this Period<br>\$36.45    |
| C. Full Name, Mailing Address and ZIP Code<br>Office Max<br>1490 W University Ave<br>Saint Paul MN 55104                        | Purpose of Disbursement<br>Office Expenses<br>Supplies<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | Date (month,<br>day, year)<br>8/24/2000 | Amount of Each<br>Disbursement this Period<br>\$70.79    |
| D. Full Name, Mailing Address and ZIP Code<br>Office Max<br>1490 W University Ave<br>Saint Paul MN 55104                        | Purpose of Disbursement<br>Office Expenses<br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):             | Date (month,<br>day, year)<br>9/27/2000 | Amount of Each<br>Disbursement this Period<br>\$32.10    |
| E. Full Name, Mailing Address and ZIP Code<br>PAC, BIPAC<br>888 Sixteenth Street N.W.<br>Washington DC 20006                    | Purpose of Disbursement<br>IN-KIND RECEIVED<br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):            | Date (month,<br>day, year)<br>9/30/2000 | Amount of Each<br>Disbursement this Period<br>\$155.39   |
| F. Full Name, Mailing Address and ZIP Code<br>Pac, Hunter For Cong<br>9340 Fuerte Drive Suite 302<br>La Mesa CA 91941           | Purpose of Disbursement<br>IN-KIND RECEIVED<br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):            | Date (month,<br>day, year)<br>9/20/2000 | Amount of Each<br>Disbursement this Period<br>\$397.96   |
| G. Full Name, Mailing Address and ZIP Code<br>PAC, Majority Leader<br>209 Pennsylvania Ave. SE Suite 200<br>Washington DC 20003 | Purpose of Disbursement<br>IN-KIND RECEIVED<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):            | Date (month,<br>day, year)<br>8/30/2000 | Amount of Each<br>Disbursement this Period<br>\$1,062.56 |
| H. Full Name, Mailing Address and ZIP Code<br>Pac, Pioneer<br>499 South Capitol St. S.W. Suite 2000A<br>Washington DC 20003     | Purpose of Disbursement<br>IN-KIND RECEIVED<br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):            | Date (month,<br>day, year)<br>9/7/2000  | Amount of Each<br>Disbursement this Period<br>\$2,500.00 |
| I. Full Name, Mailing Address and ZIP Code<br>Pac, Pioneer<br>499 South Capitol St. S.W. Suite 2000A<br>Washington DC 20003     | Purpose of Disbursement<br>IN-KIND RECEIVED<br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):            | Date (month,<br>day, year)<br>9/25/2000 | Amount of Each<br>Disbursement this Period<br>\$440.00   |

SUBTOTAL of Disbursements This Page (optional)

\$4,716.65

TOTAL This Period (last page this line number only)



# SCHEDULE B

# ITEMIZED DISBURSEMENTS

## Operating Expenditures

Use separate  
schedule(s) for each  
category of the

PAGE 8 OF 12  
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)

