

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

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

Republican Party of Minnesota

ADDRESS (number and street)

525 PARK STREET

SUITE 250

☐Check if different
than previously
reported. (ACC)

ST PAUL

MN

55103

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00001313

3. IS THIS
REPORT☐NEW
(N)

OR

☒AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☒

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

1 1

2 5

2 0 0 8

through

1 2

3 1

2 0 0 8

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

David E. Sturrock

Signature of Treasurer

Electronically Filed by David E. Sturrock

Date

0 9

2 1

2 0 0 9

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

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

A. Form/Schedule : **F3XA**

Transaction ID :

Please be advised that payments to the original vendor supporting the reimbursement to Anthony Post did not exceed \$200 in a calendar year. Schedule B supporting Line 21(b) discloses a \$0 disbursement to American Express Financial, followed by \$142,677.41 in memo entries. Please be advised that these memo entries relate to the \$350,000 Pre-payment of the American Express Financial Credit Card previously reported on the 30 Day Post-General Report. Additional memo entries will be reported in the future.

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

3 / 322

Write or Type Committee Name
Republican Party of Minnesota

Report Covering the Period: From:

M	M
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <div><div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>2008</div></div>		345095.01
(b) Cash on Hand at Beginning of Reporting Period	976237.20	
(c) Total Receipts (from Line 19)	623044.04	12140581.44
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1599281.24	12485676.45
7. Total Disbursements (from Line 31)	1306547.81	12192943.02
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	292733.43	292733.43
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	223797.86	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

Republican Party of Minnesota

Report Covering the Period:

From:

M	M
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	48223.08	888351.08
(ii) Unitemized	306231.89	3734116.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	354454.97	4622467.08
(b) Political Party Committees	300.00	550.00
(c) Other Political Committees (such as PACs)	5000.00	67000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	359754.97	4690017.08
12. Transfers From Affiliated/Other Party Committees	0.00	6194331.47
13. All Loans Received	0.00	240101.14
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	43.51	160212.44
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	143245.56	330572.83
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	120000.00	525346.48
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	120000.00	525346.48
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	623044.04	12140581.44
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	503044.04	11615234.96

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	110464.11	551889.29
(ii) Non-Federal Share.....	196380.68	981136.62
(b) Other Federal Operating Expenditures.....	327128.35	1941340.94
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	633973.14	3474366.85
22. Transfers to Affiliated/Other Party Committees.....	5075.00	1191659.94
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	3850.00
24. Independent Expenditure (use Schedule E)	0.00	335265.74
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	80000.00
26. Loan Repayments Made.....	3330.01	277313.96
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	200.00	9020.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	200.00	9020.00
29. Other Disbursements.....	245673.37	357990.97
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	418296.29	6463475.56
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	418296.29	6463475.56
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	1306547.81	12192943.02
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1110167.13	11211806.40

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	359754.97	4690017.08
34. Total Contribution Refunds (from Line 28(d))	200.00	9020.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	359554.97	4680997.08
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	437592.46	2493230.23
37. Offsets to Operating Expenditures (from Line 15, page 3)	43.51	160212.44
38. Net Operating Expenditures (subtract Line 37 from Line 36)	437548.95	2333017.79

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

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

FOR LINE NUMBER: PAGE 7 / 322

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Eric Aanenson

Mailing Address 3288 Owasso Heights Rd

City

Shoreview

State

MN

Zip Code

55126-4130

FEC ID number of contributing
federal political committee.

C

Name of Employer
Old Dutch

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 9 / 2 0 0 8

Transaction ID: 90921.C725779

Amount of Each Receipt this Period

500.00

Receipt

B.

Full Name (Last, First, Middle Initial)

John Antonelli

Mailing Address 19238 Blueridge Mountain Rd

City

Bluemont

State

VA

Zip Code

20135-2000

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 4 / 2 0 0 8

Transaction ID: 90921.C719124

Amount of Each Receipt this Period

300.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Scott Arney

Mailing Address 3805 Lake Country Dr

City

Denton

State

TX

Zip Code

76210-3311

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 9 / 2 0 0 8

Transaction ID: 90921.C721248

Amount of Each Receipt this Period

210.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1010.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 8 / 322

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Kathleen Atkinson

Mailing Address 3001 Overlook Dr

City

Bloomington

State

MN

Zip Code

55431-3816

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information RequestedOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: 90921.C721656

Amount of Each Receipt this Period

50.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Kathleen Atkinson

Mailing Address 3001 Overlook Dr

City

Bloomington

State

MN

Zip Code

55431-3816

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information RequestedOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 90921.C724164

Amount of Each Receipt this Period

75.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Lawrence Bachman

Mailing Address 5915 Colfax Ave S

City

Minneapolis

State

MN

Zip Code

55419-2103

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 9 / 2 0 0 8

Transaction ID: 90921.C725917

Amount of Each Receipt this Period

50.00

Receipt

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 9 / 322

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

David Bakke

Mailing Address 23805 COUNTY ROAD NO 10

City

Loretto

State

MN

Zip Code

55357

FEC ID number of contributing
federal political committee.

C

Name of Employer
Minneapolis Public Schools

Occupation

PLUMBER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 9 / 2 0 0 8

Transaction ID: 90921.C721157

Amount of Each Receipt this Period

100.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Laurence Ballard

Mailing Address 9221 Croesus Ave

City

Los Angeles

State

CA

Zip Code

90002-2522

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

None

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 9 / 2 0 0 8

Transaction ID: 90921.C721287

Amount of Each Receipt this Period

50.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Joanne Barnhart

Mailing Address 4609 8th St S

City

Arlington

State

VA

Zip Code

22204-1429

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: 90921.C720606

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 10 / 322

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Richard Beitzel

Mailing Address 1019 Beltrami Ave NW

City

Bemidji

State

MN

Zip Code

56601-2822

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 90921.C715097

Amount of Each Receipt this Period

50.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Michael Berg

Mailing Address 121 Washington Ave S Apt 1917

City

Minneapolis

State

MN

Zip Code

55401-2135

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
SELF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 9 / 2 0 0 8

Transaction ID: 90921.C721352

Amount of Each Receipt this Period

100.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Anthony Biancanello

Mailing Address 181 Hillside Ave

City

Williston Park

State

NY

Zip Code

11596-1746

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: 90921.C720566

Amount of Each Receipt this Period

200.00

Receipt

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 322

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Karen Blank

Mailing Address 1582 Medina Rd

City

Long Lake

State

MN

Zip Code

55356-9518

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Housewife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 5 / 2 0 0 8

Transaction ID: 90921.C719925

Amount of Each Receipt this Period

250.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Melvyn Bleeker

Mailing Address 3857 Lyndale Ave S

City

Minneapolis

State

MN

Zip Code

55409-1128

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mcto

Occupation
SUPV OFF/OTHR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 9 / 2 0 0 8

Transaction ID: 90921.C726124

Amount of Each Receipt this Period

25.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Del Blowers

Mailing Address PO Box 286

City

Clearbrook

State

MN

Zip Code

56634-0286

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 90921.C717394

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

375.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 12 / 322

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Michael Boulka

Mailing Address 4370 Metcalf Dr

City

Eagan

State

MN

Zip Code

55122-1919

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 5 / 2 0 0 8

Transaction ID: 90921.C738909

Amount of Each Receipt this Period

100.00

Receipt

B.

Full Name (Last, First, Middle Initial)

George Bridgman

Mailing Address 5290 Villa Way Apt 318

City

Edina

State

MN

Zip Code

55436-2135

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 9 / 2 0 0 8

Transaction ID: 90921.C724253

Amount of Each Receipt this Period

150.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Garfield Broman

Mailing Address 12069 N Shore Dr

City

Spicer

State

MN

Zip Code

56288-9576

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 90921.C722134

Amount of Each Receipt this Period

50.00

Receipt

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 322

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

William Browne

Mailing Address 237 Round Hill Rd

City

Greenwich

State

CT

Zip Code

06831-3301

FEC ID number of contributing
federal political committee.

C

Name of Employer
declined

Occupation
Investments

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 5 / 2 0 0 8

Transaction ID: 90921.C719452

Amount of Each Receipt this Period

250.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Neil Brownell

Mailing Address 27366 240th St

City

Verndale

State

MN

Zip Code

56481-2172

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 7 / 2 0 0 8

Transaction ID: 90921.C723771

Amount of Each Receipt this Period

50.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Arland Brusven

Mailing Address 13920 61st Ave N

City

Plymouth

State

MN

Zip Code

55446-3512

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Investment Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 7 / 2 0 0 8

Transaction ID: 90921.C723827

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 14 / 322

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Gary Capen

Mailing Address 565 Ferndale Rd W

City

Wayzata

State

MN

Zip Code

55391-9627

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 90921.C720899

Amount of Each Receipt this Period

500.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Lee Casey

Mailing Address 3700 Keefer Ct

City

Fairfax

State

VA

Zip Code

22033-1305

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baker Hosterlerlp

Occupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

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

Transaction ID: 90921.C717178

Amount of Each Receipt this Period

100.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Carolyn Clark

Mailing Address 1516 Grant Avenue Ext

City

Butler

State

PA

Zip Code

16001-2372

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

110.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 5 / 2 0 0 8

Transaction ID: 90921.C719639

Amount of Each Receipt this Period

110.00

Receipt

SUBTOTAL of Receipts This Page (optional)

710.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 15 / 322

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Carolyn Clark

Mailing Address 1516 Grant Avenue Ext

City

State

Zip Code

Butler

PA

16001-2372

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

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

Transaction ID: 90921.C721793

Amount of Each Receipt this Period

110.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Kay Clausen

Mailing Address 360 Dreshertown Rd

City

State

Zip Code

Fort Washington

PA

19034-3009

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 90921.C724764

Amount of Each Receipt this Period

300.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Michelle Cooper

Mailing Address 18815 32nd Ave N

City

State

Zip Code

Plymouth

MN

55447-1069

FEC ID number of contributing
federal political committee.

C

Name of Employer
United Health Group

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 5 / 2 0 0 8

Transaction ID: 90921.C714584

Amount of Each Receipt this Period

25.00

Receipt

SUBTOTAL of Receipts This Page (optional)

435.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 16 / 322

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Robert Craigmyle

Mailing Address 48 Boronda Rd

City

Carmel Valley

State

CA

Zip Code

93924-9443

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

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

Transaction ID: 90921.C715949

Amount of Each Receipt this Period

100.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Susan Currie

Mailing Address 4100 Crittenden St

City

Hyattsville

State

MD

Zip Code

20781-2122

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 4 / 2 0 0 8

Transaction ID: 90921.C719227

Amount of Each Receipt this Period

220.00

Receipt

C.

Full Name (Last, First, Middle Initial)

James Dech

Mailing Address 2188 Tower Ct

City

Woodbury

State

MN

Zip Code

55125-1670

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: 90921.C722144

Amount of Each Receipt this Period

10.00

Receipt

SUBTOTAL of Receipts This Page (optional)

330.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 17 / 322

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Roger Dehaan

Mailing Address 80163 300th St

City

Hollandale

State

MN

Zip Code

56045-4087

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Farmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 9 / 2 0 0 8

Transaction ID: 90921.C724290

Amount of Each Receipt this Period

35.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Janice Drake

Mailing Address RR 1 Box 206

City

Nowata

State

OK

Zip Code

74048-9729

FEC ID number of contributing
federal political committee.

C

Name of Employer
IBM - Retired

Occupation
Retired Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: 90921.C715457

Amount of Each Receipt this Period

200.00

Receipt

C.

Full Name (Last, First, Middle Initial)

William Dreyer

Mailing Address 10 Ironwood Rd

City

San Antonio

State

TX

Zip Code

78212-2540

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 90921.C724113

Amount of Each Receipt this Period

250.00

Receipt

SUBTOTAL of Receipts This Page (optional)

485.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 18 / 322

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

George Duke

Mailing Address 580 E Main St

City

Bradford

State

PA

Zip Code

16701-1838

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

775.00

Date of Receipt

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

Transaction ID: 90921.C716503

Amount of Each Receipt this Period

275.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Sylvia Duryee

Mailing Address 1115 41st Ave E

City

Seattle

State

WA

Zip Code

98112-4405

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

Housewife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 90921.C722972

Amount of Each Receipt this Period

100.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Sylvia Duryee

Mailing Address 1115 41st Ave E

City

Seattle

State

WA

Zip Code

98112-4405

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

Housewife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 9 / 2 0 0 8

Transaction ID: 90921.C725867

Amount of Each Receipt this Period

150.00

Receipt

SUBTOTAL of Receipts This Page (optional)

525.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 19 / 322

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Alfred Elser

Mailing Address 16 Winding Ln

City

Greenwich

State

CT

Zip Code

06831-3733

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

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

Transaction ID: 90921.C715652

Amount of Each Receipt this Period

275.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Bruce Emmel

Mailing Address 27447 Bjerke Cir

City

Leonard

State

MN

Zip Code

56652-4115

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: 90921.C785794

Amount of Each Receipt this Period

15.00

Receipt

C.

Full Name (Last, First, Middle Initial)

John Englund

Mailing Address 105C South Dr

City

Circle Pines

State

MN

Zip Code

55014-3319

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 9 / 2 0 0 8

Transaction ID: 90921.C721116

Amount of Each Receipt this Period

135.00

Receipt

SUBTOTAL of Receipts This Page (optional)

425.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 20 / 322

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Mary Fayfield

Mailing Address PO Box 34

City

Minneapolis

State

MN

Zip Code

55440-0034

FEC ID number of contributing
federal political committee.

C

Name of Employer
information requested

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

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

Transaction ID: 90921.C715546

Amount of Each Receipt this Period

10000.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Herbert Fick

Mailing Address 1104 N Elm St

City

Luverne

State

MN

Zip Code

56156-2144

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

160.00

Date of Receipt

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

Transaction ID: 90921.C720478

Amount of Each Receipt this Period

60.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Herbert Fick

Mailing Address 1104 N Elm St

City

Luverne

State

MN

Zip Code

56156-2144

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

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

Transaction ID: 90921.C724148

Amount of Each Receipt this Period

60.00

Receipt

SUBTOTAL of Receipts This Page (optional)

10120.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 21 / 322

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Gale Florence

Mailing Address 5551 Montrose Dr

City

Dallas

State

TX

Zip Code

75209-5609

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 90921.C717971

Amount of Each Receipt this Period

250.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Mike Florence

Mailing Address 5551 Montrose Dr

City

Dallas

State

TX

Zip Code

75209-5609

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 90921.C717970

Amount of Each Receipt this Period

250.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Charles Flournoy

Mailing Address PO Box 1388

City

Houston

State

TX

Zip Code

77251-1388

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: 90921.C717116

Amount of Each Receipt this Period

3000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 22 / 322

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Elizabeth Garmer

Mailing Address 7863 N Club Cir

City

Milwaukee

State

WI

Zip Code

53217-2940

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 90921.C717631

Amount of Each Receipt this Period

500.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Fred Gassaway

Mailing Address 101 N Main St # B

City

Hinesville

State

GA

Zip Code

31313-3215

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 90921.C717233

Amount of Each Receipt this Period

500.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Lawrence Gelman

Mailing Address 3900 Sundown Dr

City

McAllen

State

TX

Zip Code

78503-1367

FEC ID number of contributing
federal political committee.

C

Name of Employer
McAllen Anesthesia Co

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 90921.C715687

Amount of Each Receipt this Period

500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 23 / 322

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Steven George

Mailing Address 425 S 206th Ave

City

Elkhorn

State

NE

Zip Code

68022-2173

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 90921.C717224

Amount of Each Receipt this Period

200.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Lynette Gessell

Mailing Address 13897 48th Ave

City

Little Falls

State

MN

Zip Code

56345-5338

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: 90921.C718385

Amount of Each Receipt this Period

50.00

Receipt

C.

Full Name (Last, First, Middle Initial)

James Graves

Mailing Address 8409 Pickwick Ln

City

Dallas

State

TX

Zip Code

75225-5323

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 9 / 2 0 0 8

Transaction ID: 90921.C726026

Amount of Each Receipt this Period

250.00

Receipt

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 24 / 322

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Lena Greene

Mailing Address 3229 Chestnut St NE

City

Washington

State

DC

Zip Code

20018-4004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 9 / 2 0 0 8

Transaction ID: 90921.C721311

Amount of Each Receipt this Period

100.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Wesley Grow

Mailing Address 248 Mineral St

City

Pottstown

State

PA

Zip Code

19464-3942

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 90921.C722744

Amount of Each Receipt this Period

250.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Gerald Gustafson

Mailing Address 11615 280th Ave

City

New Richland

State

MN

Zip Code

56072-5909

FEC ID number of contributing
federal political committee.

C

Name of Employer
Itron Inc.

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 4 / 2 0 0 8

Transaction ID: 90921.C718663

Amount of Each Receipt this Period

50.00

Receipt

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 25 / 322

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Laura Gutman

Mailing Address 310 Watts St

City

Durham

State

NC

Zip Code

27701-2039

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

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

Transaction ID: 90921.C717194

Amount of Each Receipt this Period

100.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Laura Gutman

Mailing Address 310 Watts St

City

Durham

State

NC

Zip Code

27701-2039

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

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

Transaction ID: 90921.C721774

Amount of Each Receipt this Period

100.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Irvin Hagen

Mailing Address 320 N Buffalo St

City

Springville

State

NY

Zip Code

14141-1320

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

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

Transaction ID: 90921.C717158

Amount of Each Receipt this Period

50.00

Receipt

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 26 / 322

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Gerald Haley

Mailing Address 5553 37th Ave S

City

Minneapolis

State

MN

Zip Code

55417-2105

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

195.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 5 / 2 0 0 8

Transaction ID: 90921.C714575

Amount of Each Receipt this Period

25.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Gerald Haley

Mailing Address 5553 37th Ave S

City

Minneapolis

State

MN

Zip Code

55417-2105

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

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

Transaction ID: 90921.C724926

Amount of Each Receipt this Period

50.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Ruth Halpenny

Mailing Address 6008 Hawarden Dr

City

Riverside

State

CA

Zip Code

92506-4520

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 90921.C724096

Amount of Each Receipt this Period

600.00

Receipt

SUBTOTAL of Receipts This Page (optional)

675.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 27 / 322

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Violet Hanna

Mailing Address 4123 Mary Ellen Ave

City

Studio City

State

CA

Zip Code

91604-2212

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1520.00

Date of Receipt

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

Transaction ID: 90921.C715651

Amount of Each Receipt this Period

220.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Peter Hanson

Mailing Address 235 Moore St

City

Hackensack

State

NJ

Zip Code

07601-7425

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Realstate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 90921.C718209

Amount of Each Receipt this Period

500.00

Receipt

C.

Full Name (Last, First, Middle Initial)

James Harrison

Mailing Address 16 High St

City

East Williston

State

NY

Zip Code

11596-1919

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 9 / 2 0 0 8

Transaction ID: 90921.C721317

Amount of Each Receipt this Period

250.00

Receipt

SUBTOTAL of Receipts This Page (optional)

970.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 28 / 322

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Thomas Hays

Mailing Address 29 Trent Dr

City

Saint Louis

State

MO

Zip Code

63124-1032

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 90921.C723001

Amount of Each Receipt this Period

500.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Alfred Henderson

Mailing Address 7330 Kurvers Point Rd

City

Chanhausen

State

MN

Zip Code

55317-7521

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: 90921.C721693

Amount of Each Receipt this Period

25.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Andrea Hendricks

Mailing Address 5290 Lakewood Rd

City

Duluth

State

MN

Zip Code

55804-2809

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mt. Royal Medical Center

Occupation

REGISTER NURSE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

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

Transaction ID: 90921.C716288

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

625.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 29 / 322

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Gene Hewett

Mailing Address 3709 Euclid Ave

City

Dallas

State

TX

Zip Code

75205-3161

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: 90921.C717326

Amount of Each Receipt this Period

100.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Gene Hewett

Mailing Address 3709 Euclid Ave

City

Dallas

State

TX

Zip Code

75205-3161

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 90921.C723213

Amount of Each Receipt this Period

100.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Margaret Hill

Mailing Address 785 5TH AEV # 12A

City

New York

State

NY

Zip Code

10022

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 5 / 2 0 0 8

Transaction ID: 90921.C715320

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1200.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 30 / 322

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Jonathan Hoff

Mailing Address 37 Kenilworth Rd

City

Rye

State

NY

Zip Code

10580-1910

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 5 / 2 0 0 8

Transaction ID: 90921.C719797

Amount of Each Receipt this Period

500.00

Receipt

B.

Full Name (Last, First, Middle Initial)

John Hoover

Mailing Address 14753 Wexhall Ter

City

Burtonsville

State

MD

Zip Code

20866-1916

FEC ID number of contributing
federal political committee.

C

Name of Employer
US Naval Research Laborat-
ory

Occupation

CHEMIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 4 / 2 0 0 8

Transaction ID: 90921.C719136

Amount of Each Receipt this Period

100.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Patricia Hovanetz

Mailing Address 2635 160th Ln NE

City

Ham Lake

State

MN

Zip Code

55304-5808

FEC ID number of contributing
federal political committee.

C

Name of Employer
Wells Capital Mgt

Occupation

BROKER/TRADER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

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

Transaction ID: 90921.C715010

Amount of Each Receipt this Period

15.00

Receipt

SUBTOTAL of Receipts This Page (optional)

615.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 31 / 322

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Anita Huseh

Mailing Address 13761 University St

City

Westminster

State

CA

Zip Code

92683-2769

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

Business Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 5 / 2 0 0 8

Transaction ID: 90921.C715188

Amount of Each Receipt this Period

100.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Deborah Jabon-clark

Mailing Address 2310 Parker Ave

City

Wheaton

State

MD

Zip Code

20902-1935

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 4 / 2 0 0 8

Transaction ID: 90921.C719137

Amount of Each Receipt this Period

220.00

Receipt

C.

Full Name (Last, First, Middle Initial)

John Jackson

Mailing Address 325 Kelly Cir

City

Duluth

State

MN

Zip Code

55811-5909

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: 90921.C722255

Amount of Each Receipt this Period

50.00

Receipt

SUBTOTAL of Receipts This Page (optional)

370.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 32 / 322

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

William Jackson

Mailing Address 670 Emerson St

City

Denver

State

CO

Zip Code

80218-3217

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

Investment Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 5 / 2 0 0 8

Transaction ID: 90921.C719846

Amount of Each Receipt this Period

100.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Galen Johnson

Mailing Address 85 Clay Cliffe Dr

City

Excelsior

State

MN

Zip Code

55331-9510

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 90921.C722261

Amount of Each Receipt this Period

100.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Margaret Jordan

Mailing Address PO Box 276

City

Howard Lake

State

MN

Zip Code

55349-0276

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

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

Transaction ID: 90921.C724917

Amount of Each Receipt this Period

20.00

Receipt

SUBTOTAL of Receipts This Page (optional)

220.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 33 / 322

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Louise Klarr

Mailing Address 1530 N Cranbrook Rd

City

Bloomfield Hills

State

MI

Zip Code

48301-2314

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 90921.C722935

Amount of Each Receipt this Period

300.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Richard Kleberg

Mailing Address PO Box 17777

City

San Antonio

State

TX

Zip Code

78217-0777

FEC ID number of contributing
federal political committee.

C

Name of Employer
SFD Enterprises

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 90921.C716958

Amount of Each Receipt this Period

250.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Thomas Kotula

Mailing Address 1610 Graydon Ave

City

Brainerd

State

MN

Zip Code

56401-4322

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 7 / 2 0 0 8

Transaction ID: 90921.C723847

Amount of Each Receipt this Period

50.00

Receipt

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Hans Kranz

Mailing Address 48954 270th St

City

Gaylord

State

MN

Zip Code

55334-2290

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

FARMER FT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

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

Transaction ID: 90921.C722162

Amount of Each Receipt this Period

15.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Peter Krych

Mailing Address 3958 Noble Ave N

City

Robbinsdale

State

MN

Zip Code

55422-2163

FEC ID number of contributing
federal political committee.

C

Name of Employer
Insulation Specialist

Occupation

SELF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 90921.C721705

Amount of Each Receipt this Period

50.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Marie Landsburg

Mailing Address 2472 Maple Dr SW

City

Nisssa

State

MN

Zip Code

56468-2015

FEC ID number of contributing
federal political committee.

C

Name of Employer
Landsburg Landscape Nurse-
ry

Occupation

OWNER INVEST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

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

Transaction ID: 90921.C715834

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 35 / 322

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Marie Landsburg

Mailing Address 2472 Maple Dr SW

City

Nisswa

State

MN

Zip Code

56468-2015

FEC ID number of contributing
federal political committee.

C

Name of Employer
Landsburg Landscape Nurse-
ry

Occupation

OWNER INVEST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 9 / 2 0 0 8

Transaction ID: 90921.C725755

Amount of Each Receipt this Period

100.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Lester Larson

Mailing Address P.O. Box 126

City

Nerstrand

State

MN

Zip Code

55053

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

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

Transaction ID: 90921.C718578

Amount of Each Receipt this Period

200.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Michael Larson

Mailing Address 15403 Lake Shore Ave

City

Minnetonka

State

MN

Zip Code

55345-5513

FEC ID number of contributing
federal political committee.

C

Name of Employer
Michael Larson (Self)

Occupation

SCIENCE PHYS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 90921.C722267

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 36 / 322

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Henry Lee

Mailing Address 16035 Inglewood Dr

City

Lakeville

State

MN

Zip Code

55044-8769

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 90921.C723028

Amount of Each Receipt this Period

50.00

Receipt

B.

Full Name (Last, First, Middle Initial)

John Leseth

Mailing Address 703 110th Ave S

City

Moorhead

State

MN

Zip Code

56560-7725

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 5 / 2 0 0 8

Transaction ID: 90921.C714515

Amount of Each Receipt this Period

50.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Marie Lett

Mailing Address 3940 Lett Ln

City

Burleson

State

TX

Zip Code

76028-1742

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

Rancher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 90921.C717277

Amount of Each Receipt this Period

250.00

Receipt

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 37 / 322

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Gregory Link

Mailing Address 4086 Johnny Cake Ridge Rd

City

Saint Paul

State

MN

Zip Code

55122-4207

FEC ID number of contributing
federal political committee.

C

Name of Employer
East St. Paul Housing Inc.

Occupation

PUBLIC REL SPC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

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

Transaction ID: 90921.C738895

Amount of Each Receipt this Period

135.00

Receipt

B.

Full Name (Last, First, Middle Initial)

David Ludowese

Mailing Address 63819 180th St

City

Stewart

State

MN

Zip Code

55385-5735

FEC ID number of contributing
federal political committee.

C

Name of Employer
State Farm Insurance

Occupation

SALES REP INS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 90921.C723907

Amount of Each Receipt this Period

100.00

Receipt

C.

Full Name (Last, First, Middle Initial)

William Ludwick

Mailing Address 3200 W Calhoun Pkwy Apt 803

City

Minneapolis

State

MN

Zip Code

55416-3290

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4700.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 4 / 2 0 0 8

Transaction ID: 90921.C718678

Amount of Each Receipt this Period

200.00

Receipt

SUBTOTAL of Receipts This Page (optional)

435.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Leroy Lundell

Mailing Address 4710 Chantrey Pl

City

Minnetonka

State

MN

Zip Code

55345-3547

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lundell Mfg Corp

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

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

Transaction ID: 90921.C753501

Amount of Each Receipt this Period

110.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Karon Lysne

Mailing Address 4731 Walden Dr

City

Eagan

State

MN

Zip Code

55122-2771

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: 90921.C721709

Amount of Each Receipt this Period

50.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Daniel Martin

Mailing Address RR 3 Box 115

City

Carrollton

State

IL

Zip Code

62016-9537

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

740.00

Date of Receipt

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

Transaction ID: 90921.C804800

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

260.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Gary May

Mailing Address 14986 Manitou Rd NE

City

Prior Lake

State

MN

Zip Code

55372-1126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

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

Transaction ID: 90921.C721711

Amount of Each Receipt this Period

25.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Glen Mcdaniel

Mailing Address 780 Linda Flora Dr

City

Los Angeles

State

CA

Zip Code

90049-1627

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

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

Transaction ID: 90921.C718543

Amount of Each Receipt this Period

125.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Henry Mckinney Iii

Mailing Address 1330 Jessie Latin Rd

City

Gloster

State

LA

Zip Code

71030-3212

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

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

Transaction ID: 90921.C786890

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Margaret Mcwhirter

Mailing Address 5125 Beaumont Way North Dr

City State Zip Code
 Indianapolis IN 46250-1648

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 1 9 / 2 0 0 8

Transaction ID: 90921.C724175

Amount of Each Receipt this Period

220.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Mary Meltzer

Mailing Address 14 Edgecomb Rd

City State Zip Code
 Binghamton NY 13905-4017

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4400.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 4 / 2 0 0 8

Transaction ID: 90921.C719142

Amount of Each Receipt this Period

1800.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Kenneth Meyer

Mailing Address 4345 Acorn Ln

City State Zip Code
 Pequot Lakes MN 56472-2697

FEC ID number of contributing
federal political committee.

C

Name of Employer
Egan Mach. Contr.

Occupation
SHEETMETAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: 90921.C716294

Amount of Each Receipt this Period

25.00

Receipt

SUBTOTAL of Receipts This Page (optional)

2045.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

G Michael Milhiser

Mailing Address 11225 Carriage Ave

City

Montclair

State

CA

Zip Code

91763-6405

FEC ID number of contributing
federal political committee.

C

Name of Employer
Morongo Band of Miss

Occupation
CAO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 90921.C715640

Amount of Each Receipt this Period

250.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Norman Miller

Mailing Address 1279 Peachtree Battle Ave NW

City

Atlanta

State

GA

Zip Code

30327-1443

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 90921.C717227

Amount of Each Receipt this Period

250.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Cecil Morgan

Mailing Address PO Box 746

City

Clarksville

State

TN

Zip Code

37041-0746

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 90921.C717881

Amount of Each Receipt this Period

300.00

Receipt

SUBTOTAL of Receipts This Page (optional)

800.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 42 / 322

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Alan Moy

Mailing Address 4843 57th St SW

City

Waverly

State

MN

Zip Code

55390-5505

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 90921.C722897

Amount of Each Receipt this Period

100.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Ronald Negri

Mailing Address 11013 Abbott Ln

City

Minnetonka

State

MN

Zip Code

55343-8962

FEC ID number of contributing
federal political committee.

C

Name of Employer
Physical Electronics

Occupation
SCIENCE PHYS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

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

Transaction ID: 90921.C724161

Amount of Each Receipt this Period

25.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Lavonne Nerge

Mailing Address 4165 Hilltop Pt Apt 203

City

Eagan

State

MN

Zip Code

55123-1457

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

180.00

Date of Receipt

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

Transaction ID: 90921.C718298

Amount of Each Receipt this Period

30.00

Receipt

SUBTOTAL of Receipts This Page (optional)

155.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Lavonne Nerge

Mailing Address 4165 Hilltop Pt Apt 203

City

Eagan

State

MN

Zip Code

55123-1457

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: 90921.C722313

Amount of Each Receipt this Period

30.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Troy Noer

Mailing Address 17817 Fruitwood Ln

City

Eden Prairie

State

MN

Zip Code

55347-3572

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Financial Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

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

Transaction ID: 90921.C786839

Amount of Each Receipt this Period

15.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Patricia Olsen

Mailing Address 1043 Wyndham Way

City

Camano Island

State

WA

Zip Code

98282-8625

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

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

Transaction ID: 90921.C721557

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

145.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Patricia Olsen

Mailing Address 1043 Wyndham Way

City

Camano Island

State

WA

Zip Code

98282-8625

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.08

Date of Receipt

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

Transaction ID: 90921.C724996

Amount of Each Receipt this Period

100.08

Receipt

B.

Full Name (Last, First, Middle Initial)

Rolfe Otterness

Mailing Address 13705 390th St

City

Goodhue

State

MN

Zip Code

55027-5004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

FARMER FT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: 90921.C715034

Amount of Each Receipt this Period

25.00

Receipt

C.

Full Name (Last, First, Middle Initial)

P Alfred Pannesi

Mailing Address 275 Main St

City

Watertown

State

MA

Zip Code

02472-4333

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 90921.C717334

Amount of Each Receipt this Period

300.00

Receipt

SUBTOTAL of Receipts This Page (optional)

425.08

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Cheryl Parkinson

Mailing Address 3600 Chimney Rock Dr

City

Flower Mound

State

TX

Zip Code

75022-6649

FEC ID number of contributing
federal political committee.

C

Name of Employer
Delta Airlines

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: 90921.C722330

Amount of Each Receipt this Period

100.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Frank Piasecki

Mailing Address 26 Tunbridge Rd

City

Haverford

State

PA

Zip Code

19041-1038

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 90921.C723134

Amount of Each Receipt this Period

500.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Virgil Pilcher

Mailing Address 43611 150th St

City

Waseca

State

MN

Zip Code

56093-1405

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: 90921.C717663

Amount of Each Receipt this Period

50.00

Receipt

SUBTOTAL of Receipts This Page (optional)

650.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

James Puffer

Mailing Address 3800 Deerwood Ln N

City

Plymouth

State

MN

Zip Code

55441-1329

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/a

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 90921.C724998

Amount of Each Receipt this Period

50.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Grace Rabatin

Mailing Address 655 County Road 235

City

Gurley

State

AL

Zip Code

35748-7001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

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

Transaction ID: 90921.C717062

Amount of Each Receipt this Period

50.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Lester Raskob

Mailing Address 14816 County Road 6

City

Plymouth

State

MN

Zip Code

55447-4561

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

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

Transaction ID: 90921.C724924

Amount of Each Receipt this Period

15.00

Receipt

SUBTOTAL of Receipts This Page (optional)

115.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

L.r. Ray

Mailing Address 214 Cedar St

City

Mansfield

State

TX

Zip Code

76063-1811

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: 90921.C721604

Amount of Each Receipt this Period

300.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Eugene Regad

Mailing Address 854 Riverview Dr

City

Morgantown

State

WV

Zip Code

26505-4660

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 90921.C761175

Amount of Each Receipt this Period

300.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Bonnie Reilly

Mailing Address 8877 Pickwick Dr

City

Indianapolis

State

IN

Zip Code

46260-1709

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: 90921.C717107

Amount of Each Receipt this Period

110.00

Receipt

SUBTOTAL of Receipts This Page (optional)

710.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Walter Rhodes

Mailing Address 217 Grimboll Point Rd

City

Savannah

State

GA

Zip Code

31406-5210

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 9 / 2 0 0 8

Transaction ID: 90921.C721299

Amount of Each Receipt this Period

75.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Bruce Richard

Mailing Address 2458 Farrington Cir

City

Roseville

State

MN

Zip Code

55113-3608

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: 90921.C717632

Amount of Each Receipt this Period

100.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Peter Ricketts

Mailing Address 1209 Harney St

City

Omaha

State

NE

Zip Code

68102-1894

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: 90921.C715972

Amount of Each Receipt this Period

5000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

5175.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

James Rill

Mailing Address 7305 Masters Dr

City

Potomac

State

MD

Zip Code

20854-3850

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2300.00

Date of Receipt

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

Transaction ID: 90921.C720749

Amount of Each Receipt this Period

2300.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Walter Roberts

Mailing Address 1299 Black Oaks Ct N Apt D

City

Plymouth

State

MN

Zip Code

55447-3120

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

..

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 5 / 2 0 0 8

Transaction ID: 90921.C714590

Amount of Each Receipt this Period

100.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Burnell Roble

Mailing Address 121 3rd Ave SW

City

Spring Grove

State

MN

Zip Code

55974-1108

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 4 / 2 0 0 8

Transaction ID: 90921.C718742

Amount of Each Receipt this Period

50.00

Receipt

SUBTOTAL of Receipts This Page (optional)

2450.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

George Roche

Mailing Address 6506 Montrose Ave

City

Baltimore

State

MD

Zip Code

21212-1023

FEC ID number of contributing
federal political committee.

C

Name of Employer
T. Rowe Price & Associates

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 4 / 2 0 0 8

Transaction ID: 90921.C719285

Amount of Each Receipt this Period

1000.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Harry Rogers

Mailing Address 276 Summit St

City

Portland

State

ME

Zip Code

04103-2252

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: 90921.C715856

Amount of Each Receipt this Period

50.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Lawrence Ruegamer

Mailing Address 13855 Holly Rd

City

Eden Prairie

State

MN

Zip Code

55346-2808

FEC ID number of contributing
federal political committee.

C

Name of Employer
Isd 272

Occupation
JANITOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

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

Transaction ID: 90921.C732670

Amount of Each Receipt this Period

25.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1075.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Darlene Sabo

Mailing Address 119 Alpine Rd

City

Bridgeville

State

PA

Zip Code

15017-1011

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 5 / 2 0 0 8

Transaction ID: 90921.C719645

Amount of Each Receipt this Period

250.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Robert Salmon

Mailing Address 711 Poplar Ave N

City

Canby

State

MN

Zip Code

56220-1011

FEC ID number of contributing
federal political committee.

C

Name of Employer
Sanford Canby Medical Cen-
ter

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 9 / 2 0 0 8

Transaction ID: 90921.C726110

Amount of Each Receipt this Period

25.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Beverly Scherping

Mailing Address 37267 Rimcrest Rd

City

Freeport

State

MN

Zip Code

56331-9738

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

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

Transaction ID: 90921.C718184

Amount of Each Receipt this Period

55.00

Receipt

SUBTOTAL of Receipts This Page (optional)

330.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Lyall Schwarzkopf

Mailing Address 4840 Bloomington Ave

City

Minneapolis

State

MN

Zip Code

55417-1136

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 90921.C763753

Amount of Each Receipt this Period

250.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Robert Simonson

Mailing Address 18 Forrest Ct NW

City

East Grand Forks

State

MN

Zip Code

56721-1052

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 9 / 2 0 0 8

Transaction ID: 90921.C724256

Amount of Each Receipt this Period

50.00

Receipt

C.

Full Name (Last, First, Middle Initial)

David Smith

Mailing Address 2412 Woodwinds Ln

City

Wayzata

State

MN

Zip Code

55391-9409

FEC ID number of contributing
federal political committee.

C

Name of Employer
information requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

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

Transaction ID: 90921.C722218

Amount of Each Receipt this Period

200.00

Receipt

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Helen Smith

Mailing Address 401 Onda

City

Newport Beach

State

CA

Zip Code

92660-3525

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 5 / 2 0 0 8

Transaction ID: 90921.C714968

Amount of Each Receipt this Period

500.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Troy Smith

Mailing Address 3527 S Keaton Ave

City

Tyler

State

TX

Zip Code

75701-9032

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 90921.C717643

Amount of Each Receipt this Period

250.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Stephen Stack Jr

Mailing Address 2000 Mount Vernon St

City

Philadelphia

State

PA

Zip Code

19130-3236

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 9 / 2 0 0 8

Transaction ID: 90921.C724230

Amount of Each Receipt this Period

400.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1150.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Foye Stanford

Mailing Address 264 Victoria Pl

City

Lawrence

State

NY

Zip Code

11559-2129

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 90921.C720904

Amount of Each Receipt this Period

250.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Jodi Stockert

Mailing Address 19694 Morton Oaks Rd

City

Audubon

State

MN

Zip Code

56511-9490

FEC ID number of contributing
federal political committee.

C

Name of Employer
Windsor Sales Inc.

Occupation
Business Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: 90921.C724621

Amount of Each Receipt this Period

50.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Donald Stott

Mailing Address 111 Bellevue Ave

City

Summit

State

NJ

Zip Code

07901-2000

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired Securities Trader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: 90921.C724944

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1300.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 55 / 322

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Gail Svoboda

Mailing Address PO Box 251

City

Prior Lake

State

MN

Zip Code

55372-0251

FEC ID number of contributing
federal political committee.

C

Name of Employer
Able & Svoboda

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 90921.C722878

Amount of Each Receipt this Period

100.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Patrick Swaggert

Mailing Address 22501 Drexel Ave

City

Jordan

State

MN

Zip Code

55352-9692

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mpls

Occupation

FIREFGTER/PREV

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: 90921.C723933

Amount of Each Receipt this Period

50.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Robert Swain

Mailing Address 188 W Caney Creek Rd

City

Rogersville

State

TN

Zip Code

37857-3839

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 90921.C716998

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 56 / 322

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Frederick Tecce

Mailing Address 1025 Sentry Ln

City

Gladwyne

State

PA

Zip Code

19035-1009

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 90921.C720693

Amount of Each Receipt this Period

250.00

Receipt

B.

Full Name (Last, First, Middle Initial)

William Tedlund

Mailing Address 3114 Rankin Rd

City

Minneapolis

State

MN

Zip Code

55418-2570

FEC ID number of contributing
federal political committee.

C

Name of Employer
Bokers Inc

Occupation

CHMN O/T BD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 90921.C721972

Amount of Each Receipt this Period

100.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Steven Thompson

Mailing Address 885 County Road 19

City

Maple Plain

State

MN

Zip Code

55359-9655

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 90921.C718293

Amount of Each Receipt this Period

250.00

Receipt

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 57 / 322

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Joaquin Uy

Mailing Address 5485 Pinnacle Ct

City

Ann Arbor

State

MI

Zip Code

48108-8663

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

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

Transaction ID: 90921.C717100

Amount of Each Receipt this Period

125.00

Receipt

B.

Full Name (Last, First, Middle Initial)

John Walsh

Mailing Address 5225 Grandview Sq Apt 217

City

Edina

State

MN

Zip Code

55436-1686

FEC ID number of contributing
federal political committee.

C

Name of Employer
Walsh Real Estate

Occupation

BROKER/TRADER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: 90921.C716871

Amount of Each Receipt this Period

100.00

Receipt

C.

Full Name (Last, First, Middle Initial)

James Whitcomb

Mailing Address 22840 N Country Club Trl

City

Scottsdale

State

AZ

Zip Code

85255-4246

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

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

Transaction ID: 90921.C807533

Amount of Each Receipt this Period

200.00

Receipt

SUBTOTAL of Receipts This Page (optional)

425.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 58 / 322

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

James Whitcomb

Mailing Address 22840 N Country Club Trl

City

Scottsdale

State

AZ

Zip Code

85255-4246

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 90921.C722385

Amount of Each Receipt this Period

100.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Jean White

Mailing Address 5495 Nolan Ave N

City

Stillwater

State

MN

Zip Code

55082-5498

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 90921.C726192

Amount of Each Receipt this Period

75.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Garnett Whitehurst

Mailing Address 1983 Hoods Creek Dr

City

New Bern

State

NC

Zip Code

28562-9103

FEC ID number of contributing
federal political committee.

C

Name of Employer
Whitehurst Associate

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

293.00

Date of Receipt

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

Transaction ID: 90921.C718200

Amount of Each Receipt this Period

83.00

Receipt

SUBTOTAL of Receipts This Page (optional)

258.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 59 / 322

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

George Wickstrom

Mailing Address 1028 11th Ave NE

City

Faribault

State

MN

Zip Code

55021-3902

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 5 / 2 0 0 8

Transaction ID: 90921.C715334

Amount of Each Receipt this Period

50.00

Receipt

B.