Runbeck for Congress

C00325670

|                                                                                                           |                                                                                                                                                                                                              |                                         |                                                          |
|-----------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|----------------------------------------------------------|
| A. Full Name, Mailing Address and ZIP Code<br>Paychex<br>2950 Metro Drive Ste 200<br>Minneapolis MN 55425 | Purpose of Disbursement<br>Other (Enter<br>Description) Taxes<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | Date (month,<br>day, year)<br>9/1/2000  | Amount of Each<br>Disbursement this Period<br>\$2,498.23 |
| B. Full Name, Mailing Address and ZIP Code<br>Paychex<br>2950 Metro Drive Ste 200<br>Minneapolis MN 55425 | Purpose of Disbursement<br>Other (Enter<br>Description) Taxes<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | Date (month,<br>day, year)<br>9/11/2000 | Amount of Each<br>Disbursement this Period<br>\$1,908.84 |
| C. Full Name, Mailing Address and ZIP Code<br>Paychex<br>2950 Metro Drive Ste 200<br>Minneapolis MN 55425 | Purpose of Disbursement<br>Other (Enter<br>Description) Misc<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):  | Date (month,<br>day, year)<br>9/11/2000 | Amount of Each<br>Disbursement this Period<br>\$170.90   |
| D. Full Name, Mailing Address and ZIP Code<br>Pellow, Rod<br>Street Required<br>City ST 00000             | Purpose of Disbursement<br>IN-KIND RECEIVED<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                   | Date (month,<br>day, year)<br>9/6/2000  | Amount of Each<br>Disbursement this Period<br>\$1,000.00 |
| E. Full Name, Mailing Address and ZIP Code<br>Pinnacle Direct<br>4115 Drew Ave 8<br>Minneapolis MN 55410  | Purpose of Disbursement<br>Fundraising Fundraising<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):            | Date (month,<br>day, year)<br>8/25/2000 | Amount of Each<br>Disbursement this Period<br>\$7,274.40 |
| F. Full Name, Mailing Address and ZIP Code<br>Polltal<br>1000 University Ave<br>Saint Paul MN 55104       | Purpose of Disbursement<br>Fundraising Fundraising<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):            | Date (month,<br>day, year)<br>8/25/2000 | Amount of Each<br>Disbursement this Period<br>\$8,618.15 |
| G. Full Name, Mailing Address and ZIP Code<br>Pr Newswire<br>Street Required<br>City ST 00000             | Purpose of Disbursement<br>Office Expenses<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                    | Date (month,<br>day, year)<br>9/8/2000  | Amount of Each<br>Disbursement this Period<br>\$55.00    |
| H. Full Name, Mailing Address and ZIP Code<br>Premier Bank<br>2151 Third Street<br>Saint Paul MN 55110    | Purpose of Disbursement<br>Bank Service Charge<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                | Date (month,<br>day, year)<br>8/29/2000 | Amount of Each<br>Disbursement this Period<br>\$30.55    |
| I. Full Name, Mailing Address and ZIP Code<br>Premier Bank<br>2151 Third Street<br>Saint Paul MN 55110    | Purpose of Disbursement<br>Bank Service Charge<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                | Date (month,<br>day, year)<br>8/29/2000 | Amount of Each<br>Disbursement this Period<br>\$21.75    |

SUBTOTAL of Disbursements This Page (optional)

\$21,577.82

TOTAL This Period (last page this line number only)

# SCHEDULE B

# ITEMIZED DISBURSEMENTS

## Operating Expenditures

Use separate  
schedule(s) for each  
category of the

PAGE 9 OF 12

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)