Full Name (Last, First, Middle Initial)

George Wickstrom

Mailing Address 1028 11th Ave NE

City

Faribault

State

MN

Zip Code

55021-3902

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 90921.C724744

Amount of Each Receipt this Period

250.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Cheryl Wilson

Mailing Address 18756 Heathcote Dr

City

Wayzata

State

MN

Zip Code

55391-3632

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

Remodeler

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 90921.C726283

Amount of Each Receipt this Period

50.00

Receipt

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 60 / 322

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Wayne Zuehlke

Mailing Address 281 Sunflower Ct

City

Saint Paul

State

MN

Zip Code

55127-6152

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 4 / 2 0 0 8

Transaction ID: 90921.C718656

Amount of Each Receipt this Period

100.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Frederick Zwiefel

Mailing Address 24651 State Highway 23

City

Richmond

State

MN

Zip Code

56368-8388

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
SELF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: 90921.C720727

Amount of Each Receipt this Period

40.00

Receipt

SUBTOTAL of Receipts This Page (optional)

140.00

TOTAL This Period (last page this line number only)

48223.08

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 / 322

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Freedom Club Federal PAC

Mailing Address 9210 Science Center Dr

City

Brooklyn Park

State

MN

Zip Code

55428-3621

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: 90921.C721356

Amount of Each Receipt this Period

5000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

5000.00

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

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

FOR LINE NUMBER: PAGE 62 / 322

(check only one)

☐ 11a ☒ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Redwood County Rpm

Mailing Address 32321 County Highway 25

City

Redwood Falls

State

MN

Zip Code

56283-2575

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 4 / 2 0 0 8

Transaction ID: 90921.C718740

Amount of Each Receipt this Period

300.00

Receipt

NOTE: Fed permissible funds

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

300.00

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

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

FOR LINE NUMBER: PAGE 63 / 322

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Paychex

Mailing Address 1210 Northland Dr Ste 100

City

Saint Paul

State

MN

Zip Code

55120-1181

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

202.29

Date of Receipt

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

Transaction ID: 90921.C736332

Amount of Each Receipt this Period

18.51

Offsets to Operating Expenditure

SUBTOTAL of Receipts This Page (optional)

18.51

TOTAL This Period (last page this line number only)

18.51

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

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

FOR LINE NUMBER: PAGE 64 / 322

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Natl Restaurant Association Pac

Mailing Address 1200 17th St NW

City

Washington

State

DC

Zip Code

20036-3006

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: 90921.C717749

Amount of Each Receipt this Period

5000.00

Other Receipt

Note: recount

B.

Full Name (Last, First, Middle Initial)

Alliance Bank

Mailing Address 444 Cedar St

City

Saint Paul

State

MN

Zip Code

55101-2179

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15306.57

Date of Receipt

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

Transaction ID: 90921.C723858

Amount of Each Receipt this Period

22.10

Other Receipt

Note: Interest Income

C.

Full Name (Last, First, Middle Initial)

Alliance Bank

Mailing Address 444 Cedar St

City

Saint Paul

State

MN

Zip Code

55101-2179

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15430.79

Date of Receipt

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

Transaction ID: 90921.C736334

Amount of Each Receipt this Period

124.22

Other Receipt

Note: Interest Income

SUBTOTAL of Receipts This Page (optional)

5146.32

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 65 / 322

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Todd Cole

Mailing Address 2731 450th St

City

Clarkfield

State

MN

Zip Code

56223-3680

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 9 / 2 0 0 8

Transaction ID: 90921.C721020

Amount of Each Receipt this Period

500.00

Other Receipt

Note: recount

B.

Full Name (Last, First, Middle Initial)

Paul Decleva

Mailing Address 350 N Saint Paul St Ste 1625

City

Dallas

State

TX

Zip Code

75201-4259

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

SELF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 90921.C720482

Amount of Each Receipt this Period

250.00

Other Receipt

Note: recount

C.

Full Name (Last, First, Middle Initial)

Ted Deikel

Mailing Address 1660 Highway 100 S

City

Saint Louis Park

State

MN

Zip Code

55416-1529

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

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

Transaction ID: 90921.C731287

Amount of Each Receipt this Period

5000.00

Exempt Legal/Accounting
Serv.

[MEMO ITEM]

Note: Coleman MN Recount
Cmte

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 66 / 322

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Freedom Club Federal PAC

Mailing Address 9210 Science Center Dr

City

Brooklyn Park

State

MN

Zip Code

55428-3621

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

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

Transaction ID: 90921.C731292

Amount of Each Receipt this Period

5000.00

Exempt Legal/Accounting
Serv.

[MEMO ITEM]

Note: Coleman MN Recount
Cmte

B.

Full Name (Last, First, Middle Initial)

Mark Fischer

Mailing Address 3162 Independence Rd

City

Maple Plain

State

MN

Zip Code

55359-

FEC ID number of contributing
federal political committee.

C

Name of Employer
Northwest Orthopedics

Occupation
Surgeon

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 90921.C720550

Amount of Each Receipt this Period

250.00

Other Receipt

Note: recount

C.

Full Name (Last, First, Middle Initial)

Dolores Ghyselink

Mailing Address 40530 Highway 41

City

Oakhurst

State

CA

Zip Code

93644-9621

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 90921.C724506

Amount of Each Receipt this Period

250.00

Other Receipt

Note:recount

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 / 322

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Arthur Hilsinger

Mailing Address 8 Jackson Pond Rd

City

Dedham

State

MA

Zip Code

02026-5524

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 90921.C724505

Amount of Each Receipt this Period

500.00

Other Receipt

Note: recount

B.

Full Name (Last, First, Middle Initial)

Stanley Hubbard

Mailing Address 2289 River Rd S

City

Lakeland

State

MN

Zip Code

55043-9775

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hubbard Broadcasting, IncOccupation
CHMN O/T BD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

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

Transaction ID: 90921.C731291

Amount of Each Receipt this Period

10000.00

Exempt Legal/Accounting
Serv.**[MEMO ITEM]**Note: Coleman MN Recount
Cmte**C.**

Full Name (Last, First, Middle Initial)

Danielle Johnson

Mailing Address 21169 Hummingbird Ln

City

Lakeville

State

MN

Zip Code

55044-5997

FEC ID number of contributing
federal political committee.

C

Name of Employer
Terra Garden CenterOccupation
Retail Assistant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 90921.C720534

Amount of Each Receipt this Period

250.00

Other Receipt

Note: recount

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 68 / 322

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Randy Kendrick

Mailing Address 3964 E Paradise View Dr

City

Paradise Valley

State

AZ

Zip Code

85253-3800

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

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

Transaction ID: 90921.C731290

Amount of Each Receipt this Period

7700.00

Exempt Legal/Accounting
Serv.

[MEMO ITEM]

Note: Coleman MN Recount
Cmte

B.

Full Name (Last, First, Middle Initial)

Bobbi Laird

Mailing Address 4615 Townes Cir

City

Minneapolis

State

MN

Zip Code

55424-1233

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 90921.C720540

Amount of Each Receipt this Period

500.00

Other Receipt

Note: recount

C.

Full Name (Last, First, Middle Initial)

Bernard Marcus

Mailing Address 1266 W Paces Ferry Rd NW

City

Atlanta

State

GA

Zip Code

30327-2306

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

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

Transaction ID: 90921.C731282

Amount of Each Receipt this Period

1000.00

Exempt Legal/Accounting
Serv.

[MEMO ITEM]

Note: Coleman MN Recount
Cmte

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 69 / 322

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Wilma Marcus

Mailing Address 1266 W Paces Ferry Rd NW

City

Atlanta

State

GA

Zip Code

30327-2306

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

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

Transaction ID: 90921.C731283

Amount of Each Receipt this Period

10000.00

Exempt Legal/Accounting
Serv.

[MEMO ITEM]

Note: Coleman MN Recount
Cmte

B.

Full Name (Last, First, Middle Initial)

Daniel Martin

Mailing Address RR 3 Box 115

City

Carrollton

State

IL

Zip Code

62016-9537

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 9 / 2 0 0 8

Transaction ID: 90921.C804799

Amount of Each Receipt this Period

250.00

Other Receipt

Note: recount

C.

Full Name (Last, First, Middle Initial)

Frank Martin

Mailing Address 3030 S Highland Dr

City

Las Vegas

State

NV

Zip Code

89109-1047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Martin-Harris Construction

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

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

Transaction ID: 90921.C731286

Amount of Each Receipt this Period

2700.00

Exempt Legal/Accounting
Serv.

[MEMO ITEM]

Note: Coleman MN Recount
Cmte

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 70 / 322

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Richard Marx

Mailing Address PO Box 440

City

Wappingers Falls

State

NY

Zip Code

12590-0440

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Insurance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 90921.C724550

Amount of Each Receipt this Period

250.00

Other Receipt

note:recount

B.

Full Name (Last, First, Middle Initial)

James Mollison

Mailing Address 4413 Cinnamon Ridge Cir

City

Eagan

State

MN

Zip Code

55122-2393

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 90921.C717442

Amount of Each Receipt this Period

150.00

Other Receipt

Note: recount

C.

Full Name (Last, First, Middle Initial)

Kevin Nagle

Mailing Address 960 Villa del Sol

City

El Dorado Hills

State

CA

Zip Code

95762-3568

FEC ID number of contributing
federal political committee.

C

Name of Employer
Envision Pharmaceutical

Occupation
President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

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

Transaction ID: 90921.C731285

Amount of Each Receipt this Period

7700.00

Exempt Legal/Accounting
Serv.

[MEMO ITEM]

Note: Coleman MN Recount
Cmte

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 71 / 322

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Glen Nelson

Mailing Address 301 Carlson Pkwy Ste 275

City

Minnetonka

State

MN

Zip Code

55305-5386

FEC ID number of contributing
federal political committee.

C

Name of Employer
Medtronic Inc

Occupation

VICE CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

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

Transaction ID: 90921.C731293

Amount of Each Receipt this Period

10000.00

Exempt Legal/Accounting
Serv.

[MEMO ITEM]

Note: Coleman MN Recount

B.

Full Name (Last, First, Middle Initial)

Kenneth Nelson

Mailing Address PO Box 269

City

Perham

State

MN

Zip Code

56573-0269

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation

Farmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 90921.C721511

Amount of Each Receipt this Period

250.00

Other Receipt

Note: recount

C.

Full Name (Last, First, Middle Initial)

Richard Notebaert

Mailing Address 2355 N Commonwealth Ave

City

Chicago

State

IL

Zip Code

60614-3562

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

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

Transaction ID: 90921.C731284

Amount of Each Receipt this Period

10000.00

Exempt Legal/Accounting
Serv.

[MEMO ITEM]

Note: Coleman MN Recount
Cmte

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 72 / 322

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

John Peterman

Mailing Address 615 E Brookside Dr

City

Crown Point

State

IN

Zip Code

46307-4369

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

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

Transaction ID: 90921.C731280

Amount of Each Receipt this Period

10000.00

Exempt Legal/Accounting
Serv.

[MEMO ITEM]

Note: Coleman MN Recount
Cmte

B.

Full Name (Last, First, Middle Initial)

Coleman Minnesota Recount Committee

Mailing Address PO Box 14483

City

Saint Paul

State

MN

Zip Code

55114-0483

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

84225.74

Date of Receipt

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

Transaction ID: 90921.C724871

Amount of Each Receipt this Period

84225.74

Other Receipt

note:recount

C.

Full Name (Last, First, Middle Initial)

Ricky Sandler

Mailing Address 1175 Park Ave # 14A
#14A

City

New York

State

NY

Zip Code

10128-1211

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

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

Transaction ID: 90921.C731288

Amount of Each Receipt this Period

1000.00

Exempt Legal/Accounting
Serv.

[MEMO ITEM]

Note: MN Coleman Recount

SUBTOTAL of Receipts This Page (optional)

84225.74

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 73 / 322

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

John Templeton Jr.

Mailing Address 601 Pembroke Rd

City

Bryn Mawr

State

PA

Zip Code

19010-3613

FEC ID number of contributing
federal political committee.

C

Name of Employer
John Templeton Foundation

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

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

Transaction ID: 90921.C724872

Amount of Each Receipt this Period

10000.00

Other Receipt

note:recount

B.

Full Name (Last, First, Middle Initial)

Dean White

Mailing Address 1000 E 80th PI

City

Merrillville

State

IN

Zip Code

46410-5608

FEC ID number of contributing
federal political committee.

C

Name of Employer
Whiteco Industries, Inc

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

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

Transaction ID: 90921.C731281

Amount of Each Receipt this Period

10000.00

Exempt Legal/Accounting
Serv.

[MEMO ITEM]

Note: Coleman MN Recount
Cmte

C.

Full Name (Last, First, Middle Initial)

Edgar Williams

Mailing Address 3091 Fairview Ave N

City

Roseville

State

MN

Zip Code

55113-1244

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID: 90921.C718504

Amount of Each Receipt this Period

3500.00

Other Receipt

Note: recount

SUBTOTAL of Receipts This Page (optional)

13500.00

TOTAL This Period (last page this line number only)

106272.06

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

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

FOR LINE NUMBER:
(check only one)

PAGE 74 / 322

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Paychex	Transaction ID: 90921.E21951 Date of Disbursement
Mailing Address 1210 Northland Dr Ste 100	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 0 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55120-1181	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll Processing Fee Candidate Name	<div>575.95</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Category/Type PAYROLL PROCESSING FEE	
B. Full Name (Last, First, Middle Initial) Paychex	Transaction ID: 90921.E22308 Date of Disbursement
Mailing Address 1210 Northland Dr Ste 100	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 9 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55120-1181	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll Processing Fee Candidate Name	<div>530.28</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Category/Type PAYROLL PROCESSING FEE	
C. Full Name (Last, First, Middle Initial) Trimble & Associates	Transaction ID: 90921.E21508 Date of Disbursement
Mailing Address 10210 WAYZATA BLVD SUITE 130	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 5 / 2 0 0 8</div> </div>
City Hopkins State MN Zip Code 55305-	Amount of Each Disbursement this Period
Purpose of Disbursement Legal Fees Candidate Name	<div>23976.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Category/Type LEGAL FEES	

SUBTOTAL of Disbursements This Page (optional)

25082.23

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 75 / 322

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Trimble & Associates

Mailing Address 10210 WAYZATA BLVD
SUITE 130

City Hopkins State MN Zip Code 55305-

Purpose of Disbursement
Legal Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21738

Date of Disbursement

12 / 08 / 2008

Amount of Each Disbursement this Period

52375.00

LEGAL FEES

B.

Full Name (Last, First, Middle Initial)
Brian Anderson

Mailing Address 2631 Jamestown Ln Apt 304
Apt. 304

City Alexandria State VA Zip Code 22314-5883

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21780

Date of Disbursement

12 / 08 / 2008

Amount of Each Disbursement this Period

500.00

MEALS

C.

Full Name (Last, First, Middle Initial)
Hayley M. Astrup

Mailing Address 602 24th St NW

City Austin State MN Zip Code 55912-

Purpose of Disbursement
Reimburse for mileage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21547

Date of Disbursement

12 / 05 / 2008

Amount of Each Disbursement this Period

1055.96

REIMBURSE FOR MILAGE

SUBTOTAL of Disbursements This Page (optional)

53930.96

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Hayley M. Astrup

Mailing Address 602 24th St NW

City Austin State MN Zip Code 55912-

Purpose of Disbursement
SEE BELOW: Reimburse for phone

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E22090

Date of Disbursement

/ /

Amount of Each Disbursement this Period

200.00

SEE BELOW: REIMBURSE FOR
PHONE

B.

Full Name (Last, First, Middle Initial)
At&t Mobility

Mailing Address PO Box 6438

City Carol Stream State IL Zip Code 60197-6438

Purpose of Disbursement
ASTRUP - CELL PHONE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E22091

Date of Disbursement

/ /

Amount of Each Disbursement this Period

200.00

[MEMO ITEM]
MEMO: ASTRUP - CELL PHONE

C.

Full Name (Last, First, Middle Initial)
Auto Owners Insurance

Mailing Address PO Box 30278

City Lansing State MI Zip Code 48909-7778

Purpose of Disbursement
Workers Comp Insurance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21947

Date of Disbursement

/ /

Amount of Each Disbursement this Period

397.02

WORKERS COMP INSURANCE

SUBTOTAL of Disbursements This Page (optional)

597.02

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Auto Owners Insurance

Mailing Address PO Box 30278

City State Zip Code
Lansing MI 48909-7778

Purpose of Disbursement
General Liability Insurance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21948

Date of Disbursement

/ /

Amount of Each Disbursement this Period

210.41

GENERAL LIABILITY INSURANCE

B.

Full Name (Last, First, Middle Initial)
Auto Owners Insurance

Mailing Address PO Box 30278

City State Zip Code
Lansing MI 48909-7778

Purpose of Disbursement
General Liability Insurance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E22285

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1309.92

GENERAL LIABILITY INSURANCE

C.

Full Name (Last, First, Middle Initial)
Julian Babbitt

Mailing Address 30620 Avenida Del Yermo

City State Zip Code
Cathedral City CA 92234-2939

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21809

Date of Disbursement

/ /

Amount of Each Disbursement this Period

700.00

MEALS

SUBTOTAL of Disbursements This Page (optional)

2220.33

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Julian Babbitt	Transaction ID: 90921.E22068 Date of Disbursement																				
Mailing Address 30620 Avenida Del Yermo	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	8		2	0	0	8												
City Cathedral City State CA Zip Code 92234-2939	Amount of Each Disbursement this Period																				
Purpose of Disbursement Reimburse for mileage	<table border="1"> <tr> <td colspan="10">46.93</td> </tr> </table>	46.93																			
46.93																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ REIMBURSE FOR MILEAGE																				
B. Full Name (Last, First, Middle Initial) Alliance Bank	Transaction ID: 90921.E22314 Date of Disbursement																				
Mailing Address 444 Cedar St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	3		2	0	0	8												
City Saint Paul State MN Zip Code 55101-2179	Amount of Each Disbursement this Period																				
Purpose of Disbursement Bank Fee	<table border="1"> <tr> <td colspan="10">67.75</td> </tr> </table>	67.75																			
67.75																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ BANK FEE																				
C. Full Name (Last, First, Middle Initial) Alliance Bank	Transaction ID: 90921.E21705 Date of Disbursement																				
Mailing Address 444 Cedar St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	8		2	0	0	8												
City Saint Paul State MN Zip Code 55101-2179	Amount of Each Disbursement this Period																				
Purpose of Disbursement Interest on Loan Payment	<table border="1"> <tr> <td colspan="10">944.54</td> </tr> </table>	944.54																			
944.54																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ INTEREST ON LOAN PAYMENT																				

SUBTOTAL of Disbursements This Page (optional)

1059.22

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Alliance Bank Mailing Address 444 Cedar St	Transaction ID: 90921.E22362 Date of Disbursement <div> <div>12</div> <div>09</div> <div>2008</div> </div>
City Saint Paul State MN Zip Code 55101-2179 Purpose of Disbursement Bank Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>5.00</div> <div>BANK FEE</div>
B. Full Name (Last, First, Middle Initial) Alliance Bank Mailing Address 444 Cedar St City Saint Paul State MN Zip Code 55101-2179 Purpose of Disbursement Bank Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90921.E22363 Date of Disbursement <div> <div>12</div> <div>09</div> <div>2008</div> </div> Amount of Each Disbursement this Period <div>1.00</div> <div>BANK FEE</div>
C. Full Name (Last, First, Middle Initial) Alliance Bank Mailing Address 444 Cedar St City Saint Paul State MN Zip Code 55101-2179 Purpose of Disbursement Bank Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90921.E22316 Date of Disbursement <div> <div>12</div> <div>10</div> <div>2008</div> </div> Amount of Each Disbursement this Period <div>78.90</div> <div>BANK FEE</div>

SUBTOTAL of Disbursements This Page (optional)

84.90

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Alliance Bank Mailing Address 444 Cedar St	Transaction ID: 90921.E22364 Date of Disbursement <div> <div>12</div> <div>22</div> <div>2008</div> </div>
City Saint Paul State MN Zip Code 55101-2179 Purpose of Disbursement Bank Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>10.00</div> BANK FEE
B. Full Name (Last, First, Middle Initial) Alliance Bank Mailing Address 444 Cedar St City Saint Paul State MN Zip Code 55101-2179 Purpose of Disbursement Bank Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90921.E22332 Date of Disbursement <div> <div>12</div> <div>31</div> <div>2008</div> </div> Amount of Each Disbursement this Period <div>191.44</div> BANK FEE
C. Full Name (Last, First, Middle Initial) Alliance Bank Mailing Address 444 Cedar St City Saint Paul State MN Zip Code 55101-2179 Purpose of Disbursement Bank Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90921.E22333 Date of Disbursement <div> <div>12</div> <div>31</div> <div>2008</div> </div> Amount of Each Disbursement this Period <div>1.00</div> BANK FEE

SUBTOTAL of Disbursements This Page (optional) ►

202.44

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.	Full Name (Last, First, Middle Initial) Jackie Barber	Transaction ID: 90921.E21801 Date of Disbursement 12 / 08 / 2008
	Mailing Address 428 3rd St NE Apt. 201	
	City Washington State DC Zip Code 20002-4950	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement Meals	Category/ Type MEALS
	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) Stacey Barrack	Transaction ID: 90921.E21840 Date of Disbursement 12 / 08 / 2008
	Mailing Address 2575 W Horizon Ridge Pkwy Apt 1618 Apt. 1618	
	City Henderson State NV Zip Code 89052-5934	Amount of Each Disbursement this Period 800.00
	Purpose of Disbursement Meals	Category/ Type MEALS
	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) Adam Bauer	Transaction ID: 90921.E21762 Date of Disbursement 12 / 08 / 2008
	Mailing Address 590 Holley Ave. Apt. 14b	
	City St. Paul State MN Zip Code 55102-	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement Meals	Category/ Type MEALS
	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

1800.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Janet Beihoffer

Mailing Address 16658 Irwindale Way

City Lakeville State MN Zip Code 55044-

Purpose of Disbursement

Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21816

Date of Disbursement

12 / 08 / 2008

Amount of Each Disbursement this Period

450.00

MEALS

B.

Full Name (Last, First, Middle Initial)

T. Ryan Blodgett

Mailing Address PO Box 3
P.O. Box 3

City Orwell State NY Zip Code 13426-0003

Purpose of Disbursement

Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21844

Date of Disbursement

12 / 08 / 2008

Amount of Each Disbursement this Period

750.00

MEALS

C.

Full Name (Last, First, Middle Initial)

John Blue

Mailing Address 122 E Main St

City Girard State OH Zip Code 44420-2603

Purpose of Disbursement

Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21805

Date of Disbursement

12 / 08 / 2008

Amount of Each Disbursement this Period

500.00

MEALS

SUBTOTAL of Disbursements This Page (optional)

1700.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Kevan Bohan

Mailing Address 14108 County Road 51

City State Zip Code
St. Joseph MN 56374-Purpose of Disbursement
Meals

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21811

Date of Disbursement

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

Amount of Each Disbursement this Period

900.00

MEALS

B.

Full Name (Last, First, Middle Initial)
Lance BormanMailing Address 4523 Sangamore Rd Apt 204
Apt. 204City State Zip Code
Bethesda MD 20816-2541Purpose of Disbursement
Meals

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21754

Date of Disbursement

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

Amount of Each Disbursement this Period

500.00

MEALS

C.

Full Name (Last, First, Middle Initial)
Crystal BouzidenMailing Address 840 Vindicator Dr Apt 104
Apt. 104City State Zip Code
Colorado Springs CO 80919-3617Purpose of Disbursement
Meals

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21787

Date of Disbursement

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

Amount of Each Disbursement this Period

500.00

MEALS

SUBTOTAL of Disbursements This Page (optional)

1900.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota**A.**Full Name (Last, First, Middle Initial)
Diana Virginia Bratlie

Mailing Address 16829 Jackpine Way

City Lakeville State MN Zip Code 55044-5579

Purpose of Disbursement
Meals

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21792

Date of Disbursement

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

Amount of Each Disbursement this Period

400.00

MEALS

B.Full Name (Last, First, Middle Initial)
Michael BrittMailing Address 1850 Bassett St
Apt. 1105

City Denver State CO Zip Code 80202-1048

Purpose of Disbursement
Meals

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21824

Date of Disbursement

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

Amount of Each Disbursement this Period

450.00

MEALS

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

Mailing Address 13664 Princeton Cir

City Savage State MN Zip Code 55378-2625

Purpose of Disbursement
Meals

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21825

Date of Disbursement

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

Amount of Each Disbursement this Period

800.00

MEALS

SUBTOTAL of Disbursements This Page (optional)

1650.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Michael Byrne

Mailing Address 13664 Princeton Cir

City
Savage

State
MN

Zip Code
55378-2625

Purpose of Disbursement
Reimburse for mileage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21877

Date of Disbursement

/ /

Amount of Each Disbursement this Period

8.00

REIMBURSE FOR MILEAGE

B.

Full Name (Last, First, Middle Initial)

Michael Byrne

Mailing Address 13664 Princeton Cir

City
Savage

State
MN

Zip Code
55378-2625

Purpose of Disbursement
SEE BELOW: Reimb for meal/air fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21878

Date of Disbursement

/ /

Amount of Each Disbursement this Period

42.00

SEE BELOW: REIMB FOR MEAL-
/AIR FEES

C.

Full Name (Last, First, Middle Initial)

United Airlines

Mailing Address 198 Selleck St

City
Stamford

State
CT

Zip Code
06902-6634

Purpose of Disbursement
BYRNE - AIRLINE FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21880

Date of Disbursement

/ /

Amount of Each Disbursement this Period

30.00

[MEMO ITEM]
MEMO: BYRNE - AIRLINE FEES

SUBTOTAL of Disbursements This Page (optional)

50.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Kwik Trip - Wabasha

Mailing Address 106 Hiawatha Drive

City Wabasha State MN Zip Code 55981-

Purpose of Disbursement

BYRNE - MEAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21879

Date of Disbursement

12 / 12 / 2008

Amount of Each Disbursement this Period

12.00

[MEMO ITEM]

MEMO: BYRNE - MEAL

B.

Full Name (Last, First, Middle Initial)

Gloria Campos

Mailing Address 1101 N 16th St

City Murphysboro State IL Zip Code 62966-2908

Purpose of Disbursement

Reimburse for milage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21581

Date of Disbursement

12 / 05 / 2008

Amount of Each Disbursement this Period

28.75

REIMBURSE FOR MILAGE

C.

Full Name (Last, First, Middle Initial)

Gloria Campos

Mailing Address 1101 N 16th St

City Murphysboro State IL Zip Code 62966-2908

Purpose of Disbursement

Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21799

Date of Disbursement

12 / 08 / 2008

Amount of Each Disbursement this Period

450.00

MEALS

SUBTOTAL of Disbursements This Page (optional)

478.75

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Valerie Caras

Mailing Address PO Box 3999

City State Zip Code
Wilmington DE 19807-0999

Purpose of Disbursement
Reimburse for mileage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21554

Date of Disbursement

/ /

Amount of Each Disbursement this Period

49.85

REIMBURSE FOR MILEAGE

B.

Full Name (Last, First, Middle Initial)
Valerie Caras

Mailing Address PO Box 3999

City State Zip Code
Wilmington DE 19807-0999

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21852

Date of Disbursement

/ /

Amount of Each Disbursement this Period

450.00

MEALS

C.

Full Name (Last, First, Middle Initial)
Ronald Wayne Carey

Mailing Address 2638 146th ave ne

City State Zip Code
Ham Lake MN 55304-

Purpose of Disbursement
Reimburse for mileage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E24546

Date of Disbursement

/ /

Amount of Each Disbursement this Period

367.57

REIMBURSE FOR MILEAGE

SUBTOTAL of Disbursements This Page (optional)

867.42

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Ronald Wayne Carey	Transaction ID: 90921.E24547 Date of Disbursement																				
Mailing Address 2638 146th ave ne	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	9		2	0	0	8												
City Ham Lake State MN Zip Code 55304- Purpose of Disbursement SEE BELOW: Reimburse for phone/taxi Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>4</td><td>1</td><td>6</td><td>.</td><td>4</td><td>7</td> </tr> </table>	4	1	6	.	4	7														
4	1	6	.	4	7																
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SEE BELOW: REIMBURSE FOR PHONE/TAXI <div>Category/Type</div>																				
B. Full Name (Last, First, Middle Initial) Cab Company Of D.c. Inc	Transaction ID: 90921.E21712 Date of Disbursement																				
Mailing Address 1636 Bladensburg Road Ne	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	9		2	0	0	8												
City Washington State DC Zip Code 20002- Purpose of Disbursement CAREY - TAXI SERVICE Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>1</td><td>1</td><td>1</td><td>.</td><td>5</td><td>0</td> </tr> </table>	1	1	1	.	5	0														
1	1	1	.	5	0																
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: CAREY - TAXI SERVICE <div>Category/Type</div>																				
C. Full Name (Last, First, Middle Initial) Sprint	Transaction ID: 90921.E21711 Date of Disbursement																				
Mailing Address Po Box 152046	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	9		2	0	0	8												
City Irving State TX Zip Code 75015- Purpose of Disbursement CAREY - CELL PHONE Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>3</td><td>0</td><td>4</td><td>.</td><td>9</td><td>7</td> </tr> </table>	3	0	4	.	9	7														
3	0	4	.	9	7																
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: CAREY - CELL PHONE <div>Category/Type</div>																				

SUBTOTAL of Disbursements This Page (optional)

416.47

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Aaron Catron Mailing Address 3 Hundley Dr	Transaction ID: 90921.E21761 Date of Disbursement <div> <div>12</div> <div>08</div> <div>2008</div> </div>
City Saint Joseph State MO Zip Code 64506-2118 Purpose of Disbursement Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>500.00</div> MEALS
B. Full Name (Last, First, Middle Initial) Alicia Collins Mailing Address 1531 Oxford Ct City Cranberry Twp State PA Zip Code 16066-7116 Purpose of Disbursement Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90921.E21765 Date of Disbursement <div> <div>12</div> <div>08</div> <div>2008</div> </div> Amount of Each Disbursement this Period <div>500.00</div> MEALS
C. Full Name (Last, First, Middle Initial) FLS Connect Mailing Address 7300 Hudson Blvd N Ste 270 City Saint Paul State MN Zip Code 55128-7143 Purpose of Disbursement Party Fundraising Telemarketing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90921.E21516 Date of Disbursement <div> <div>12</div> <div>05</div> <div>2008</div> </div> Amount of Each Disbursement this Period <div>4763.32</div> PARTY FUNDRAISING TELEMA- RKETING

SUBTOTAL of Disbursements This Page (optional) ►

5763.32

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 90 / 322

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
FLS Connect

Mailing Address 7300 Hudson Blvd N Ste 270

City Saint Paul State MN Zip Code 55128-7143

Purpose of Disbursement
Party Fundraising Telemarketing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21734

Date of Disbursement

12 / 09 / 2008

Amount of Each Disbursement this Period

53934.19

PARTY FUNDRAISING TELEMA-
RKETING

B.

Full Name (Last, First, Middle Initial)
FLS Connect

Mailing Address 7300 Hudson Blvd N Ste 270

City Saint Paul State MN Zip Code 55128-7143

Purpose of Disbursement
Party Fundraising Telemarketing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E22095

Date of Disbursement

12 / 18 / 2008

Amount of Each Disbursement this Period

66210.29

PARTY FUNDRAISING TELEMA-
RKETING

C.

Full Name (Last, First, Middle Initial)
Tristan Cook

Mailing Address 2623 Pennington Cir

City Fitchburg State WI Zip Code 53711-5419

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21848

Date of Disbursement

12 / 08 / 2008

Amount of Each Disbursement this Period

450.00

MEALS

SUBTOTAL of Disbursements This Page (optional)

120594.48

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Emily Cornell

Mailing Address 3412 Parr Rd

City State Zip Code
Grapevine TX 76051-5613

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21794

Date of Disbursement

/ /

Amount of Each Disbursement this Period

600.00

MEALS

B.

Full Name (Last, First, Middle Initial)
Dana Crosby

Mailing Address 37 Front St

City State Zip Code
Norwich NY 13815-1825

Purpose of Disbursement
SEE BELOW: Reimburse for phone/comp

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21204

Date of Disbursement

/ /

Amount of Each Disbursement this Period

299.37

SEE BELOW: REIMBURSE FOR
PHONE/COMP

C.

Full Name (Last, First, Middle Initial)
Walmart - Fargo

Mailing Address 4731 13th Ave S

City State Zip Code
Fargo ND 58103-7269

Purpose of Disbursement
CROSBY - COMPUTER STRIP

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21206

Date of Disbursement

/ /

Amount of Each Disbursement this Period

96.72

[MEMO ITEM]

MEMO: CROSBY - COMPUTER
STRIP

SUBTOTAL of Disbursements This Page (optional)

899.37

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Verizon Wireless

Mailing Address P.O. Box 790422

City State Zip Code
St. Louis MO 63179-

Purpose of Disbursement
CROSBY - CELL PHONE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21205

Date of Disbursement

/ /

Amount of Each Disbursement this Period

202.65

[MEMO ITEM]

MEMO: CROSBY - CELL PHONE

B.

Full Name (Last, First, Middle Initial)
Dana Crosby

Mailing Address 37 Front St

City State Zip Code
Norwich NY 13815-1825

Purpose of Disbursement
SEE BELOW: Reimburse for fuel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21582

Date of Disbursement

/ /

Amount of Each Disbursement this Period

331.87

SEE BELOW: REIMBURSE FOR
FUEL

C.

Full Name (Last, First, Middle Initial)
Farmers Union Oil Company

Mailing Address 201 S Railway St

City State Zip Code
Mahnomon MN 56557-4724

Purpose of Disbursement
CROSBY - FUEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21585

Date of Disbursement

/ /

Amount of Each Disbursement this Period

20.00

[MEMO ITEM]

MEMO: CROSBY - FUEL

SUBTOTAL of Disbursements This Page (optional)

331.87

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Holiday Gas

Mailing Address 1501 3rd St E

City Thief River Falls State MN Zip Code 56701-2435

Purpose of Disbursement
CROSBY - FUEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21583

Date of Disbursement

/ /

Amount of Each Disbursement this Period

19.22

[MEMO ITEM]

MEMO: CROSBY - FUEL

B.

Full Name (Last, First, Middle Initial)
Pennington Main

Mailing Address 220 Main Ave S

City Thief River Falls State MN Zip Code 56701-2824

Purpose of Disbursement
CROSBY - FUEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21586

Date of Disbursement

/ /

Amount of Each Disbursement this Period

20.00

[MEMO ITEM]

MEMO: CROSBY - FUEL

C.

Full Name (Last, First, Middle Initial)
Valley Oil

Mailing Address 809 Washington Avenue

City Argyle State MN Zip Code 56713-

Purpose of Disbursement
CROSBY - FUEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21584

Date of Disbursement

/ /

Amount of Each Disbursement this Period

16.66

[MEMO ITEM]

MEMO: CROSBY - FUEL

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Orbitz And Go

Mailing Address 200 S Wacker Dr

City Chicago State IL Zip Code 60606-5829

Purpose of Disbursement
CROSBY - FLIGHT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21587

Date of Disbursement

12 / 05 / 2008

Amount of Each Disbursement this Period

255.99

[MEMO ITEM]

MEMO: CROSBY - FLIGHT

B.

Full Name (Last, First, Middle Initial)

Eric Cullen

Mailing Address 3025 S Columbus St

City Arlington State VA Zip Code 22206-1609

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21795

Date of Disbursement

12 / 08 / 2008

Amount of Each Disbursement this Period

500.00

MEALS

C.

Full Name (Last, First, Middle Initial)

Matthew Dean

Mailing Address 14 Highway 96 E

City Dellwood State MN Zip Code 55110-1408

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21758

Date of Disbursement

12 / 08 / 2008

Amount of Each Disbursement this Period

500.00

MEALS

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 95 / 322

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Pinnacle Direct, Inc.

Mailing Address 15260 113th Street North

City Stillwater State MN Zip Code 55082-

Purpose of Disbursement
Party Fundraising Mailhouse/non-can
Candidate Name

Category/
Type

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

Transaction ID: 90921.E21873
Date of Disbursement

/ /

Amount of Each Disbursement this Period

2935.00

PARTY FUNDRAISING MAILHOUSE/NON-CAN

B.

Full Name (Last, First, Middle Initial)
Pinnacle Direct, Inc.

Mailing Address 15260 113th Street North

City Stillwater State MN Zip Code 55082-

Purpose of Disbursement
Party Fundraising Mailhouse/non-can
Candidate Name

Category/
Type

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

Transaction ID: 90921.E22094
Date of Disbursement

/ /

Amount of Each Disbursement this Period

1485.00

PARTY FUNDRAISING MAILHOUSE/NON-CAN

C.

Full Name (Last, First, Middle Initial)
Damon Dolton

Mailing Address 491 Hickory Ln N

City Oakdale State MN Zip Code 55128-7036

Purpose of Disbursement
Meals
Candidate Name

Category/
Type

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

Transaction ID: 90921.E21788
Date of Disbursement

/ /

Amount of Each Disbursement this Period

250.00

MEALS

SUBTOTAL of Disbursements This Page (optional)

4670.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 96 / 322

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota**A.**

Full Name (Last, First, Middle Initial)

Jake Eaton

Mailing Address 1714 Warehouse Ave

City
HelenaState
MTZip Code
59601-1600Purpose of Disbursement
Meals

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21802

Date of Disbursement

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

Amount of Each Disbursement this Period

500.00

MEALS

B.

Full Name (Last, First, Middle Initial)

Jake Eaton

Mailing Address 1714 Warehouse Ave

City
HelenaState
MTZip Code
59601-1600Purpose of Disbursement
SEE BELOW: Reimburse for fuel

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21875

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	9		2	0	0	8

Amount of Each Disbursement this Period

136.00

SEE BELOW: REIMBURSE FOR
FUEL**C.**

Full Name (Last, First, Middle Initial)

Landers Interstate Conoco

Mailing Address 2210 N 12th St

City
FargoState
NDZip Code
58503-Purpose of Disbursement
EATON - FUEL

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22054

Date of Disbursement

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

Amount of Each Disbursement this Period

36.83

[MEMO ITEM]
MEMO: EATON - FUEL**SUBTOTAL** of Disbursements This Page (optional)

636.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Broadway Flying J

Mailing Address 6505 Jackrabbit Ln

City State Zip Code
Belgrade MT 59714-8990

Purpose of Disbursement
EATON - FUEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22055

Date of Disbursement

/ /

Amount of Each Disbursement this Period

42.04

[MEMO ITEM]

MEMO: EATON - FUEL

B.

Full Name (Last, First, Middle Initial)
Holiday Gas - Billings

Mailing Address 785 S 20th St W

City State Zip Code
Billings MT 59102-6463

Purpose of Disbursement
EATON - FUEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22056

Date of Disbursement

/ /

Amount of Each Disbursement this Period

24.99

[MEMO ITEM]

MEMO: EATON - FUEL

C.

Full Name (Last, First, Middle Initial)
Town Pump

Mailing Address 1210 S Haynes Ave

City State Zip Code
Miles City MT 59301-5730

Purpose of Disbursement
EATON - FUEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22057

Date of Disbursement

/ /

Amount of Each Disbursement this Period

32.14

[MEMO ITEM]

MEMO: EATON - FUEL

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Mike Eaton

Mailing Address 1714 Warehouse Ave

City
Helena

State
MT

Zip Code
59601-1600

Purpose of Disbursement
Reimburse for mileage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21559

Date of Disbursement

12 / 05 / 2008

Amount of Each Disbursement this Period

230.70

REIMBURSE FOR MILEAGE

B.

Full Name (Last, First, Middle Initial)

Frank Egeler

Mailing Address 1823 S 16th St

City
Escanaba

State
MI

Zip Code
49829-2035

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21797

Date of Disbursement

12 / 08 / 2008

Amount of Each Disbursement this Period

350.00

MEALS

C.

Full Name (Last, First, Middle Initial)

Kimberly K. Ekmark

Mailing Address 9840 78th St S

City
Cottage Grove

State
MN

Zip Code
55016-5229

Purpose of Disbursement
Reimburse for mileage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21549

Date of Disbursement

12 / 04 / 2008

Amount of Each Disbursement this Period

100.96

REIMBURSE FOR MILEAGE

SUBTOTAL of Disbursements This Page (optional)

681.66

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Kimberly K. Ekmark

Mailing Address 9840 78th St S

City State Zip Code
Cottage Grove MN 55016-5229

Purpose of Disbursement
SEE BELOW: Reimburse for phone

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E22080

Date of Disbursement

/ /

Amount of Each Disbursement this Period

115.43

SEE BELOW: REIMBURSE FOR
PHONE

B.

Full Name (Last, First, Middle Initial)
Verizon Wireless

Mailing Address P.O. Box 790422

City State Zip Code
St. Louis MO 63179-

Purpose of Disbursement
EKMARK - CELL PHONE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E22081

Date of Disbursement

/ /

Amount of Each Disbursement this Period

115.43

[MEMO ITEM]
MEMO: EKMARK - CELL PHONE

C.

Full Name (Last, First, Middle Initial)
Visa Elan

Mailing Address 7300 Chapman Hwy

City State Zip Code
Knoxville TN 37920-

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E22315

Date of Disbursement

/ /

Amount of Each Disbursement this Period

100.00

CREDIT CARD PROCESSING FEE

SUBTOTAL of Disbursements This Page (optional)

215.43

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 100 / 322

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.	Full Name (Last, First, Middle Initial) Visa Elan	Transaction ID: 90921.E22317 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 8
	Mailing Address 7300 Chapman Hwy	
	City Knoxville State TN Zip Code 37920-	Amount of Each Disbursement this Period 50.00
	Purpose of Disbursement Credit Card Processing Fee	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		CREDIT CARD PROCESSING FEE
B.	Full Name (Last, First, Middle Initial) Visa Elan	Transaction ID: 90921.E22436 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 8 / 2 0 0 8
	Mailing Address 7300 Chapman Hwy	
	City Knoxville State TN Zip Code 37920-	Amount of Each Disbursement this Period 50.00
	Purpose of Disbursement Credit Card Processing Fee-Recount	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		CREDIT CARD PROCESSING FE- E-RECOUNT
C.	Full Name (Last, First, Middle Initial) Visa Elan	Transaction ID: 90921.E22331 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 2 / 2 0 0 8
	Mailing Address 7300 Chapman Hwy	
	City Knoxville State TN Zip Code 37920-	Amount of Each Disbursement this Period 100.00
	Purpose of Disbursement Credit Card Processing Fee-Recount	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		CREDIT CARD PROCESSING FE- E-RECOUNT

SUBTOTAL of Disbursements This Page (optional)

200.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Bridget Elliott

Mailing Address 15953 NE 83rd Way

City State Zip Code
Redmond WA 98052-3892

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21781

Date of Disbursement

/ /

Amount of Each Disbursement this Period

300.00

MEALS

B.

Full Name (Last, First, Middle Initial)
Robert Engstrom

Mailing Address 317 S Pickett St

City State Zip Code
Alexandria VA 22304-4703

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21836

Date of Disbursement

/ /

Amount of Each Disbursement this Period

600.00

MEALS

C.

Full Name (Last, First, Middle Initial)
Nick Erickson

Mailing Address 9344 134th Street

City State Zip Code
Savage MN 55378-

Purpose of Disbursement
Reimburse for mileage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E23506

Date of Disbursement

/ /

Amount of Each Disbursement this Period

434.07

REIMBURSE FOR MILEAGE

SUBTOTAL of Disbursements This Page (optional)

1334.07

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Nick Erickson

Mailing Address 9344 134th Street

City State Zip Code
Savage MN 55378-

Purpose of Disbursement
SEE BELOW: Reimburse for meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E23507

Date of Disbursement

/ /

Amount of Each Disbursement this Period

156.09

SEE BELOW: REIMBURSE FOR MEALS

B.

Full Name (Last, First, Middle Initial)
Burger King

Mailing Address 124 NE 4th St

City State Zip Code
Grand Rapids MN 55744-2840

Purpose of Disbursement
ERICKSON - MEAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21534

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3.63

[MEMO ITEM]

MEMO: ERICKSON - MEAL

C.