Runbeck for Congress

c00325670

|                                                                                                                               |                                                                                                                                                                                                                 |                                         |                                                          |
|-------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|----------------------------------------------------------|
| A. Full Name, Mailing Address and ZIP Code<br>Public Opinion Strategies<br>277 B Washington St Ste 320<br>Alexandria VA 22314 | Purpose of Disbursement<br>Polling Costs Polling<br>Costs<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):        | Date (month,<br>day, year)<br>8/25/2000 | Amount of Each<br>Disbursement this Period<br>\$9,500.00 |
| B. Full Name, Mailing Address and ZIP Code<br>Shields, Brenden<br>1013 Longworth<br>Washington DC 20615                       | Purpose of Disbursement<br>Campaign Consultant<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                   | Date (month,<br>day, year)<br>8/28/2000 | Amount of Each<br>Disbursement this Period<br>\$250.00   |
| C. Full Name, Mailing Address and ZIP Code<br>SMD<br>6520 West Lake Street<br>Minneapolis MN 55426                            | Purpose of Disbursement<br>Office Expenses<br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                       | Date (month,<br>day, year)<br>9/14/2000 | Amount of Each<br>Disbursement this Period<br>\$614.29   |
| D. Full Name, Mailing Address and ZIP Code<br>Sprint<br>PO Box 219715<br>Saint Paul MN 55121                                  | Purpose of Disbursement<br>Office Expenses<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                       | Date (month,<br>day, year)<br>8/25/2000 | Amount of Each<br>Disbursement this Period<br>\$316.55   |
| E. Full Name, Mailing Address and ZIP Code<br>St. Georges<br>1111 Summit Ave.<br>Saint Paul MN 55105                          | Purpose of Disbursement<br>Other (Enter<br>Description) Food<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):     | Date (month,<br>day, year)<br>8/26/2000 | Amount of Each<br>Disbursement this Period<br>\$70.00    |
| F. Full Name, Mailing Address and ZIP Code<br>St. Paul Chamber<br>332 Minnesota Street<br>Saint Paul MN 55101                 | Purpose of Disbursement<br>Other (Enter<br>Description) Luncheon<br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | Date (month,<br>day, year)<br>9/14/2000 | Amount of Each<br>Disbursement this Period<br>\$50.00    |
| G. Full Name, Mailing Address and ZIP Code<br>Sweeneys<br>96 N. Dale St.<br>Saint Paul MN 55102                               | Purpose of Disbursement<br>Other (Enter<br>Description) Primary<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):  | Date (month,<br>day, year)<br>9/11/2000 | Amount of Each<br>Disbursement this Period<br>\$350.00   |
| H. Full Name, Mailing Address and ZIP Code<br>Target<br>1300 University Ave.<br>Saint Paul MN 55104                           | Purpose of Disbursement<br>Office Expenses<br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                       | Date (month,<br>day, year)<br>9/25/2000 | Amount of Each<br>Disbursement this Period<br>\$70.61    |
| I. Full Name, Mailing Address and ZIP Code<br>Target<br>1300 University Ave.<br>Saint Paul MN 55104                           | Purpose of Disbursement<br>Office Expenses<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                       | Date (month,<br>day, year)<br>9/8/2000  | Amount of Each<br>Disbursement this Period<br>\$13.90    |

SUBTOTAL of Disbursements This Page (optional)

\$11,235.35

TOTAL This Period (last page this line number only)

# SCHEDULE B

# ITEMIZED DISBURSEMENTS

## Operating Expenditures

Use separate  
schedule(s) for each  
category of the

PAGE 10 OF 12

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)

Runbeck for Congress

c00325870

|                                                                                                            |                                                                                                                                                                                                                 |                                         |                                                          |
|------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|----------------------------------------------------------|
| A. Full Name, Mailing Address and ZIP Code<br>Thomas, Richard<br>15970 West Ave. SE<br>Prior Lake MN 55372 | Purpose of Disbursement<br>Other (Enter<br>Description) Returned<br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | Date (month,<br>day, year)<br>9/27/2000 | Amount of Each<br>Disbursement this Period<br>\$1,000.00 |
| B. Full Name, Mailing Address and ZIP Code<br>US Post Office<br>1406 Concordia Ave<br>Saint Paul MN 55104  | Purpose of Disbursement<br>Postage<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                               | Date (month,<br>day, year)<br>9/2/2000  | Amount of Each<br>Disbursement this Period<br>\$330.00   |
| C. Full Name, Mailing Address and ZIP Code<br>US Post Office<br>1406 Concordia Ave<br>Saint Paul MN 55104  | Purpose of Disbursement<br>Postage<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                               | Date (month,<br>day, year)<br>8/29/2000 | Amount of Each<br>Disbursement this Period<br>\$330.00   |
| D. Full Name, Mailing Address and ZIP Code<br>US Post Office<br>1406 Concordia Ave<br>Saint Paul MN 55104  | Purpose of Disbursement<br>Postage<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                               | Date (month,<br>day, year)<br>9/9/2000  | Amount of Each<br>Disbursement this Period<br>\$330.00   |
| E. Full Name, Mailing Address and ZIP Code<br>US Post Office<br>1406 Concordia Ave<br>Saint Paul MN 55104  | Purpose of Disbursement<br>Postage<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                               | Date (month,<br>day, year)<br>9/11/2000 | Amount of Each<br>Disbursement this Period<br>\$70.50    |
| F. Full Name, Mailing Address and ZIP Code<br>US Post Office<br>1406 Concordia Ave<br>Saint Paul MN 55104  | Purpose of Disbursement<br>Postage<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                               | Date (month,<br>day, year)<br>9/8/2000  | Amount of Each<br>Disbursement this Period<br>\$21.03    |
| G. Full Name, Mailing Address and ZIP Code<br>US Post Office<br>1406 Concordia Ave<br>Saint Paul MN 55104  | Purpose of Disbursement<br>Postage<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                               | Date (month,<br>day, year)<br>8/25/2000 | Amount of Each<br>Disbursement this Period<br>\$15.75    |
| H. Full Name, Mailing Address and ZIP Code<br>Vlsi<br>12 South 6th Street Ste 250<br>Minneapolis MN 55402  | Purpose of Disbursement<br>Office Expenses<br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                       | Date (month,<br>day, year)<br>9/25/2000 | Amount of Each<br>Disbursement this Period<br>\$44.00    |
| I. Full Name, Mailing Address and ZIP Code<br>Walsh, Bill<br>15805 Foxhill Ave N<br>Hugo MN 55038          | Purpose of Disbursement<br>Campaign Workers'<br>Salaries<br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):         | Date (month,<br>day, year)<br>9/18/2000 | Amount of Each<br>Disbursement this Period<br>\$2,085.04 |