Full Name (Last, First, Middle Initial)
Green Mill Restaurant

Mailing Address 7857 Hemingway Ave S

City State Zip Code
Cottage Grove MN 55016-1852

Purpose of Disbursement
ERICKSON - MEAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21532

Date of Disbursement

/ /

Amount of Each Disbursement this Period

134.30

[MEMO ITEM]

MEMO: ERICKSON - MEAL

SUBTOTAL of Disbursements This Page (optional)

156.09

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 103 / 322

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Applebees Restaurant	Transaction ID: 90921.E21535 Date of Disbursement
Mailing Address 1405 Highway 33 S	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 5 / 2 0 0 8</div> </div>
City Cloquet State MN Zip Code 55720-2626	Amount of Each Disbursement this Period <div>12.53</div>
Purpose of Disbursement ERICKSON - MEAL Candidate Name	<div> <div>Category/Type</div> <div></div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: ERICKSON - MEAL
B. Full Name (Last, First, Middle Initial) McDonalds Restaurant	Transaction ID: 90921.E21533 Date of Disbursement
Mailing Address 100 Garfield St S	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 5 / 2 0 0 8</div> </div>
City Cambridge State MN Zip Code 55008-1761	Amount of Each Disbursement this Period <div>5.63</div>
Purpose of Disbursement ERICKSON - MEAL Candidate Name	<div> <div>Category/Type</div> <div></div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: ERICKSON - MEAL
C. Full Name (Last, First, Middle Initial) Michael Escoto	Transaction ID: 90921.E21826 Date of Disbursement
Mailing Address 9542 Soaring Oaks Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 8 / 2 0 0 8</div> </div>
City Elk Grove State CA Zip Code 95758-1022	Amount of Each Disbursement this Period <div>750.00</div>
Purpose of Disbursement Meals Candidate Name	<div> <div>Category/Type</div> <div></div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	MEALS

SUBTOTAL of Disbursements This Page (optional)

750.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Chris Faulker

Mailing Address 72801 Sandy Court

City Granger State IN Zip Code 46530-

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21784

Date of Disbursement

12 / 08 / 2008

Amount of Each Disbursement this Period

300.00

MEALS

B.

Full Name (Last, First, Middle Initial)

Chad Fauskee

Mailing Address 834 Lyon St NE

City Grand Rapids State MI Zip Code 49503-3560

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21783

Date of Disbursement

12 / 08 / 2008

Amount of Each Disbursement this Period

900.00

MEALS

C.

Full Name (Last, First, Middle Initial)

Federal Express

Mailing Address Po Box 1140

City Memphis State TN Zip Code 38101-

Purpose of Disbursement
Party Shipping

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21200

Date of Disbursement

11 / 25 / 2008

Amount of Each Disbursement this Period

23.19

PARTY SHIPPING

SUBTOTAL of Disbursements This Page (optional)

1223.19

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota**A.**

Full Name (Last, First, Middle Initial)

Adam Feldman

Mailing Address 6001 Moon St NE Apt 1224
Apt. 1224

City Albuquerque State NM Zip Code 87111-1453

Purpose of Disbursement
Meals

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21763

Date of Disbursement

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

Amount of Each Disbursement this Period

400.00

MEALS

B.

Full Name (Last, First, Middle Initial)

Adam Fico

Mailing Address 204 E Capitol St NE

City Washington State DC Zip Code 20003-1036

Purpose of Disbursement
Reimburse for milage

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21572

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	5		2	0	0	8

Amount of Each Disbursement this Period

20.35

REIMBURSE FOR MILAGE

C.

Full Name (Last, First, Middle Initial)

Adam Fico

Mailing Address 204 E Capitol St NE

City Washington State DC Zip Code 20003-1036

Purpose of Disbursement
Meals

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21753

Date of Disbursement

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

Amount of Each Disbursement this Period

850.00

MEALS

SUBTOTAL of Disbursements This Page (optional)

1270.35

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
American Express Financial

Mailing Address P.o. Box 5167

City State Zip Code
Westborough MA 01581-

Purpose of Disbursement
SEE BELOW: Amex Disbursements

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E23551

Date of Disbursement

/ /

Amount of Each Disbursement this Period

0.00

SEE BELOW: AMEX DISBURSEMENTS

B.

Full Name (Last, First, Middle Initial)
Billys On Grand

Mailing Address 857 Grand Ave

City State Zip Code
Saint Paul MN 55105-3398

Purpose of Disbursement
AMEX-MEALS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E23556

Date of Disbursement

/ /

Amount of Each Disbursement this Period

360.95

[MEMO ITEM]

MEMO: AMEX-MEALS

C.

Full Name (Last, First, Middle Initial)
Super 8 Motel

Mailing Address 14341 Edgewood Drive N.

City State Zip Code
Baxter MN 56425-

Purpose of Disbursement
AMEX-LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E23585

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1703.50

[MEMO ITEM]

MEMO: AMEX-LODGING

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

American Airlines

Mailing Address P.O. Box 619612 MD 2400 CPII

City State Zip Code
Bedford TX 76021-

Purpose of Disbursement
AMEX-AIRLINE TICKET

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E23554

Date of Disbursement

/ /

Amount of Each Disbursement this Period

425.50

[MEMO ITEM]

MEMO: AMEX-AIRLINE TICKET

B.

Full Name (Last, First, Middle Initial)

Delta Airlines

Mailing Address 1030 Delta Blvd

City State Zip Code
Atlanta GA 30354-1989

Purpose of Disbursement
AMEX-LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E23565

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1115.00

[MEMO ITEM]

MEMO: AMEX-LODGING

C.

Full Name (Last, First, Middle Initial)

Northwest Airlines

Mailing Address 5101 Northwest Dr

City State Zip Code
Saint Paul MN 55111-3027

Purpose of Disbursement
AMEX-LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E23578

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4963.51

[MEMO ITEM]

MEMO: AMEX-LODGING

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Sun Country Airlines	Transaction ID: 90921.E23584 Date of Disbursement																				
Mailing Address 1300 Mendota Heights	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	5		2	0	0	8												
City Mendota Heights State MN Zip Code 55120-	Amount of Each Disbursement this Period																				
Purpose of Disbursement AMEX-LODGING	<table border="1"> <tr> <td colspan="10">279.00</td> </tr> </table>	279.00																			
279.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
[MEMO ITEM] MEMO: AMEX-LODGING																					
B. Full Name (Last, First, Middle Initial) United Airlines	Transaction ID: 90921.E23587 Date of Disbursement																				
Mailing Address 198 Selleck St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	5		2	0	0	8												
City Stamford State CT Zip Code 06902-6634	Amount of Each Disbursement this Period																				
Purpose of Disbursement AMEX-AIRFARE	<table border="1"> <tr> <td colspan="10">300.00</td> </tr> </table>	300.00																			
300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
[MEMO ITEM] MEMO: AMEX-AIRFARE																					
C. Full Name (Last, First, Middle Initial) Days Inn Airport	Transaction ID: 90921.E23564 Date of Disbursement																				
Mailing Address 1901 Killebrew Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	5		2	0	0	8												
City Bloomington State MN Zip Code 55425-	Amount of Each Disbursement this Period																				
Purpose of Disbursement AMEX-LODGING	<table border="1"> <tr> <td colspan="10">912.57</td> </tr> </table>	912.57																			
912.57																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
[MEMO ITEM] MEMO: AMEX-LODGING																					

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Airtran Airtran Airways

Mailing Address 1800 Phoenix Blvd Ste 104

City Atlanta State GA Zip Code 30349-

Purpose of Disbursement
AMEX-AIRFARE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E23553

Date of Disbursement

11 / 25 / 2008

Amount of Each Disbursement this Period

1342.00

[MEMO ITEM]

MEMO: AMEX-AIRFARE

B.

Full Name (Last, First, Middle Initial)
US Airways

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034-

Purpose of Disbursement
AMEX-LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E23589

Date of Disbursement

11 / 25 / 2008

Amount of Each Disbursement this Period

2410.49

[MEMO ITEM]

MEMO: AMEX-LODGING

C.

Full Name (Last, First, Middle Initial)
Americinn

Mailing Address 1475 Darling Drive

City Worthington State MN Zip Code 56187-

Purpose of Disbursement
AMEX-LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E23561

Date of Disbursement

11 / 25 / 2008

Amount of Each Disbursement this Period

3143.99

[MEMO ITEM]

MEMO: AMEX-LODGING

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

RIM Corp Blackberry

Mailing Address 295 Phillip Street Ontario, Canada
Ontario, Canada N2L 3W8

City State Zip Code

Purpose of Disbursement
AMEX-LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E23581

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4288.94

[MEMO ITEM]

MEMO: AMEX-LODGING

B.

Full Name (Last, First, Middle Initial)

Budget Car Rental

Mailing Address 4650 Glumack Dr

City State Zip Code
Saint Paul MN 55111-3078

Purpose of Disbursement
AMEX-CAR RENTAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E23557

Date of Disbursement

/ /

Amount of Each Disbursement this Period

66123.69

[MEMO ITEM]

MEMO: AMEX-CAR RENTAL

C.

Full Name (Last, First, Middle Initial)

Country Inn

Mailing Address 18894 Dodge Street

City State Zip Code
Elk River MN 55330-

Purpose of Disbursement
AMEX-LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E23563

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4048.33

[MEMO ITEM]

MEMO: AMEX-LODGING

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
American Express Financial

Mailing Address P.o. Box 5167

City State Zip Code
Westborough MA 01581-

Purpose of Disbursement
AMEX REWARD CREDITS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E25875

Date of Disbursement

/ /

Amount of Each Disbursement this Period

-22.95

[MEMO ITEM]

MEMO: AMEX REWARD CREDITS

B.

Full Name (Last, First, Middle Initial)
Green Gables

Mailing Address 303 Sheridan St W

City State Zip Code
Lanesboro MN 55949-9761

Purpose of Disbursement
AMEX-LODGING REFUND 11/12

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E23570

Date of Disbursement

/ /

Amount of Each Disbursement this Period

-1267.81

[MEMO ITEM]

MEMO: AMEX-LODGING REFUND
11/12

C.

Full Name (Last, First, Middle Initial)
Hilton Garden Inn

Mailing Address 411 Minnesota St

City State Zip Code
Saint Paul MN 55101-1703

Purpose of Disbursement
AMEX-LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E23573

Date of Disbursement

/ /

Amount of Each Disbursement this Period

239.58

[MEMO ITEM]

MEMO: AMEX-LODGING

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 112 / 322

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.	Full Name (Last, First, Middle Initial) Hampton Inn	Transaction ID: 90921.E23572 Date of Disbursement 11 / 25 / 2008
	Mailing Address 1019 Paul Bunyan Dr S	
	City Bemidji State MN Zip Code 56601-3223	Amount of Each Disbursement this Period 4003.07
	Purpose of Disbursement AMEX-LODGING Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Capital Hilton	Transaction ID: 90921.E23558 Date of Disbursement 11 / 25 / 2008
	Mailing Address 1001 16th St NW	
	City Washington State DC Zip Code 20036-5701	Amount of Each Disbursement this Period 256.48
	Purpose of Disbursement AMEX-LODGING Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Radisson Hotel Duluth	Transaction ID: 90921.E23580 Date of Disbursement 11 / 25 / 2008
	Mailing Address 505 West Superior Street	
	City Duluth State MN Zip Code 55802-	Amount of Each Disbursement this Period 1297.32
	Purpose of Disbursement AMEX-LODGING Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
SUBTOTAL of Disbursements This Page (optional)		0.00
TOTAL This Period (last page this line number only)		

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Godaddy

Mailing Address 14455 N Hayden Rd Ste 219
SUITE 219

City State Zip Code
Scottsdale AZ 85260-6947

Purpose of Disbursement
AMEX-LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E23569

Date of Disbursement

/ /

Amount of Each Disbursement this Period

20.38

[MEMO ITEM]

MEMO: AMEX-LODGING

B.

Full Name (Last, First, Middle Initial)
Holiday Inn Woodbury

Mailing Address 9840 Norma Lane

City State Zip Code
Woodbury MN 55125-

Purpose of Disbursement
AMEX-LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E23574

Date of Disbursement

/ /

Amount of Each Disbursement this Period

15916.43

[MEMO ITEM]

MEMO: AMEX-LODGING

C.

Full Name (Last, First, Middle Initial)
Ramada - Rochester

Mailing Address 1517 16th Sw

City State Zip Code
Rochester MN 55902-

Purpose of Disbursement
AMEX-LODGING REFUND 11/17

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E25399

Date of Disbursement

/ /

Amount of Each Disbursement this Period

-13.90

[MEMO ITEM]

MEMO: AMEX-LODGING REFUND
11/17

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Marriott International

Mailing Address P.o. Box 406887

City Atlanta State GA Zip Code 30384-6887

Purpose of Disbursement
AMEX-LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E23577

Date of Disbursement

11 / 25 / 2008

Amount of Each Disbursement this Period

6385.79

[MEMO ITEM]

MEMO: AMEX-LODGING

B.

Full Name (Last, First, Middle Initial)
Best Western - Kelly Inn

Mailing Address 100 4th Ave S

City St Cloud State MN Zip Code 56301-

Purpose of Disbursement
AMEX-LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E23555

Date of Disbursement

11 / 25 / 2008

Amount of Each Disbursement this Period

18081.73

[MEMO ITEM]

MEMO: AMEX-LODGING

C.

Full Name (Last, First, Middle Initial)
Orbitz And Go

Mailing Address 200 S Wacker Dr

City Chicago State IL Zip Code 60606-5829

Purpose of Disbursement
AMEX-TICKETING FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E23579

Date of Disbursement

11 / 25 / 2008

Amount of Each Disbursement this Period

69.90

[MEMO ITEM]

MEMO: AMEX-TICKETING FEE

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Edgewater Resort & Waterpark

Mailing Address 2400 London Rd

City Duluth State MN Zip Code 55812-2221

Purpose of Disbursement
AMEX-LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E23567

Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

MEMO: AMEX-LODGING

B.

Full Name (Last, First, Middle Initial)
UPS Store

Mailing Address 3432 Denmark Ave

City Eagan State MN Zip Code 55123-

Purpose of Disbursement
AMEX-PARTY PRINTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E23588

Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

MEMO: AMEX-PARTY PRINTING

C.

Full Name (Last, First, Middle Initial)
Staybridge Suite

Mailing Address 7821 Elm Creek Blvd N

City Maple Grove State MN Zip Code 55369-7023

Purpose of Disbursement
AMEX-LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E23583

Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

MEMO: AMEX-LODGING

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Comfort Suites	Transaction ID: 90921.E23560 Date of Disbursement																				
Mailing Address 6440 Hwy 10 Nw	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	5		2	0	0	8												
City Ramsey State MN Zip Code 55303-	Amount of Each Disbursement this Period																				
Purpose of Disbursement AMEX-LODGING Candidate Name	<table border="1"> <tr> <td colspan="10">1702.53</td> </tr> </table>	1702.53																			
1702.53																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Comfort Suites	Transaction ID: 90921.E25928 Date of Disbursement																				
Mailing Address 6440 Hwy 10 Nw	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	5		2	0	0	8												
City Ramsey State MN Zip Code 55303-	Amount of Each Disbursement this Period																				
Purpose of Disbursement AMEX-LODGING Candidate Name	<table border="1"> <tr> <td colspan="10">346.58</td> </tr> </table>	346.58																			
346.58																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Embassy Suites	Transaction ID: 90921.E23568 Date of Disbursement																				
Mailing Address 7901 34th Ave S	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	5		2	0	0	8												
City Minneapolis State MN Zip Code 55425-1605	Amount of Each Disbursement this Period																				
Purpose of Disbursement AMEX-LODGING Candidate Name	<table border="1"> <tr> <td colspan="10">1503.47</td> </tr> </table>	1503.47																			
1503.47																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.	Full Name (Last, First, Middle Initial) Towneplace Suites			Transaction ID: 90921.E23586 Date of Disbursement MM / DD / YYYY 11 / 25 / 2008	
	Mailing Address 1400 Zarthan Ave S				
	City Saint Louis Park	State MN	Zip Code 55416-1419	Amount of Each Disbursement this Period 58.65	
	Purpose of Disbursement AMEX-LODGING		Category/ Type	[MEMO ITEM] MEMO: AMEX-LODGING	
	Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:					
B.	Full Name (Last, First, Middle Initial) Adobe Systems Inc			Transaction ID: 90921.E25876 Date of Disbursement MM / DD / YYYY 11 / 25 / 2008	
	Mailing Address 345 Park Ave				
	City San Jose	State CA	Zip Code 95110-2704	Amount of Each Disbursement this Period 749.69	
	Purpose of Disbursement COMPUTER SOFTWARE		Category/ Type	[MEMO ITEM] MEMO: COMPUTER SOFTWARE	
	Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:					
C.	Full Name (Last, First, Middle Initial) Cheap Tickets			Transaction ID: 90921.E23559 Date of Disbursement MM / DD / YYYY 11 / 25 / 2008	
	Mailing Address 1440 Kapiolani Blvd Ste 800				
	City Honolulu	State HI	Zip Code 96814-3613	Amount of Each Disbursement this Period 77.46	
	Purpose of Disbursement AMEX-BOOKING FEES		Category/ Type	[MEMO ITEM] MEMO: AMEX-BOOKING FEES	
	Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:					

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
 Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Downtowner Woodfire Grill	Transaction ID: 90921.E23566 Date of Disbursement
Mailing Address 253 West 7th Street	<div> <div>11</div> <div>25</div> <div>2008</div> </div>
City Saint Paul State MN Zip Code 55102-	Amount of Each Disbursement this Period <div>21.75</div>
Purpose of Disbursement AMEX-LODGING Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: AMEX-LODGING
B. Full Name (Last, First, Middle Initial) American Express Financial	Transaction ID: 90921.E21946 Date of Disbursement
Mailing Address P.o. Box 5167	<div> <div>11</div> <div>26</div> <div>2008</div> </div>
City Westborough State MA Zip Code 01581-	Amount of Each Disbursement this Period <div>1622.75</div>
Purpose of Disbursement E-Merchant Fees Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	E-MERCHANT FEES
C. Full Name (Last, First, Middle Initial) American Express Financial	Transaction ID: 90921.E22322 Date of Disbursement
Mailing Address P.o. Box 5167	<div> <div>12</div> <div>23</div> <div>2008</div> </div>
City Westborough State MA Zip Code 01581-	Amount of Each Disbursement this Period <div>4.95</div>
Purpose of Disbursement E-Merchant Fees Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	E-MERCHANT FEES

SUBTOTAL of Disbursements This Page (optional)

1627.70

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
American Express Financial

Mailing Address P.o. Box 5167

City State Zip Code
Westborough MA 01581-

Purpose of Disbursement
E-Merchant Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E22323

Date of Disbursement

12 / 31 / 2008

Amount of Each Disbursement this Period

952.41

E-MERCHANT FEE

B.

Full Name (Last, First, Middle Initial)
Luke Fischer

Mailing Address 717 Marie Ct

City State Zip Code
Delano MN 55328-8835

Purpose of Disbursement
Reimburse for milage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21538

Date of Disbursement

12 / 05 / 2008

Amount of Each Disbursement this Period

755.63

REIMBURSE FOR MILAGE

C.

Full Name (Last, First, Middle Initial)
James Fitzpatrick

Mailing Address 2811 Oak Trail Ct

City State Zip Code
Arlington TX 76016-

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E24452

Date of Disbursement

12 / 08 / 2008

Amount of Each Disbursement this Period

650.00

MEALS

SUBTOTAL of Disbursements This Page (optional)

2358.04

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Dorothy Fleming

Mailing Address 3101 Wendhurst Ave

City State Zip Code
St Anthony MN 55418-1725

Purpose of Disbursement
Reimburse for Mileage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E22302

Date of Disbursement

/ /

Amount of Each Disbursement this Period

803.65

REIMBURSE FOR MILEAGE

B.

Full Name (Last, First, Middle Initial)
Heather Flick

Mailing Address PO Box 1034

City State Zip Code
Belvedere Tiburon CA 94920-4034

Purpose of Disbursement
Reimburse for milage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21553

Date of Disbursement

/ /

Amount of Each Disbursement this Period

105.05

REIMBURSE FOR MILAGE

C.

Full Name (Last, First, Middle Initial)
Heather Flick

Mailing Address PO Box 1034

City State Zip Code
Belvedere Tiburon CA 94920-4034

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21829

Date of Disbursement

/ /

Amount of Each Disbursement this Period

450.00

MEALS

SUBTOTAL of Disbursements This Page (optional)

1358.70

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 121 / 322

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Derek Flowers	Transaction ID: 90921.E21791 Date of Disbursement
Mailing Address 1331 SE University Ave Unit 210 # 210	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 8 / 2 0 0 8</div> </div>
City Waukee State IA Zip Code 50263-8586	Amount of Each Disbursement this Period
Purpose of Disbursement Meals Candidate Name <div>Category/Type</div>	<div>350.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	MEALS
B. Full Name (Last, First, Middle Initial) Karen Franze	Transaction ID: 90921.E21565 Date of Disbursement
Mailing Address 100 1st. Street Se P.o. Box 829	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 5 / 2 0 0 8</div> </div>
City Pelican Rapids State MN Zip Code 56572-	Amount of Each Disbursement this Period
Purpose of Disbursement Reimburse for milage Candidate Name <div>Category/Type</div>	<div>501.65</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	REIMBURSE FOR MILAGE
C. Full Name (Last, First, Middle Initial) Karen Franze	Transaction ID: 90921.E21566 Date of Disbursement
Mailing Address 100 1st. Street Se P.o. Box 829	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 5 / 2 0 0 8</div> </div>
City Pelican Rapids State MN Zip Code 56572-	Amount of Each Disbursement this Period
Purpose of Disbursement SEE BELOW: Reimburse for phone Candidate Name <div>Category/Type</div>	<div>93.30</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SEE BELOW: REIMBURSE FOR PHONE

SUBTOTAL of Disbursements This Page (optional)

944.95

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Sprint	Transaction ID: 90921.E21567 Date of Disbursement
Mailing Address 4501 15th Ave S	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 5 / 2 0 0 8</div> </div>
City State Zip Code Fargo ND 58103-8956	Amount of Each Disbursement this Period
Purpose of Disbursement FRANZE - PHONE	<div>93.30</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: FRANZE - PHONE
B. Full Name (Last, First, Middle Initial) Zach Freimark	Transaction ID: 90921.E21552 Date of Disbursement
Mailing Address 2369 Unity Ave N	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 5 / 2 0 0 8</div> </div>
City State Zip Code Minneapolis MN 55422-3412	Amount of Each Disbursement this Period
Purpose of Disbursement Reimburse for milage	<div>90.62</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	REIMBURSE FOR MILAGE
C. Full Name (Last, First, Middle Initial) Zach Freimark	Transaction ID: 90921.E21858 Date of Disbursement
Mailing Address 2369 Unity Ave N	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 8 / 2 0 0 8</div> </div>
City State Zip Code Minneapolis MN 55422-3412	Amount of Each Disbursement this Period
Purpose of Disbursement Meals	<div>650.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	MEALS

SUBTOTAL of Disbursements This Page (optional)

740.62

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 123 / 322

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Jessica Furst

Mailing Address 3000 K St NW Ste 500
Suite 500

City Washington State DC Zip Code 20007-5111

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21820

Date of Disbursement

12 / 08 / 2008

Amount of Each Disbursement this Period

350.00

MEALS

B.

Full Name (Last, First, Middle Initial)
Jessica Furst

Mailing Address 3000 K St NW Ste 500
Suite 500

City Washington State DC Zip Code 20007-5111

Purpose of Disbursement
Reimburse for mileage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E22066

Date of Disbursement

12 / 18 / 2008

Amount of Each Disbursement this Period

58.60

REIMBURSE FOR MILEAGE

C.

Full Name (Last, First, Middle Initial)
Thomas Garloch

Mailing Address 4409 4th Rd N Apt 6
Apt. 6

City Arlington State VA Zip Code 22203-2318

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21845

Date of Disbursement

12 / 08 / 2008

Amount of Each Disbursement this Period

500.00

MEALS

SUBTOTAL of Disbursements This Page (optional)

908.60

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Tyler Glick

Mailing Address 1320 21st Street, NW
Apt. 306

City Fairfax State VA Zip Code 22036-

Purpose of Disbursement
Reimburse for mileage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21550

Date of Disbursement

12 / 05 / 2008

Amount of Each Disbursement this Period

18.89

REIMBURSE FOR MILEAGE

B.

Full Name (Last, First, Middle Initial)

Tyler Glick

Mailing Address 1320 21st Street, NW
Apt. 306

City Fairfax State VA Zip Code 22036-

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21850

Date of Disbursement

12 / 08 / 2008

Amount of Each Disbursement this Period

450.00

MEALS

C.

Full Name (Last, First, Middle Initial)

Tyler Glick

Mailing Address 1320 21st Street, NW
Apt. 306

City Fairfax State VA Zip Code 22036-

Purpose of Disbursement
Reimburse for mileage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21874

Date of Disbursement

12 / 09 / 2008

Amount of Each Disbursement this Period

43.11

REIMBURSE FOR MILEAGE

SUBTOTAL of Disbursements This Page (optional)

512.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 125 / 322

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Benjamin Golnik

Mailing Address 76 Western Ave Apt 2

City State Zip Code
St Paul MN 55102-Purpose of Disbursement
Meals

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21774

Date of Disbursement

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

Amount of Each Disbursement this Period

500.00

MEALS

B.

Full Name (Last, First, Middle Initial)
Timothy Gould

Mailing Address 192 Linden Circle

City State Zip Code
Apple Valley MN 55124-Purpose of Disbursement
Reimburse for Milage

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21520

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	5		2	0	0	8

Amount of Each Disbursement this Period

170.36

REIMBURSE FOR MILAGE

C.

Full Name (Last, First, Middle Initial)
Timothy Gould

Mailing Address 192 Linden Circle

City State Zip Code
Apple Valley MN 55124-Purpose of Disbursement
SEE BELOW: Reimb for fuel/phone

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21521

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	5		2	0	0	8

Amount of Each Disbursement this Period

241.45

SEE BELOW: REIMB FOR FUEL-
/PHONE

SUBTOTAL of Disbursements This Page (optional)

911.81

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Holiday Gas

Mailing Address 1345 Marshall Ave

City State Zip Code
Saint Paul MN 55104-6344

Purpose of Disbursement

GOULD - FUEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21522

Date of Disbursement

/ /

Amount of Each Disbursement this Period

127.56

[MEMO ITEM]

MEMO: GOULD - FUEL

B.

Full Name (Last, First, Middle Initial)

Verizon Wireless

Mailing Address P.O. Box 790422

City State Zip Code
St. Louis MO 63179-

Purpose of Disbursement

GOULD - CELL PHONE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21523

Date of Disbursement

/ /

Amount of Each Disbursement this Period

113.89

[MEMO ITEM]

MEMO: GOULD - CELL PHONE

C.

Full Name (Last, First, Middle Initial)

Timothy Gould

Mailing Address 192 Linden Circle

City State Zip Code
Apple Valley MN 55124-

Purpose of Disbursement

SEE BELOW: Reimburse for phone

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22273

Date of Disbursement

/ /

Amount of Each Disbursement this Period

448.56

SEE BELOW: REIMBURSE FOR
PHONE

SUBTOTAL of Disbursements This Page (optional)

448.56

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 127 / 322

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: 90921.E22274 Date of Disbursement																				
Mailing Address PO Box 40153	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	3		2	0	0	8												
City Saint Paul State MN Zip Code 55104-8153	Amount of Each Disbursement this Period																				
Purpose of Disbursement GOULD - CELL PHONE	<table border="1"> <tr> <td colspan="10">448.56</td> </tr> </table>	448.56																			
448.56																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Resolution Graphics	Transaction ID: 90921.E21509 Date of Disbursement																				
Mailing Address 3725 Dunlap Street N.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	5		2	0	0	8												
City Saint Paul State MN Zip Code 55112-	Amount of Each Disbursement this Period																				
Purpose of Disbursement Party Fundraising Mailhouse/non-can	<table border="1"> <tr> <td colspan="10">847.29</td> </tr> </table>	847.29																			
847.29																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Resolution Graphics	Transaction ID: 90921.E21737 Date of Disbursement																				
Mailing Address 3725 Dunlap Street N.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	9		2	0	0	8												
City Saint Paul State MN Zip Code 55112-	Amount of Each Disbursement this Period																				
Purpose of Disbursement Party Fundraising Mailhouse/non-can	<table border="1"> <tr> <td colspan="10">1034.97</td> </tr> </table>	1034.97																			
1034.97																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

1882.26

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Resolution Graphics

Mailing Address 3725 Dunlap Street N.

City State Zip Code
Saint Paul MN 55112-

Purpose of Disbursement
Party Fundraising Mailhouse/non-can
Candidate Name

Category/
Type

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

Transaction ID: 90921.E22282
Date of Disbursement

/ /

Amount of Each Disbursement this Period

PARTY FUNDRAISING MAILHOUSE/NON-CAN

B.

Full Name (Last, First, Middle Initial)
James Greene

Mailing Address 10453 Kimberly Court South

City State Zip Code
Cottage Grove MN 55016-

Purpose of Disbursement
Meals
Candidate Name

Category/
Type

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

Transaction ID: 90921.E21804
Date of Disbursement

/ /

Amount of Each Disbursement this Period

MEALS

C.

Full Name (Last, First, Middle Initial)
Bilenda Harris-Ritter

Mailing Address PO Box 947

City State Zip Code
Folsom CA 95763-0947

Purpose of Disbursement
Meals
Candidate Name

Category/
Type

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

Transaction ID: 90921.E21776
Date of Disbursement

/ /

Amount of Each Disbursement this Period

MEALS

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.	Full Name (Last, First, Middle Initial) Andrew Hartman			Transaction ID: 90921.E21767 Date of Disbursement 12 / 08 / 2008	
	Mailing Address 9 Jordan Blvd				
	City Delmar	State NY	Zip Code 12054-4020	Amount of Each Disbursement this Period 500.00	
	Purpose of Disbursement Meals		Category/ Type		
	Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		MEALS	
State: District:					
B.	Full Name (Last, First, Middle Initial) Megan Hess			Transaction ID: 90921.E21821 Date of Disbursement 12 / 08 / 2008	
	Mailing Address 606 11th Ave SW				
	City Spencer	State IA	Zip Code 51301-6200	Amount of Each Disbursement this Period 350.00	
	Purpose of Disbursement Meals		Category/ Type		
	Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		MEALS	
State: District:					
C.	Full Name (Last, First, Middle Initial) Patrick T Igo			Transaction ID: 90921.E21832 Date of Disbursement 12 / 08 / 2008	
	Mailing Address 585 Grand Ave				
	City Saint Paul	State MN	Zip Code 55102-	Amount of Each Disbursement this Period 350.00	
	Purpose of Disbursement Meals		Category/ Type		
	Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		MEALS	
State: District:					

SUBTOTAL of Disbursements This Page (optional)

1200.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Norlight, Inc

Mailing Address PO Box 740094

City Cincinnati State OH Zip Code 45274-0094

Purpose of Disbursement
Telephone Long Distance Service

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21725

Date of Disbursement

12 / 09 / 2008

Amount of Each Disbursement this Period

650.28

TELEPHONE LONG DISTANCE
SERVICE

B.

Full Name (Last, First, Middle Initial)
Norlight, Inc

Mailing Address PO Box 740094

City Cincinnati State OH Zip Code 45274-0094

Purpose of Disbursement
Telephone Long Distance Service

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21726

Date of Disbursement

12 / 09 / 2008

Amount of Each Disbursement this Period

1469.17

TELEPHONE LONG DISTANCE
SERVICE

C.

Full Name (Last, First, Middle Initial)
Aristotle International, Inc.

Mailing Address 205 Pennsylvania Avenue, Se

City Washington State DC Zip Code 20003-

Purpose of Disbursement
Party Software

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E22281

Date of Disbursement

12 / 23 / 2008

Amount of Each Disbursement this Period

1500.00

PARTY SOFTWARE

SUBTOTAL of Disbursements This Page (optional)

3619.45

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

David James

Mailing Address 948 Garlington Cir

City State Zip Code
West Chester PA 19380-7213

Purpose of Disbursement
SEE BELOW: Reimburse for flight

Candidate Name

Category/
Type

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

State: District:

Transaction ID: 90921.E21577

Date of Disbursement

12 / 05 / 2008

Amount of Each Disbursement this Period

653.00

SEE BELOW: REIMBURSE FOR FLIGHT

B.

Full Name (Last, First, Middle Initial)

US Airways

Mailing Address 4000 E. Sky Harbor Blvd.

City State Zip Code
Phoenix AZ 85034-

Purpose of Disbursement
JAMES - AIR TRAVEL

Candidate Name

Category/
Type

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

State: District:

Transaction ID: 90921.E21578

Date of Disbursement

12 / 05 / 2008

Amount of Each Disbursement this Period

653.00

[MEMO ITEM]
MEMO: JAMES - AIR TRAVEL

C.

Full Name (Last, First, Middle Initial)

David James

Mailing Address 948 Garlington Cir

City State Zip Code
West Chester PA 19380-7213

Purpose of Disbursement
Reimburse for milage

Candidate Name

Category/
Type

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

State: District:

Transaction ID: 90921.E22063

Date of Disbursement

12 / 18 / 2008

Amount of Each Disbursement this Period

220.00

REIMBURSE FOR MILAGE

SUBTOTAL of Disbursements This Page (optional)

873.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota**A.**Full Name (Last, First, Middle Initial)
David James

Mailing Address 948 Garlington Cir

City State Zip Code
West Chester PA 19380-7213Purpose of Disbursement
SEE BELOW: Reimburse for flight

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22064

Date of Disbursement

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

Amount of Each Disbursement this Period

1219.00

SEE BELOW: REIMBURSE FOR
FLIGHT**B.**Full Name (Last, First, Middle Initial)
US Airways

Mailing Address 4000 E. Sky Harbor Blvd.

City State Zip Code
Phoenix AZ 85034-Purpose of Disbursement
JAMES - FLIGHT

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22065

Date of Disbursement

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

Amount of Each Disbursement this Period

1219.00

[MEMO ITEM]
MEMO: JAMES - FLIGHT**C.**Full Name (Last, First, Middle Initial)
Will JamisonMailing Address 250 5th St E Apt 412
Apt. 412City State Zip Code
Saint Paul MN 55101-1608Purpose of Disbursement
Meals

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21855

Date of Disbursement

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

Amount of Each Disbursement this Period

700.00

MEALS

SUBTOTAL of Disbursements This Page (optional)

1919.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Jennifer Jedda

Mailing Address 1750 28th Ave NE

City Issaquah State WA Zip Code 98029-7342

Purpose of Disbursement
SEE BELOW: REIMBURSE FOR F

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21569

Date of Disbursement

12 / 05 / 2008

Amount of Each Disbursement this Period

20.00

SEE BELOW: REIMBURSE FOR F

B.

Full Name (Last, First, Middle Initial)
Super America

Mailing Address 99 Lexington Pkwy N

City Saint Paul State MN Zip Code 55104-6936

Purpose of Disbursement
Jedda - fuel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21570

Date of Disbursement

12 / 05 / 2008

Amount of Each Disbursement this Period

20.00

[MEMO ITEM]

MEMO: JEDDA - FUEL

C.

Full Name (Last, First, Middle Initial)
Jennifer Karr

Mailing Address 1711 Prelude Dr

City Vienna State VA Zip Code 22182-3342

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21819

Date of Disbursement

12 / 08 / 2008

Amount of Each Disbursement this Period

450.00

MEALS

SUBTOTAL of Disbursements This Page (optional)

470.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Matthew Kennicott	Transaction ID: 90921.E21539 Date of Disbursement
Mailing Address 3229 Primo Colores St	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 5 / 2 0 0 8</div> </div>
City Santa Fe State NM Zip Code 87507-3468	Amount of Each Disbursement this Period
Purpose of Disbursement Reimburse for mileage Candidate Name	<div> <div>30.35</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	REIMBURSE FOR MILEAGE
B. Full Name (Last, First, Middle Initial) Matthew Kennicott	Transaction ID: 90921.E21759 Date of Disbursement
Mailing Address 3229 Primo Colores St	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 8 / 2 0 0 8</div> </div>
City Santa Fe State NM Zip Code 87507-3468	Amount of Each Disbursement this Period
Purpose of Disbursement Meals Candidate Name	<div> <div>600.00</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	MEALS
C. Full Name (Last, First, Middle Initial) Matthew Kennicott	Transaction ID: 90921.E21748 Date of Disbursement
Mailing Address 3229 Primo Colores St	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 9 / 2 0 0 8</div> </div>
City Santa Fe State NM Zip Code 87507-3468	Amount of Each Disbursement this Period
Purpose of Disbursement SEE BELOW: Reimb for fuel/bag check Candidate Name	<div> <div>29.49</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	SEE BELOW: REIMB FOR FUEL- /BAG CHECK

SUBTOTAL of Disbursements This Page (optional)

659.84

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.	Full Name (Last, First, Middle Initial) Frontier Airlines	Transaction ID: 90921.E21750 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 9 / 2 0 0 8
	Mailing Address 60 Church St	Amount of Each Disbursement this Period 15.00
	City Glowersville State NY Zip Code 12078-	
	Purpose of Disbursement KENNICOTT - BAG CHECK	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Sinclair Gas - Winona	Transaction ID: 90921.E21749 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 9 / 2 0 0 8
	Mailing Address 50 Riverview Dr	Amount of Each Disbursement this Period 14.49
	City Winona State MN Zip Code 55987-2232	
	Purpose of Disbursement KENNICOTT - FUEL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Ben Key	Transaction ID: 90921.E21775 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 8
	Mailing Address 4423 Creekmeadow Dr	Amount of Each Disbursement this Period 500.00
	City Dallas State TX Zip Code 75287-6810	
	Purpose of Disbursement Meals	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

MEMO: KENNICOTT - BAG CHECK

[MEMO ITEM]

MEMO: KENNICOTT - FUEL

MEALS

SUBTOTAL of Disbursements This Page (optional)

500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Matthew Kirkpatrick

Mailing Address 3900 Valley View Dr N # 303
#303

City Saint Paul State MN Zip Code 55122-1554

Purpose of Disbursement
SEE BELOW: Reimb for phone

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21536

Date of Disbursement

12 / 05 / 2008

Amount of Each Disbursement this Period

100.00

SEE BELOW: REIMB FOR PHO-
NE

B.

Full Name (Last, First, Middle Initial)
Verizon Wireless

Mailing Address P O BOX 17120

City Tucson State AZ Zip Code 85721-0001

Purpose of Disbursement
KIRKPATRICK - PHONE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21537

Date of Disbursement

12 / 05 / 2008

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]
MEMO: KIRKPATRICK - PHONE

C.

Full Name (Last, First, Middle Initial)
Wesley Kliner

Mailing Address 54 High St Apt 2F
High Street

City Charlestown State MA Zip Code 02129-3317

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21854

Date of Disbursement

12 / 08 / 2008

Amount of Each Disbursement this Period

500.00

MEALS

SUBTOTAL of Disbursements This Page (optional)

600.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
William Arthur Klucas

Mailing Address PO Box 283

City Rochester State MN Zip Code 55903-0283

Purpose of Disbursement
Reimburse for mileage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E24435

Date of Disbursement

12 / 05 / 2008

Amount of Each Disbursement this Period

172.89

REIMBURSE FOR MILEAGE

B.

Full Name (Last, First, Middle Initial)
William Arthur Klucas

Mailing Address PO Box 283

City Rochester State MN Zip Code 55903-0283

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E24434

Date of Disbursement

12 / 08 / 2008

Amount of Each Disbursement this Period

500.00

MEALS

C.

Full Name (Last, First, Middle Initial)
William Arthur Klucas

Mailing Address PO Box 283

City Rochester State MN Zip Code 55903-0283

Purpose of Disbursement
Reimburse for mileage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E24433

Date of Disbursement

12 / 23 / 2008

Amount of Each Disbursement this Period

35.81

REIMBURSE FOR MILEAGE

SUBTOTAL of Disbursements This Page (optional)

708.70

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Cecilia A. Knapp Mailing Address 417 2nd St N	Transaction ID: 90921.E21713 Date of Disbursement <div> <div>12</div> <div>09</div> <div>2008</div> </div>
City Wahpeton State ND Zip Code 58075-3908 Purpose of Disbursement SEE BELOW: Reimburse for meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>63.80</div> SEE BELOW: REIMBURSE FOR MEALS
B. Full Name (Last, First, Middle Initial) Super America Mailing Address 6355 Point Chase City Eden Prairie State MN Zip Code 55344-7726 Purpose of Disbursement KNAPP - MEAL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90921.E21716 Date of Disbursement <div> <div>12</div> <div>09</div> <div>2008</div> </div> Amount of Each Disbursement this Period <div>11.80</div> [MEMO ITEM] MEMO: KNAPP - MEAL
C. Full Name (Last, First, Middle Initial) Kowalskis Shopping Center Mailing Address 1261 Grand Ave City Saint Paul State MN Zip Code 55105-2603 Purpose of Disbursement KNAPP - MEAL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90921.E21715 Date of Disbursement <div> <div>12</div> <div>09</div> <div>2008</div> </div> Amount of Each Disbursement this Period <div>52.00</div> [MEMO ITEM] MEMO: KNAPP - MEAL

SUBTOTAL of Disbursements This Page (optional) ►

63.80

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

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

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

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Cecilia A. Knapp

Mailing Address 417 2nd St N

City Wahpeton State ND Zip Code 58075-3908

Purpose of Disbursement
Reimburse for mileage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E22060

Date of Disbursement

/ /

Amount of Each Disbursement this Period

18.66

REIMBURSE FOR MILEAGE

B.

Full Name (Last, First, Middle Initial)
Cecilia A. Knapp

Mailing Address 417 2nd St N

City Wahpeton State ND Zip Code 58075-3908

Purpose of Disbursement
SEE BELOW: Reimburse for photos

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E22061

Date of Disbursement

/ /

Amount of Each Disbursement this Period

21.13

SEE BELOW: REIMBURSE FOR
PHOTOS

C.

Full Name (Last, First, Middle Initial)
Target Superstore

Mailing Address 1300 University Ave W

City Saint Paul State MN Zip Code 55104-

Purpose of Disbursement
KNAPP - PHOTOS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E22062

Date of Disbursement

/ /

Amount of Each Disbursement this Period

21.13

[MEMO ITEM]
MEMO: KNAPP - PHOTOS

SUBTOTAL of Disbursements This Page (optional)

39.79

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 140 / 322

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Laureen Koch

Mailing Address 304 White Horn Dr

City Kingston State RI Zip Code 02881-1829

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21755

Date of Disbursement

12 / 08 / 2008

Amount of Each Disbursement this Period

300.00

MEALS

B.

Full Name (Last, First, Middle Initial)
Gregory Koepke

Mailing Address 14752 Brookstone Dr

City Poway State CA Zip Code 92064-6436

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21800

Date of Disbursement

12 / 08 / 2008

Amount of Each Disbursement this Period

450.00

MEALS

C.

Full Name (Last, First, Middle Initial)
Kim Krebs

Mailing Address 6079 Trail Ave NE

City Keizer State OR Zip Code 97303-3565

Purpose of Disbursement
SEE BELOW: Reimburse for fuel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21563

Date of Disbursement

12 / 05 / 2008

Amount of Each Disbursement this Period

19.57

SEE BELOW: REIMBURSE FOR FUEL

SUBTOTAL of Disbursements This Page (optional)

769.57

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 141 / 322

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Conex C-Store

Mailing Address 1297 Granite St

City State Zip Code
Granite Falls MN 56241-1358

Purpose of Disbursement
KREBS - FUEL - RECOUNT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21564

Date of Disbursement

/ /

Amount of Each Disbursement this Period

19.57

[MEMO ITEM]

MEMO: KREBS - FUEL - RECO-
UNT

B.

Full Name (Last, First, Middle Initial)
Kim Krebs

Mailing Address 6079 Trail Ave NE

City State Zip Code
Keizer OR 97303-3565

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21813

Date of Disbursement

/ /

Amount of Each Disbursement this Period

350.00

MEALS

C.