SUBTOTAL of Disbursements This Page (optional)

\$4,226.32

TOTAL This Period (last page this line number only)

# SCHEDULE B

# ITEMIZED DISBURSEMENTS

## Operating Expenditures

Use separate  
schedules for each  
category of the

PAGE 11 OF 12

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)

Runbeck for Congress

c00325670

|                                                                                                             |                                                                                                                                                                                                      |                                         |                                                           |
|-------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|-----------------------------------------------------------|
| A. Full Name, Mailing Address and ZIP Code<br>Walsh, Bill<br>15808 Foxhill Ave N<br>Hugo MN 55038           | Purpose of Disbursement<br>Office Expenses<br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):            | Date (month,<br>day, year)<br>9/14/2000 | Amount of Each<br>Disbursement this Period<br>\$221.00    |
| B. Full Name, Mailing Address and ZIP Code<br>Walsh, Bill<br>15808 Foxhill Ave N<br>Hugo MN 55038           | Purpose of Disbursement<br>Campaign Workers' Salaries<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | Date (month,<br>day, year)<br>9/6/2000  | Amount of Each<br>Disbursement this Period<br>\$2,872.28  |
| C. Full Name, Mailing Address and ZIP Code<br>Walsh, Bill<br>15808 Foxhill Ave N<br>Hugo MN 55038           | Purpose of Disbursement<br>Office Expenses<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):            | Date (month,<br>day, year)<br>8/25/2000 | Amount of Each<br>Disbursement this Period<br>\$330.46    |
| D. Full Name, Mailing Address and ZIP Code<br>Walters, Elizabeth<br>1614 Hewitt<br>Saint Paul MN 55104      | Purpose of Disbursement<br>Campaign Workers' Salaries<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | Date (month,<br>day, year)<br>8/28/2000 | Amount of Each<br>Disbursement this Period<br>\$963.74    |
| E. Full Name, Mailing Address and ZIP Code<br>Walters, Elizabeth<br>1614 Hewitt<br>Saint Paul MN 55104      | Purpose of Disbursement<br>Office Expenses<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):            | Date (month,<br>day, year)<br>8/25/2000 | Amount of Each<br>Disbursement this Period<br>\$527.95    |
| F. Full Name, Mailing Address and ZIP Code<br>Walters, Elizabeth<br>1614 Hewitt<br>Saint Paul MN 55104      | Purpose of Disbursement<br>Campaign Workers' Salaries<br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | Date (month,<br>day, year)<br>9/19/2000 | Amount of Each<br>Disbursement this Period<br>\$963.74    |
| G. Full Name, Mailing Address and ZIP Code<br>Welch St. Claire<br>8812 Teresa Ann CT<br>Alexandria VA 22308 | Purpose of Disbursement<br>Campaign Mailings<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):          | Date (month,<br>day, year)<br>9/29/2000 | Amount of Each<br>Disbursement this Period<br>\$1,986.16  |
| H. Full Name, Mailing Address and ZIP Code<br>Welch St. Claire<br>8812 Teresa Ann CT<br>Alexandria VA 22308 | Purpose of Disbursement<br>Campaign Mailings<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):          | Date (month,<br>day, year)<br>8/29/2000 | Amount of Each<br>Disbursement this Period<br>\$10,680.00 |
| I. Full Name, Mailing Address and ZIP Code<br>Welch St. Claire<br>8812 Teresa Ann CT<br>Alexandria VA 22308 | Purpose of Disbursement<br>Campaign Literature<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):        | Date (month,<br>day, year)<br>9/11/2000 | Amount of Each<br>Disbursement this Period<br>\$6,960.00  |