Full Name (Last, First, Middle Initial)
Nicole Lindaman

Mailing Address 808 Berry St Apt 135
Apt. 135

City State Zip Code
Saint Paul MN 55114-1454

Purpose of Disbursement
Reimburse for milage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21203

Date of Disbursement

/ /

Amount of Each Disbursement this Period

75.12

REIMBURSE FOR MILAGE

SUBTOTAL of Disbursements This Page (optional)

425.12

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Nicole Lindaman	Transaction ID: 90921.E22361 Date of Disbursement
Mailing Address 808 Berry St Apt 135 Apt. 135	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 8 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55114-1454	Amount of Each Disbursement this Period
Purpose of Disbursement Reimburse for Mileage Candidate Name	<div> <div>38.18</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
REIMBURSE FOR MILEAGE	
B. Full Name (Last, First, Middle Initial) Nicole Lindaman	Transaction ID: 90921.E22079 Date of Disbursement
Mailing Address 808 Berry St Apt 135 Apt. 135	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 8 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55114-1454	Amount of Each Disbursement this Period
Purpose of Disbursement Reimburse for milage Candidate Name	<div> <div>27.86</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
REIMBURSE FOR MILAGE	
C. Full Name (Last, First, Middle Initial) Thomas Loftus, Jr.	Transaction ID: 90921.E21846 Date of Disbursement
Mailing Address 1409 Barker Cir	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 8 / 2 0 0 8</div> </div>
City West Chester State PA Zip Code 19380-6169	Amount of Each Disbursement this Period
Purpose of Disbursement Meals Candidate Name	<div> <div>850.00</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
MEALS	

SUBTOTAL of Disbursements This Page (optional)

916.04

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Margaret Looby

Mailing Address 14 Overbrook Rd

City
Ranson

State
WV

Zip Code
25438-4022

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21756

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

MEALS

B.

Full Name (Last, First, Middle Initial)

Margaret Looby

Mailing Address 14 Overbrook Rd

City
Ranson

State
WV

Zip Code
25438-4022

Purpose of Disbursement
Reimburse for milage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E22069

Date of Disbursement

/ /

Amount of Each Disbursement this Period

28.00

REIMBURSE FOR MILAGE

C.

Full Name (Last, First, Middle Initial)

Margaret Looby

Mailing Address 14 Overbrook Rd

City
Ranson

State
WV

Zip Code
25438-4022

Purpose of Disbursement
SEE BELOW: Reimburse for luggage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E22070

Date of Disbursement

/ /

Amount of Each Disbursement this Period

30.00

SEE BELOW: REIMBURSE FOR LUGGAGE

SUBTOTAL of Disbursements This Page (optional)

558.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Northwest Airlines

Mailing Address 5101 Northwest Dr

City State Zip Code
Saint Paul MN 55111-3027

Purpose of Disbursement
LOOBY - LUGGAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22071

Date of Disbursement

/ /

Amount of Each Disbursement this Period

30.00

[MEMO ITEM]

MEMO: LOOBY - LUGGAGE

B.

Full Name (Last, First, Middle Initial)
Gregory S. Loos

Mailing Address 8880 Villa La Jolla Dr

City State Zip Code
La Jolla CA 92037-1967

Purpose of Disbursement
Reimburse for milage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21558

Date of Disbursement

/ /

Amount of Each Disbursement this Period

246.77

REIMBURSE FOR MILAGE

C.

Full Name (Last, First, Middle Initial)
Gregory S. Loos

Mailing Address 8880 Villa La Jolla Dr

City State Zip Code
La Jolla CA 92037-1967

Purpose of Disbursement
SEE BELOW: Reimburse for phone

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22279

Date of Disbursement

/ /

Amount of Each Disbursement this Period

150.00

SEE BELOW: REIMBURSE FOR
PHONE

SUBTOTAL of Disbursements This Page (optional)

396.77

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address P O BOX 17120	Transaction ID: 90921.E22280 Date of Disbursement <div> <div>12</div> <div>23</div> <div>2008</div> </div>
City Tucson State AZ Zip Code 85721-0001 Purpose of Disbursement LOOS - CELL PHONE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>150.00</div> [MEMO ITEM] MEMO: LOOS - CELL PHONE
B. Full Name (Last, First, Middle Initial) Robert Travis Lovelady Mailing Address 2680 3 Rd City Palco State KS Zip Code 67657-9018 Purpose of Disbursement Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90921.E21847 Date of Disbursement <div> <div>12</div> <div>08</div> <div>2008</div> </div> Amount of Each Disbursement this Period <div>350.00</div> MEALS
C. Full Name (Last, First, Middle Initial) Robert Travis Lovelady Mailing Address 2680 3 Rd City Palco State KS Zip Code 67657-9018 Purpose of Disbursement Reimburse for milage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90921.E22072 Date of Disbursement <div> <div>12</div> <div>18</div> <div>2008</div> </div> Amount of Each Disbursement this Period <div>57.56</div> REIMBURSE FOR MILAGE

SUBTOTAL of Disbursements This Page (optional)

407.56

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Chris Lucas

Mailing Address 1815 Riggs PI NW
Apt. 28

City Washington State DC Zip Code 20009-6152

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21786

Date of Disbursement

12 / 08 / 2008

Amount of Each Disbursement this Period

300.00

MEALS

B.

Full Name (Last, First, Middle Initial)

John MacGregor

Mailing Address 708 Osceola Rd

City Belleair State FL Zip Code 33756-1025

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21807

Date of Disbursement

12 / 08 / 2008

Amount of Each Disbursement this Period

300.00

MEALS

C.

Full Name (Last, First, Middle Initial)

Reit Management

Mailing Address 330 Second Avenue South

City Minneapolis State MN Zip Code 55401-

Purpose of Disbursement
Office Rent

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21510

Date of Disbursement

12 / 01 / 2008

Amount of Each Disbursement this Period

272.00

OFFICE RENT

SUBTOTAL of Disbursements This Page (optional)

872.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 147 / 322

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Reit Management

Mailing Address 330 Second Avenue South

City Minneapolis State MN Zip Code 55401-

Purpose of Disbursement
Office Rent

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E22291

Date of Disbursement

/ /

Amount of Each Disbursement this Period

326.00

OFFICE RENT

B.

Full Name (Last, First, Middle Initial)
Paul Mandelson

Mailing Address 707 Williams St

City Denver State CO Zip Code 80218-3643

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21833

Date of Disbursement

/ /

Amount of Each Disbursement this Period

950.00

MEALS

C.

Full Name (Last, First, Middle Initial)
Tyler Matthews

Mailing Address 634 1/2 N Ewing St

City Helena State MT Zip Code 59601-3603

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21851

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

MEALS

SUBTOTAL of Disbursements This Page (optional)

1776.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

David McCarthy

Mailing Address 1536 Hewitt Ave # 1481

City
St Paul

State
MN

Zip Code
55104-

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E24451

Date of Disbursement

/ /

Amount of Each Disbursement this Period

205.00

MEALS

B.

Full Name (Last, First, Middle Initial)

David McCarthy

Mailing Address 1536 Hewitt Ave # 1481

City
St Paul

State
MN

Zip Code
55104-

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E24450

Date of Disbursement

/ /

Amount of Each Disbursement this Period

431.05

MEALS

C.

Full Name (Last, First, Middle Initial)

Thomas P. McGill

Mailing Address 7643 S Bay Dr

City
Bloomington

State
MN

Zip Code
55438-2901

Purpose of Disbursement
Gen. Party Fundraising Consulting

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21507

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

GEN. PARTY FUNDRAISING CO-
NSULTING

SUBTOTAL of Disbursements This Page (optional)

3136.05

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Daniel Mcneil

Mailing Address PO Box 110
1 Heaters Lane

City Layton State NJ Zip Code 07851-0110

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21789

Date of Disbursement

12 / 08 / 2008

Amount of Each Disbursement this Period

300.00

MEALS

B.

Full Name (Last, First, Middle Initial)
John T. Meyer

Mailing Address 1425 Jessamine Ave W
Apt. 110

City Saint Paul State MN Zip Code 55108-

Purpose of Disbursement
Reimburse for milage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21540

Date of Disbursement

12 / 05 / 2008

Amount of Each Disbursement this Period

70.11

REIMBURSE FOR MILAGE

C.

Full Name (Last, First, Middle Initial)
Andrew Miller

Mailing Address 1735 New Hampshire Ave NW Apt 205
Suite 205

City Washington State DC Zip Code 20009-2558

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21769

Date of Disbursement

12 / 08 / 2008

Amount of Each Disbursement this Period

450.00

MEALS

SUBTOTAL of Disbursements This Page (optional)

820.11

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) US Monitor Mailing Address 86 Maple Ave	Transaction ID: 90921.E21872 Date of Disbursement <div> <div>12</div> <div>09</div> <div>2008</div> </div>
City New City State NY Zip Code 10956- Purpose of Disbursement List Monitoring-Not FEA Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>69.31</div> LIST MONITORING-NOT FEA
B. Full Name (Last, First, Middle Initial) Kristopher Morris Mailing Address 145 D St SE City Washington State DC Zip Code 20003-1809 Purpose of Disbursement Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90921.E21814 Date of Disbursement <div> <div>12</div> <div>08</div> <div>2008</div> </div> Amount of Each Disbursement this Period <div>800.00</div> MEALS
C. Full Name (Last, First, Middle Initial) Kristopher Morris Mailing Address 145 D St SE City Washington State DC Zip Code 20003-1809 Purpose of Disbursement SEE BELOW: Reimburse for meal Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90921.E21742 Date of Disbursement <div> <div>12</div> <div>09</div> <div>2008</div> </div> Amount of Each Disbursement this Period <div>51.55</div> SEE BELOW: REIMBURSE FOR MEAL

SUBTOTAL of Disbursements This Page (optional) ►

920.86

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Dunn Brothers Coffee

Mailing Address 2650 University Avenue South

City Saint Paul State MN Zip Code 55107-

Purpose of Disbursement
MORRIS - MEAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21743

Date of Disbursement

12 / 09 / 2008

Amount of Each Disbursement this Period

51.55

[MEMO ITEM]

MEMO: MORRIS - MEAL

B.

Full Name (Last, First, Middle Initial)
Lexis Nexis

Mailing Address Po Box 2314

City Carol Stream State IL Zip Code 60132-

Purpose of Disbursement
Office Computer Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21736

Date of Disbursement

12 / 09 / 2008

Amount of Each Disbursement this Period

532.00

OFFICE COMPUTER SERVICES

C.

Full Name (Last, First, Middle Initial)
Danny ODriscoll

Mailing Address 7805 Orchard Gate Ct

City Bethesda State MD Zip Code 20817-4118

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21790

Date of Disbursement

12 / 08 / 2008

Amount of Each Disbursement this Period

450.00

MEALS

SUBTOTAL of Disbursements This Page (optional)

982.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Steve Ostrow <hr/> Mailing Address 7702 Rocio St	Transaction ID: 90921.E21842 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 8 / 2 0 0 8</div> </div>
City Carlsbad State CA Zip Code 92009-8037 Purpose of Disbursement Meals Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	Amount of Each Disbursement this Period <div>750.00</div> MEALS
B. Full Name (Last, First, Middle Initial) Steve Ostrow <hr/> Mailing Address 7702 Rocio St	Transaction ID: 90921.E21881 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 2 / 2 0 0 8</div> </div>
City Carlsbad State CA Zip Code 92009-8037 Purpose of Disbursement SEE BELOW: Reimburse for flight Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	Amount of Each Disbursement this Period <div>754.00</div> SEE BELOW: REIMBURSE FOR FLIGHT
C. Full Name (Last, First, Middle Initial) Northwest Airlines <hr/> Mailing Address 5101 Northwest Dr	Transaction ID: 90921.E21882 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 2 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55111-3027 Purpose of Disbursement OSTROW - AIRFAIR Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	Amount of Each Disbursement this Period <div>754.00</div> [MEMO ITEM] MEMO: OSTROW - AIRFAIR

SUBTOTAL of Disbursements This Page (optional) ►

1504.00

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

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

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

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Anne Palisi

Mailing Address 6016 Las Lomas Road

City State Zip Code
Albuquerque NM 87106-

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21772

Date of Disbursement

/ /

Amount of Each Disbursement this Period

450.00

MEALS

B.

Full Name (Last, First, Middle Initial)

Aaron P. Paterson

Mailing Address 3601 Northwood Drive NE

City State Zip Code
Cedar Rapids IA 52402-2730

Purpose of Disbursement
Reimburse for milage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21548

Date of Disbursement

/ /

Amount of Each Disbursement this Period

618.28

REIMBURSE FOR MILAGE

C.

Full Name (Last, First, Middle Initial)

Aaron P. Paterson

Mailing Address 3601 Northwood Drive NE

City State Zip Code
Cedar Rapids IA 52402-2730

Purpose of Disbursement
SEE BELOW: Reimburse for meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21717

Date of Disbursement

/ /

Amount of Each Disbursement this Period

73.02

SEE BELOW: REIMBURSE FOR MEALS

SUBTOTAL of Disbursements This Page (optional)

1141.30

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Taco Bell Mailing Address 401 Edgewood Dr	Transaction ID: 90921.E21723 Date of Disbursement <div> <div>12</div> <div>09</div> <div>2008</div> </div>
City State Zip Code Baxter MN 56425- Purpose of Disbursement PATERSON - MEAL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Amount of Each Disbursement this Period <div>4.03</div> [MEMO ITEM] MEMO: PATERSON - MEAL
B. Full Name (Last, First, Middle Initial) Fedex Kinkos Mailing Address 1609 S Robert St City State Zip Code West St Paul MN 55118- Purpose of Disbursement PATERSON - MAIL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 90921.E21718 Date of Disbursement <div> <div>12</div> <div>09</div> <div>2008</div> </div> Amount of Each Disbursement this Period <div>3.26</div> [MEMO ITEM] MEMO: PATERSON - MAIL
C. Full Name (Last, First, Middle Initial) Burger King - Benson Mailing Address 206 14th St N City State Zip Code Benson MN 56215-1105 Purpose of Disbursement PATERSON - MEAL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 90921.E21721 Date of Disbursement <div> <div>12</div> <div>09</div> <div>2008</div> </div> Amount of Each Disbursement this Period <div>18.28</div> [MEMO ITEM] MEMO: PATERSON - MEAL

SUBTOTAL of Disbursements This Page (optional) ►

0.00

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

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

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

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(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Arbys Restaurant	Transaction ID: 90921.E21724 Date of Disbursement
Mailing Address 15065 Edgewood Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 9 / 2 0 0 8</div> </div>
City Brainerd State MN Zip Code 56401-6924	Amount of Each Disbursement this Period <div>10.82</div>
Purpose of Disbursement PATERSON - MEAL Candidate Name	<div> <div>Category/Type</div> <div></div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: PATERSON - MEAL
B. Full Name (Last, First, Middle Initial) McDonalds Restaurant	Transaction ID: 90921.E21722 Date of Disbursement
Mailing Address 330 Jefferson Blvd	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 9 / 2 0 0 8</div> </div>
City Big Lake State MN Zip Code 55309-2100	Amount of Each Disbursement this Period <div>12.26</div>
Purpose of Disbursement PATERSON - MEAL Candidate Name	<div> <div>Category/Type</div> <div></div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: PATERSON - MEAL
C. Full Name (Last, First, Middle Initial) Subway Sandwiches - Cokato	Transaction ID: 90921.E21720 Date of Disbursement
Mailing Address 160 Cokato St NE	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 9 / 2 0 0 8</div> </div>
City Cokato State MN Zip Code 55321-4833	Amount of Each Disbursement this Period <div>5.33</div>
Purpose of Disbursement PATERSON - MEAL Candidate Name	<div> <div>Category/Type</div> <div></div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: PATERSON - MEAL

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Target Superstore - Baxter

Mailing Address 14546 Dellwood Dr

City State Zip Code
Baxter MN 56425-9744

Purpose of Disbursement
PATERSON - SURGE PROTECTOR

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21719

Date of Disbursement

12 / 09 / 2008

Amount of Each Disbursement this Period

19.04

[MEMO ITEM]

MEMO: PATERSON - SURGE PROTECTOR

B.

Full Name (Last, First, Middle Initial)

Aaron P. Paterson

Mailing Address 3601 Northwood Drive NE

City State Zip Code
Cedar Rapids IA 52402-2730

Purpose of Disbursement
SEE BELOW: Reimburse for phone

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22293

Date of Disbursement

12 / 23 / 2008

Amount of Each Disbursement this Period

322.15

SEE BELOW: REIMBURSE FOR PHONE

C.

Full Name (Last, First, Middle Initial)

Verizon Wireless

Mailing Address PO Box 25505

City State Zip Code
Lehigh Valley PA 18002-5505

Purpose of Disbursement
PATERSON - CELL PHONE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22294

Date of Disbursement

12 / 23 / 2008

Amount of Each Disbursement this Period

322.15

[MEMO ITEM]

MEMO: PATERSON - CELL PHONE

SUBTOTAL of Disbursements This Page (optional)

322.15

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Jenn Peter Mailing Address 3869 Overlook Dr	Transaction ID: 90921.E21818 Date of Disbursement <div> <div>12</div> <div>08</div> <div>2008</div> </div>
City Tallahassee State FL Zip Code 32311-7874 Purpose of Disbursement Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>450.00</div> MEALS
B. Full Name (Last, First, Middle Initial) Alan Philip Mailing Address 403 S Reed Ct City Denver State CO Zip Code 80226-3322 Purpose of Disbursement Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90921.E21764 Date of Disbursement <div> <div>12</div> <div>08</div> <div>2008</div> </div> Amount of Each Disbursement this Period <div>500.00</div> MEALS
C. Full Name (Last, First, Middle Initial) C.C. Solutions Plus Mailing Address 2247 Mountainside Dr City Riverton State UT Zip Code 84065-3072 Purpose of Disbursement Election Software Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90921.E22093 Date of Disbursement <div> <div>12</div> <div>18</div> <div>2008</div> </div> Amount of Each Disbursement this Period <div>2900.00</div> ELECTION SOFTWARE

SUBTOTAL of Disbursements This Page (optional)

3850.00

TOTAL This Period (last page this line number only)

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

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

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Anthony Post Mailing Address 1002 Drew Drive	Transaction ID: 90921.E21524 Date of Disbursement <div> <div>12</div> <div>05</div> <div>2008</div> </div>
City Saint Paul State MN Zip Code 55124- Purpose of Disbursement Reimburse for mileage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>285.36</div> REIMBURSE FOR MILAGE
B. Full Name (Last, First, Middle Initial) Anthony Post Mailing Address 1002 Drew Drive City Saint Paul State MN Zip Code 55124- Purpose of Disbursement SEE BELOW: Reimb for meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90921.E21525 Date of Disbursement <div>12</div> <div>05</div> <div>2008</div> Amount of Each Disbursement this Period <div>70.71</div> SEE BELOW: REIMB FOR MEALS
C. Full Name (Last, First, Middle Initial) Caribou Coffee - Golden Valley Mailing Address 5725 Duluth St City Minneapolis State MN Zip Code 55422-4011 Purpose of Disbursement POST - MEAL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90921.E21527 Date of Disbursement <div>12</div> <div>05</div> <div>2008</div> Amount of Each Disbursement this Period <div>14.52</div> [MEMO ITEM] MEMO: POST - MEAL

SUBTOTAL of Disbursements This Page (optional)

356.07

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Cub Foods - Maple Grove	Transaction ID: 90921.E21529 Date of Disbursement
Mailing Address 8150 Wedgwood Ln N	<div> <div>12</div> <div>05</div> <div>2008</div> </div>
City State Zip Code Maple Grove MN 55369-9400	Amount of Each Disbursement this Period <div>10.68</div>
Purpose of Disbursement POST - MEAL Candidate Name <div>Category/Type</div>	[MEMO ITEM] MEMO: POST - MEAL
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Chipotle	Transaction ID: 90921.E21528 Date of Disbursement
Mailing Address 515 Winnetka Avenue	<div> <div>12</div> <div>05</div> <div>2008</div> </div>
City State Zip Code Minneapolis MN 55412-	Amount of Each Disbursement this Period <div>21.86</div>
Purpose of Disbursement POST - MEAL Candidate Name <div>Category/Type</div>	[MEMO ITEM] MEMO: POST - MEAL
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Byerlys Store	Transaction ID: 90921.E21526 Date of Disbursement
Mailing Address 5725 Duluth St	<div> <div>12</div> <div>05</div> <div>2008</div> </div>
City State Zip Code Minneapolis MN 55422-4011	Amount of Each Disbursement this Period <div>23.65</div>
Purpose of Disbursement POST - MEAL Candidate Name <div>Category/Type</div>	[MEMO ITEM] MEMO: POST - MEAL
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ►

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Anthony Post	Transaction ID: 90921.E21740 Date of Disbursement																				
Mailing Address 1002 Drew Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	9		2	0	0	8												
City Saint Paul State MN Zip Code 55124-	Amount of Each Disbursement this Period																				
Purpose of Disbursement SEE BELOW: Reimburse for copies Candidate Name	<table border="1"> <tr> <td>4.20</td> </tr> </table>	4.20																			
4.20																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
SEE BELOW: REIMBURSE FOR COPIES																					
B. Full Name (Last, First, Middle Initial) Hennepin County Treasurer	Transaction ID: 90921.E21741																				
Mailing Address 300 South Sixth Street	Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	9		2	0	0	8												
City Minneapolis State MN Zip Code 55487-	Amount of Each Disbursement this Period																				
Purpose of Disbursement POST - COPIES Candidate Name	<table border="1"> <tr> <td>4.20</td> </tr> </table>	4.20																			
4.20																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
[MEMO ITEM] MEMO: POST - COPIES																					
C. Full Name (Last, First, Middle Initial) Anthony Post	Transaction ID: 90921.E21739																				
Mailing Address 1002 Drew Drive	Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	9		2	0	0	8												
City Saint Paul State MN Zip Code 55124-	Amount of Each Disbursement this Period																				
Purpose of Disbursement Reimburse for milage Candidate Name	<table border="1"> <tr> <td>84.00</td> </tr> </table>	84.00																			
84.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
REIMBURSE FOR MILAGE																					

SUBTOTAL of Disbursements This Page (optional)

88.20

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Anthony Post Mailing Address 1002 Drew Drive	Transaction ID: 90921.E22077 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 8 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55124- Purpose of Disbursement SEE BELOW: Reimburse for meal Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>22.23</div> SEE BELOW: REIMBURSE FOR MEAL
B. Full Name (Last, First, Middle Initial) Subway Sandwiches Mailing Address 7500 Highway 55 City Rockford State MN Zip Code 55373- Purpose of Disbursement POST- MEAL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90921.E22078 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 8 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>22.23</div> [MEMO ITEM] MEMO: POST- MEAL
C. Full Name (Last, First, Middle Initial) Anthony Post Mailing Address 1002 Drew Drive City Saint Paul State MN Zip Code 55124- Purpose of Disbursement Reimburse for Mileage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90921.E22076 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 8 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>49.68</div> REIMBURSE FOR MILEAGE

SUBTOTAL of Disbursements This Page (optional) ►

71.91

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) US Post Office	Transaction ID: 90921.E21505 Date of Disbursement
Mailing Address 401 Kellogg Blvd E	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 1 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55101-	Amount of Each Disbursement this Period
Purpose of Disbursement Party fundraising Postage/Non FEA Candidate Name	<div>5000.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	PARTY FUNDRAISING POSTAGE- /NON FEA
B. Full Name (Last, First, Middle Initial) US Post Office	Transaction ID: 90921.E21952 Date of Disbursement
Mailing Address 401 Kellogg Blvd E	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 2 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55101-	Amount of Each Disbursement this Period
Purpose of Disbursement Party fundraising Postage/Non FEA Candidate Name	<div>5000.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	PARTY FUNDRAISING POSTAGE- /NON FEA
C. Full Name (Last, First, Middle Initial) First Properties	Transaction ID: 90921.E21514 Date of Disbursement
Mailing Address 202 West Superior St	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 5 / 2 0 0 8</div> </div>
City Duluth State MN Zip Code 55802-	Amount of Each Disbursement this Period
Purpose of Disbursement Office Rent Candidate Name	<div>1000.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	OFFICE RENT

SUBTOTAL of Disbursements This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
William Pulkrabek

Mailing Address 8220 9th St N

City State Zip Code
Oakdale MN 55128-5392

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21777

Date of Disbursement

/ /

Amount of Each Disbursement this Period

250.00

MEALS

B.