SUBTOTAL of Disbursements This Page (optional)

\$25,505.33

TOTAL This Period (last page this line number only)

# SCHEDULE B

# ITEMIZED DISBURSEMENTS

## Operating Expenditures

Use separate  
schedule(s) for each  
category of the

PAGE 12 OF 12

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)

Runbeck for Congress

c00325670

|                                                                                                            |                                                                                                                                                                                          |                                      |                                                       |
|------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|-------------------------------------------------------|
| A. Full Name, Mailing Address and ZIP Code<br>Welch St. Clair<br>8812 Teresa Ann CT<br>Alexandria VA 22308 | Purpose of Disbursement<br>Television Ads<br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | Date (month, day, year)<br>9/14/2000 | Amount of Each Disbursement this Period<br>\$7,700.00 |
| Full Name, Mailing Address and ZIP Code                                                                    | Purpose of Disbursement<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                              | Date (month, day, year)              | Amount of Each Disbursement this Period               |
| Full Name, Mailing Address and ZIP Code                                                                    | Purpose of Disbursement<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                              | Date (month, day, year)              | Amount of Each Disbursement this Period               |
| Full Name, Mailing Address and ZIP Code                                                                    | Purpose of Disbursement<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                              | Date (month, day, year)              | Amount of Each Disbursement this Period               |
| Full Name, Mailing Address and ZIP Code                                                                    | Purpose of Disbursement<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                              | Date (month, day, year)              | Amount of Each Disbursement this Period               |
| Full Name, Mailing Address and ZIP Code                                                                    | Purpose of Disbursement<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                              | Date (month, day, year)              | Amount of Each Disbursement this Period               |
| Full Name, Mailing Address and ZIP Code                                                                    | Purpose of Disbursement<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                              | Date (month, day, year)              | Amount of Each Disbursement this Period               |
| Full Name, Mailing Address and ZIP Code                                                                    | Purpose of Disbursement<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                              | Date (month, day, year)              | Amount of Each Disbursement this Period               |
| Full Name, Mailing Address and ZIP Code                                                                    | Purpose of Disbursement<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                              | Date (month, day, year)              | Amount of Each Disbursement this Period               |

SUBTOTAL of Disbursements This Page (optional)

\$7,700.00

TOTAL This Period (last page this line number only)

\$282,681.52

**SCHEDULE B**                      **ITEMIZED DISBURSEMENTS****Refunds to Political Party Committees**Use separate  
schedule(s) for each  
category of the

PAGE    1 OF 1

FOR LINE NUMBER  
20(c)

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)

Runbeck for Congress

c00325670

|                                                                                                                                       |                                                                                                                                                                                                                      |                                                 |                                                                  |
|---------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|------------------------------------------------------------------|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br>PAC, Assoc General C<br>333 John Carlyle Street Suite 200<br>Alexandria VA 22314 | <b>Purpose of Disbursement</b><br>Refund of 9/10/2000<br>Contribution<br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify): | <b>Date (month,<br/>day, year)</b><br>9/28/2000 | <b>Amount of Each<br/>Disbursement this Period</b><br>\$1,000.00 |
| <b>Full Name, Mailing Address and ZIP Code</b>                                                                                        | <b>Purpose of Disbursement</b><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                                                   | <b>Date (month,<br/>day, year)</b>              | <b>Amount of Each<br/>Disbursement this Period</b>               |
| <b>Full Name, Mailing Address and ZIP Code</b>                                                                                        | <b>Purpose of Disbursement</b><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                                                   | <b>Date (month,<br/>day, year)</b>              | <b>Amount of Each<br/>Disbursement this Period</b>               |
| <b>Full Name, Mailing Address and ZIP Code</b>                                                                                        | <b>Purpose of Disbursement</b><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                                                   | <b>Date (month,<br/>day, year)</b>              | <b>Amount of Each<br/>Disbursement this Period</b>               |
| <b>Full Name, Mailing Address and ZIP Code</b>                                                                                        | <b>Purpose of Disbursement</b><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                                                   | <b>Date (month,<br/>day, year)</b>              | <b>Amount of Each<br/>Disbursement this Period</b>               |
| <b>Full Name, Mailing Address and ZIP Code</b>                                                                                        | <b>Purpose of Disbursement</b><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                                                   | <b>Date (month,<br/>day, year)</b>              | <b>Amount of Each<br/>Disbursement this Period</b>               |
| <b>Full Name, Mailing Address and ZIP Code</b>                                                                                        | <b>Purpose of Disbursement</b><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                                                   | <b>Date (month,<br/>day, year)</b>              | <b>Amount of Each<br/>Disbursement this Period</b>               |
| <b>Full Name, Mailing Address and ZIP Code</b>                                                                                        | <b>Purpose of Disbursement</b><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                                                   | <b>Date (month,<br/>day, year)</b>              | <b>Amount of Each<br/>Disbursement this Period</b>               |
| <b>Full Name, Mailing Address and ZIP Code</b>                                                                                        | <b>Purpose of Disbursement</b><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify):                                                   | <b>Date (month,<br/>day, year)</b>              | <b>Amount of Each<br/>Disbursement this Period</b>               |

SUBTOTAL of Disbursements This Page (optional)

\$1,000.00

TOTAL This Period (last page this line number only)

\$1,000.00

**SCHEDULE D**

(Revised 3/80) Owed BY the Committee

**DEBTS AND OBLIGATIONS**

Excluding Loans

FROM 8/24/2000

TO 9/30/2000

PAGE 1 of 3 for

LINE NUMBER 10

(Use separate schedules for each numbered line)

| Name of Committee (In Full)<br>Runbeck for Congress                                                                                                          | 000300070 | Outstanding<br>Balance Beginning<br>This Period | Amount<br>Incurred<br>This Period | Payment<br>This<br>Period | Outstanding<br>Balance at Close<br>of This Period |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-------------------------------------------------|-----------------------------------|---------------------------|---------------------------------------------------|
| A. Full Name, Mailing Address and Zip Code of Debtor or Creditor<br>Public Opinion Strategies Gene Ulm<br>277 S Washington St Ste 320<br>Alexandria VA 22314 |           | \$0.00                                          | \$1,253.00                        | \$0.00                    | \$1,253.00                                        |
| Nature of Debt (Purpose): Travel expenses Pulling Costs                                                                                                      |           |                                                 |                                   |                           |                                                   |
| B. Full Name, Mailing Address and Zip Code of Debtor or Creditor<br>Public Opinion Strategics Gene Ulm<br>277 S Washington St Ste 320<br>Alexandria VA 22314 |           | \$0.00                                          | \$7,000.00                        | \$0.00                    | \$7,000.00                                        |
| Nature of Debt (Purpose): Polling Costs                                                                                                                      |           |                                                 |                                   |                           |                                                   |
| C. Full Name, Mailing Address and Zip Code of Debtor or Creditor<br>Welch St. Claire Greg St. Claire<br>8812 Teresa Ann CT<br>Alexandria VA 22308            |           | \$0.00                                          | \$37,010.00                       | \$0.00                    | \$37,010.00                                       |
| Nature of Debt (Purpose): Mail Media                                                                                                                         |           |                                                 |                                   |                           |                                                   |
| D. Full Name, Mailing Address and Zip Code of Debtor or Creditor<br>Welch St. Claire Greg St. Claire<br>8812 Teresa Ann CT<br>Alexandria VA 22308            |           | \$0.00                                          | \$6,260.00                        | \$0.00                    | \$6,260.00                                        |
| Nature of Debt (Purpose): TV production Media                                                                                                                |           |                                                 |                                   |                           |                                                   |
| E. Full Name, Mailing Address and Zip Code of Debtor or Creditor<br>Politel<br>1000 University Ave<br>Saint Paul MN 55104                                    |           | \$0.00                                          | \$4,959.21                        | \$0.00                    | \$4,959.21                                        |
| Nature of Debt (Purpose): Fundraising                                                                                                                        |           |                                                 |                                   |                           |                                                   |
| F. Full Name, Mailing Address and Zip Code of Debtor or Creditor<br>St. Paul Hotel<br>350 Market Street<br>Saint Paul MN 55102                               |           | \$0.00                                          | \$1,488.34                        | \$0.00                    | \$1,488.34                                        |
| Nature of Debt (Purpose): Amey event Fundraising                                                                                                             |           |                                                 |                                   |                           |                                                   |

|                                                                                         |             |
|-----------------------------------------------------------------------------------------|-------------|
| 1) SUBTOTALS This Period This Page (optional)                                           | \$57,970.55 |
| 2) TOTALS This Period (last page in this line 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****DEBTS AND OBLIGATIONS**

PAGE 2 of 3 for

LINE NUMBER 10  
(Use separate schedules  
for each numbered line)

(Revised 3/80) Owed BY the Committee

Excluding Loans

FROM 8/24/2008

TO 8/30/2008

| Name of Committee (in Full)<br>Runbeck for Congress                                                                                                                                          | Outstanding<br>Balance Beginning<br>This Period | Amount<br>Incurred<br>This Period | Payment<br>This<br>Period | Outstanding<br>Balance at Close<br>of This Period |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|-----------------------------------|---------------------------|---------------------------------------------------|
| A. Full Name, Mailing Address and Zip Code of Debtor or Creditor<br>Pinnacle Direct Tim Berkness<br>4115 Drew Ave S<br>Minneapolis MN 55410<br>Nature of Debt (Purpose): Fundraising         | \$0.00                                          | \$2,977.79                        | \$0.00                    | \$2,977.79                                        |
| B. Full Name, Mailing Address and Zip Code of Debtor or Creditor<br>Krinkie Company Phil Krinkie<br>1404 Concordia Ave<br>Saint Paul MN 55104<br>Nature of Debt (Purpose): Office Rent       | \$0.00                                          | \$1,120.00                        | \$0.00                    | \$1,120.00                                        |
| C. Full Name, Mailing Address and Zip Code of Debtor or Creditor<br>Paychex<br>2950 Metro Drive Ste 200<br>Minneapolis MN 55425<br>Nature of Debt (Purpose): Taxes Other (Enter Description) | \$0.00                                          | \$1,898.38                        | \$0.00                    | \$1,898.38                                        |
| D. Full Name, Mailing Address and Zip Code of Debtor or Creditor<br>Bill Walsh<br>15808 Foxhill Ave N<br>Hugo MN 55038<br>Nature of Debt (Purpose): Campaign Workers' Salaries               | \$0.00                                          | \$2,085.04                        | \$0.00                    | \$2,085.04                                        |
| E. Full Name, Mailing Address and Zip Code of Debtor or Creditor<br>Elizabeth Walters<br>1614 Hewitt<br>Saint Paul MN 55104<br>Nature of Debt (Purpose): Campaign Workers' Salaries          | \$0.00                                          | \$963.74                          | \$0.00                    | \$963.74                                          |
| F. Full Name, Mailing Address and Zip Code of Debtor or Creditor<br>Tonia Johnson<br>14716 Excelsior<br>Saint Paul MN 55124<br>Nature of Debt (Purpose): Campaign Workers' Salaries          | \$0.00                                          | \$1,015.38                        | \$0.00                    | \$1,015.38                                        |

|                                                                                         |             |
|-----------------------------------------------------------------------------------------|-------------|
| 1) SUBTOTALS This Period This Page (optional)                                           | \$10,060.33 |
| 2) TOTALS This Period (last page in this line 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****DEBTS AND OBLIGATIONS**

(Revised 3/80) Owed BY the Committee

Excluding Loans:

FROM 8/24/2000

TO 9/30/2000

PAGE 2 of 2 for  
LINE NUMBER 10  
(Use separate schedules  
for each numbered line)

| Name of Committee (in Full)<br>Runbeck for Congress                                                                                           | Account Number<br>000325670 | Outstanding<br>Balance Beginning<br>This Period | Amount<br>Incurred<br>This Period | Payment<br>This<br>Period | Outstanding<br>Balance at Close<br>of This Period |
|-----------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|-------------------------------------------------|-----------------------------------|---------------------------|---------------------------------------------------|
| A. Full Name, Mailing Address and Zip Code of Debtor or Creditor<br>Peter Ajmich<br>14 Nelson Street<br>Saint Paul MN 55119                   |                             | \$0.00                                          | \$558.36                          | \$0.00                    | \$558.36                                          |
| Nature of Debt (Purpose): Campaign Workers' Salaries                                                                                          |                             |                                                 |                                   |                           |                                                   |
| B. Full Name, Mailing Address and Zip Code of Debtor or Creditor<br>Krinkie Company Phil Krinkie<br>1404 Concordia Ave<br>Saint Paul MN 55104 |                             | \$1,120.00                                      | \$0.00                            | \$0.00                    | \$1,120.00                                        |
| Nature of Debt (Purpose): Office Rent                                                                                                         |                             |                                                 |                                   |                           |                                                   |
| Full Name, Mailing Address and Zip Code of Debtor or Creditor                                                                                 |                             |                                                 |                                   |                           |                                                   |
| Nature of Debt (Purpose):                                                                                                                     |                             |                                                 |                                   |                           |                                                   |
| Full Name, Mailing Address and Zip Code of Debtor or Creditor                                                                                 |                             |                                                 |                                   |                           |                                                   |
| Nature of Debt (Purpose):                                                                                                                     |                             |                                                 |                                   |                           |                                                   |
| Full Name, Mailing Address and Zip Code of Debtor or Creditor                                                                                 |                             |                                                 |                                   |                           |                                                   |
| Nature of Debt (Purpose):                                                                                                                     |                             |                                                 |                                   |                           |                                                   |
| Full Name, Mailing Address and Zip Code of Debtor or Creditor                                                                                 |                             |                                                 |                                   |                           |                                                   |
| Nature of Debt (Purpose):                                                                                                                     |                             |                                                 |                                   |                           |                                                   |

|                                                                                         |             |
|-----------------------------------------------------------------------------------------|-------------|
| 1) SUBTOTALS This Period This Page (optional)                                           | \$1,678.36  |
| 2) TOTALS This Period (last page in this line only)                                     | \$69,709.24 |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)                             | \$0.00      |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | \$69,709.24 |

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 checked="" type="checkbox"/> First Class Mail                                | POSTMARKED<br>16-14-00               |
| <input type="checkbox"/> Registered/Certified Mail                                  | POSTMARKED (R/C)                     |
| <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<br>and/or Date of Receipt |
| <input type="checkbox"/> Electronic Filing                                          |                                      |
| J-G<br>PREPARER                                                                     | 16-16-00<br>DATE PREPARED            |

(6/2000)