Full Name (Last, First, Middle Initial)
Brendon Quinn

Mailing Address 99 Pine St Ste 104
Suite 104

City State Zip Code
Albany NY 12207-2776

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21860

Date of Disbursement

/ /

Amount of Each Disbursement this Period

250.00

MEALS

C.

Full Name (Last, First, Middle Initial)
Brendon Quinn

Mailing Address 99 Pine St Ste 104
Suite 104

City State Zip Code
Albany NY 12207-2776

Purpose of Disbursement
SEE BELOW: Reimburse for fuel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E22074

Date of Disbursement

/ /

Amount of Each Disbursement this Period

10.60

SEE BELOW: REIMBURSE FOR
FUEL

SUBTOTAL of Disbursements This Page (optional)

510.60

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Holiday Gas

Mailing Address 1301 Industrial Blvd NE

City State Zip Code
Minneapolis MN 55413-1702Purpose of Disbursement
QUINN - FUEL

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22075

Date of Disbursement

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

Amount of Each Disbursement this Period

10.60

[MEMO ITEM]

MEMO: QUINN - FUEL

B.

Full Name (Last, First, Middle Initial)

Brendon Quinn

Mailing Address 99 Pine St Ste 104
Suite 104City State Zip Code
Albany NY 12207-2776Purpose of Disbursement
Reimburse for milage

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22073

Date of Disbursement

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

Amount of Each Disbursement this Period

45.00

REIMBURSE FOR MILAGE

C.

Full Name (Last, First, Middle Initial)

Shira Rawlinson

Mailing Address 1606 Las Lomas Rd NE

City State Zip Code
Albuquerque NM 87106-4534Purpose of Disbursement
Meals

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21839

Date of Disbursement

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

Amount of Each Disbursement this Period

450.00

MEALS

SUBTOTAL of Disbursements This Page (optional)

495.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Joshua Revak

Mailing Address 74732 240th St

City Dassel State MN Zip Code 55325-3451

Purpose of Disbursement
Reimburse for mileage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21541

Date of Disbursement

12 / 05 / 2008

Amount of Each Disbursement this Period

78.47

REIMBURSE FOR MILAGE

B.

Full Name (Last, First, Middle Initial)
Joshua Revak

Mailing Address 74732 240th St

City Dassel State MN Zip Code 55325-3451

Purpose of Disbursement
SEE BELOW: Reimburse for meal

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21542

Date of Disbursement

12 / 05 / 2008

Amount of Each Disbursement this Period

88.32

SEE BELOW: REIMBURSE FOR MEAL

C.

Full Name (Last, First, Middle Initial)
Carbones Pizzeria

Mailing Address 1290 N Frontage Rd

City Hastings State MN Zip Code 55033-2359

Purpose of Disbursement
REVAK - MEAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21543

Date of Disbursement

12 / 05 / 2008

Amount of Each Disbursement this Period

88.32

[MEMO ITEM]
MEMO: REVAK - MEAL

SUBTOTAL of Disbursements This Page (optional)

166.79

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
MN Dept of Revenue

Mailing Address 658 Cedar St Ste 400

City Saint Paul State MN Zip Code 55155-1603

Purpose of Disbursement
MN State Sales Tax

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21954

Date of Disbursement

12 / 16 / 2008

Amount of Each Disbursement this Period

6.00

MN STATE SALES TAX

B.

Full Name (Last, First, Middle Initial)
William Ritter

Mailing Address 313 Summit Ave Apt 9
Apt. 9

City Brighton State MA Zip Code 02135-7517

Purpose of Disbursement
SEE BELOW: Reimburse for loding/gas

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21555

Date of Disbursement

12 / 05 / 2008

Amount of Each Disbursement this Period

88.16

SEE BELOW: REIMBURSE FOR
LODING/GAS

C.

Full Name (Last, First, Middle Initial)
Holiday Gas Station

Mailing Address 629 Rice Street

City Saint Paul State MN Zip Code 55103-

Purpose of Disbursement
RITTER - GAS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21557

Date of Disbursement

12 / 05 / 2008

Amount of Each Disbursement this Period

10.02

[MEMO ITEM]
MEMO: RITTER - GAS

SUBTOTAL of Disbursements This Page (optional)

94.16

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
St Paul Hotel

Mailing Address 350 Market St

City State Zip Code
Saint Paul MN 55102-1430

Purpose of Disbursement
RITTER - LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21556

Date of Disbursement

12 / 05 / 2008

Amount of Each Disbursement this Period

78.14

[MEMO ITEM]

MEMO: RITTER - LODGING

B.

Full Name (Last, First, Middle Initial)
William Ritter

Mailing Address 313 Summit Ave Apt 9
Apt. 9

City State Zip Code
Brighton MA 02135-7517

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21857

Date of Disbursement

12 / 08 / 2008

Amount of Each Disbursement this Period

450.00

MEALS

C.

Full Name (Last, First, Middle Initial)
Michael Roman

Mailing Address 2305 Rhawn St

City State Zip Code
Philadelphia PA 19152-3315

Purpose of Disbursement
SEE BELOW: Reimb for meal/lodging

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21744

Date of Disbursement

12 / 09 / 2008

Amount of Each Disbursement this Period

343.22

SEE BELOW: REIMB FOR MEAL-
/LODGING

SUBTOTAL of Disbursements This Page (optional)

793.22

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 168 / 322

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Hilton Garden Inn

Mailing Address 411 Minnesota St

City State Zip Code
Saint Paul MN 55101-1703Purpose of Disbursement
ROMAN - LODGING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21745

Date of Disbursement

M M / D D / Y Y Y Y
1 2 / 0 9 / 2 0 0 8

Amount of Each Disbursement this Period

300.00

[MEMO ITEM]

MEMO: ROMAN - LODGING

B.

Full Name (Last, First, Middle Initial)

Umbria Pizza

Mailing Address 205 4th Ave W

City State Zip Code
Shakopee MN 55379-1219Purpose of Disbursement
ROMAN - MEAL

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21746

Date of Disbursement

M M / D D / Y Y Y Y
1 2 / 0 9 / 2 0 0 8

Amount of Each Disbursement this Period

43.22

[MEMO ITEM]

MEMO: ROMAN - MEAL

C.

Full Name (Last, First, Middle Initial)

Michael Roman

Mailing Address 2305 Rhawn St

City State Zip Code
Philadelphia PA 19152-3315Purpose of Disbursement
Reimburse for milage

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21747

Date of Disbursement

M M / D D / Y Y Y Y
1 2 / 0 9 / 2 0 0 8

Amount of Each Disbursement this Period

12.50

REIMBURSE FOR MILAGE

SUBTOTAL of Disbursements This Page (optional) ▶

12.50

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 169 / 322

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Julia Ruetten	Transaction ID: 90921.E21551 Date of Disbursement
Mailing Address 1342 Coach St Apt 122	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 5 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55108-5296	Amount of Each Disbursement this Period
Purpose of Disbursement Reimburse for mileage Candidate Name	<div> <div>817.11</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ REIMBURSE FOR MILEGE
B. Full Name (Last, First, Middle Initial) Julia Ruetten	Transaction ID: 90921.E22082 Date of Disbursement
Mailing Address 1342 Coach St Apt 122	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 8 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55108-5296	Amount of Each Disbursement this Period
Purpose of Disbursement Reimburse for mileage Candidate Name	<div> <div>269.78</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ REIMBURSE FOR MILEGE
C. Full Name (Last, First, Middle Initial) Julia Ruetten	Transaction ID: 90921.E22083 Date of Disbursement
Mailing Address 1342 Coach St Apt 122	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 8 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55108-5296	Amount of Each Disbursement this Period
Purpose of Disbursement SEE BELOW: Reimburse for meals Candidate Name	<div> <div>45.97</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ SEE BELOW: REIMBURSE FOR MEALS

SUBTOTAL of Disbursements This Page (optional)

1132.86

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 170 / 322

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Jimmy Johns

Mailing Address 1221 E Superior St

City Duluth State MN Zip Code 55802-2218

Purpose of Disbursement
RUETTEN - MEALS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22084

Date of Disbursement

12 / 18 / 2008

Amount of Each Disbursement this Period

45.97

[MEMO ITEM]

MEMO: RUETTEN - MEALS

B.

Full Name (Last, First, Middle Initial)
Vanessa Schmuck

Mailing Address 1139 Marie Ave

City Ephrata State PA Zip Code 17522-1525

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21853

Date of Disbursement

12 / 08 / 2008

Amount of Each Disbursement this Period

750.00

MEALS

C.

Full Name (Last, First, Middle Initial)
Andrew J. Schneider

Mailing Address 6618 Inner Dr

City Madison State WI Zip Code 53705-4201

Purpose of Disbursement
SEE BELOW: Reimburse for fuel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21573

Date of Disbursement

12 / 05 / 2008

Amount of Each Disbursement this Period

19.76

SEE BELOW: REIMBURSE FOR FUEL

SUBTOTAL of Disbursements This Page (optional)

769.76

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Mack Daddys

Mailing Address 4325 Clearwater Rd

City
Saint Cloud

State
MN

Zip Code
56301-9632

Purpose of Disbursement
SCHNEIDER - FUEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21574

Date of Disbursement

12 / 05 / 2008

Amount of Each Disbursement this Period

19.76

[MEMO ITEM]

MEMO: SCHNEIDER - FUEL

B.

Full Name (Last, First, Middle Initial)

Andrew J. Schneider

Mailing Address 6618 Inner Dr

City
Madison

State
WI

Zip Code
53705-4201

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21768

Date of Disbursement

12 / 08 / 2008

Amount of Each Disbursement this Period

450.00

MEALS

C.

Full Name (Last, First, Middle Initial)

Jeffrey Schultz

Mailing Address 430 Harrison Ave Apt 205
Apt. 205

City
Beloit

State
WI

Zip Code
53511-6366

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21817

Date of Disbursement

12 / 08 / 2008

Amount of Each Disbursement this Period

450.00

MEALS

SUBTOTAL of Disbursements This Page (optional)

900.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Mia Semuta

Mailing Address 25 B South Eighth Street

City Lemoyne State PA Zip Code 17043-

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21823

Date of Disbursement

12 / 08 / 2008

Amount of Each Disbursement this Period

450.00

MEALS

B.

Full Name (Last, First, Middle Initial)
Coleman For Senate

Mailing Address 680 Transfer Rd

City Saint Paul State MN Zip Code 55114-4502

Purpose of Disbursement
Regular/Usual Office Rent

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21515

Date of Disbursement

12 / 05 / 2008

Amount of Each Disbursement this Period

1800.00

REGULAR/USUAL OFFICE RENT

C.

Full Name (Last, First, Middle Initial)
Cardmember Services

Mailing Address PO Box 790408

City Saint Louis State MO Zip Code 63179-0408

Purpose of Disbursement
SEE BELOW: CC PAYMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21884

Date of Disbursement

11 / 25 / 2008

Amount of Each Disbursement this Period

15825.94

SEE BELOW: CC PAYMENT

SUBTOTAL of Disbursements This Page (optional)

18075.94

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Anchor Paper Co.

Mailing Address 480 Broadway St

City Saint Paul State MN Zip Code 55101-

Purpose of Disbursement
CC - PAPER

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21906

Date of Disbursement

/ /

Amount of Each Disbursement this Period

159.15

[MEMO ITEM]

MEMO: CC - PAPER

B.

Full Name (Last, First, Middle Initial)
Best Buy # 329

Mailing Address Maple Grove Mall

City Maple Grove State MN Zip Code 55369-

Purpose of Disbursement
CC - PRINTER/INK

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21919

Date of Disbursement

/ /

Amount of Each Disbursement this Period

491.03

[MEMO ITEM]

MEMO: CC - PRINTER/INK

C.

Full Name (Last, First, Middle Initial)
Blink Bonnie

Mailing Address 237 E. 7th Street

City St. Paul State MN Zip Code 55101-

Purpose of Disbursement
CC - MEAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21901

Date of Disbursement

/ /

Amount of Each Disbursement this Period

101.00

[MEMO ITEM]

MEMO: CC - MEAL

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Super Buffet - St. Cloud

Mailing Address 1020 4th St SE

City Saint Cloud State MN Zip Code 56304-1245

Purpose of Disbursement
CC - MEALS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21922

Date of Disbursement

11 / 25 / 2008

Amount of Each Disbursement this Period

200.00

[MEMO ITEM]

MEMO: CC - MEALS

B.

Full Name (Last, First, Middle Initial)
Budget Car Rental

Mailing Address 4650 Glumack Dr

City Saint Paul State MN Zip Code 55111-3078

Purpose of Disbursement
CC - CAR RENTAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21925

Date of Disbursement

11 / 25 / 2008

Amount of Each Disbursement this Period

2420.25

[MEMO ITEM]

MEMO: CC - CAR RENTAL

C.

Full Name (Last, First, Middle Initial)
Budget Car Rental

Mailing Address 4650 Glumack Dr

City Saint Paul State MN Zip Code 55111-3078

Purpose of Disbursement
CC - CAR RENTAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21940

Date of Disbursement

11 / 25 / 2008

Amount of Each Disbursement this Period

2919.99

[MEMO ITEM]

MEMO: CC - CAR RENTAL

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 175 / 322

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Nelsons Cheese & Deli

Mailing Address 1562 Como Avenue

City State Zip Code
St. Paul MN 55108-

Purpose of Disbursement
CC - MEAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21913

Date of Disbursement

/ /

Amount of Each Disbursement this Period

115.78

[MEMO ITEM]

MEMO: CC - MEAL

B.

Full Name (Last, First, Middle Initial)
Walmart Co

Mailing Address 150 University Ave

City State Zip Code
Saint Paul MN 55104-

Purpose of Disbursement
CC - PAPER/PENS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21938

Date of Disbursement

/ /

Amount of Each Disbursement this Period

98.97

[MEMO ITEM]

MEMO: CC - PAPER/PENS

C.

Full Name (Last, First, Middle Initial)
Fastenal Company

Mailing Address 2001 Theurer Blvd

City State Zip Code
Winona MN 55987-1500

Purpose of Disbursement
CC - ELECTRICAL SUPPLIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21900

Date of Disbursement

/ /

Amount of Each Disbursement this Period

142.48

[MEMO ITEM]

MEMO: CC - ELECTRICAL SUPPLIES

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Florida Business Information

Mailing Address P.o. Box 193

City State Zip Code
Bell FL 32619-

Purpose of Disbursement
CC - CLIP SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21897

Date of Disbursement

/ /

Amount of Each Disbursement this Period

338.00

[MEMO ITEM]

MEMO: CC - CLIP SERVICES

B.

Full Name (Last, First, Middle Initial)
Hilton Garden Inn

Mailing Address 411 Minnesota St

City State Zip Code
Saint Paul MN 55101-1703

Purpose of Disbursement
CC - LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21931

Date of Disbursement

/ /

Amount of Each Disbursement this Period

355.98

[MEMO ITEM]

MEMO: CC - LODGING

C.

Full Name (Last, First, Middle Initial)
Pizza Hut

Mailing Address 1700 Wooddale Drive

City State Zip Code
Woodbury MN 55125-

Purpose of Disbursement
CC-MEAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22369

Date of Disbursement

/ /

Amount of Each Disbursement this Period

86.42

[MEMO ITEM]

MEMO: CC-MEAL

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) PayPal Inc.	Transaction ID: 90921.E21905 Date of Disbursement
Mailing Address 2211 N 1st St	<div> <div>11</div> <div>25</div> <div>2008</div> </div>
City San Jose State CA Zip Code 95131-2021	Amount of Each Disbursement this Period
Purpose of Disbursement CC - CELL PHONE PURCHASE	<div>14.22</div>
Candidate Name	<div>Category/ Type</div>
<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	[MEMO ITEM] MEMO: CC - CELL PHONE PURCHASE
B. Full Name (Last, First, Middle Initial) Jimmy Johns # 382	Transaction ID: 90921.E21936 Date of Disbursement
Mailing Address 519 Jackson Street	<div> <div>11</div> <div>25</div> <div>2008</div> </div>
City St. Paul State MN Zip Code 55101-	Amount of Each Disbursement this Period
Purpose of Disbursement CC - MEALS	<div>42.00</div>
Candidate Name	<div>Category/ Type</div>
<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	[MEMO ITEM] MEMO: CC - MEALS
C. Full Name (Last, First, Middle Initial) PAPA JOHNS	Transaction ID: 90921.E21918 Date of Disbursement
Mailing Address 1071 Grand Ave	<div> <div>11</div> <div>25</div> <div>2008</div> </div>
City Saint Paul State MN Zip Code 55105-3002	Amount of Each Disbursement this Period
Purpose of Disbursement CC - MEALS	<div>1573.10</div>
Candidate Name	<div>Category/ Type</div>
<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	[MEMO ITEM] MEMO: CC - MEALS

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) PAPA JOHNS	Transaction ID: 90921.E21939 Date of Disbursement																				
Mailing Address 1071 Grand Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	5		2	0	0	8												
City Saint Paul State MN Zip Code 55105-3002	Amount of Each Disbursement this Period																				
Purpose of Disbursement CC - MEALS	<table border="1"> <tr> <td colspan="10">28.00</td> </tr> </table>	28.00																			
28.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
[MEMO ITEM] MEMO: CC - MEALS																					
B. Full Name (Last, First, Middle Initial) Election Mall Technology	Transaction ID: 90921.E21898 Date of Disbursement																				
Mailing Address 1101 Pennsylvania Ave NW 6th Fl	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	5		2	0	0	8												
City Washington State DC Zip Code 20004-	Amount of Each Disbursement this Period																				
Purpose of Disbursement CC - ONLINE FUND/NON CAND	<table border="1"> <tr> <td colspan="10">495.00</td> </tr> </table>	495.00																			
495.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
[MEMO ITEM] MEMO: CC - ONLINE FUND/NON CAND																					
C. Full Name (Last, First, Middle Initial) Election Mall Technology	Transaction ID: 90921.E21899 Date of Disbursement																				
Mailing Address 1101 Pennsylvania Ave NW 6th Fl	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	5		2	0	0	8												
City Washington State DC Zip Code 20004-	Amount of Each Disbursement this Period																				
Purpose of Disbursement CC - ONLINE FUND/NON CAND	<table border="1"> <tr> <td colspan="10">1500.00</td> </tr> </table>	1500.00																			
1500.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
[MEMO ITEM] MEMO: CC - ONLINE FUND/NON CAND																					

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Pizza Man

Mailing Address 2744 Douglas Dr N

City State Zip Code
Minneapolis MN 55422-2402

Purpose of Disbursement
CC - MEAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21912

Date of Disbursement

/ /

Amount of Each Disbursement this Period

120.81

[MEMO ITEM]

MEMO: CC - MEAL

B.

Full Name (Last, First, Middle Initial)
Lowes

Mailing Address 11201 Fountains Dr

City State Zip Code
Maple Grove MN 55369-7201

Purpose of Disbursement
CC - OFFICE FURNITURE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21902

Date of Disbursement

/ /

Amount of Each Disbursement this Period

200.80

[MEMO ITEM]

MEMO: CC - OFFICE FURNITURE

C.

Full Name (Last, First, Middle Initial)
Office Max - St. Paul

Mailing Address 1490 W. University Ave

City State Zip Code
St. Paul MN 55104-

Purpose of Disbursement
CC - OFFICE FURN

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21915

Date of Disbursement

/ /

Amount of Each Disbursement this Period

458.91

[MEMO ITEM]

MEMO: CC - OFFICE FURN

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Midway Party Rental	Transaction ID: 90921.E21929 Date of Disbursement
Mailing Address 2110 Gilbert Ave.	<div> <div>^M1</div> <div>^M1</div> <div>/</div> <div>^D2</div> <div>^D5</div> <div>/</div> <div>^Y2</div> <div>^Y0</div> <div>^Y0</div> <div>^Y8</div> </div>
City St. Paul State MN Zip Code 55104-	Amount of Each Disbursement this Period
Purpose of Disbursement CC - EQUIPMENT RENTAL	<div>42.90</div>
Candidate Name	<div>Category/ Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: CC - EQUIPMENT RENT- AL
B. Full Name (Last, First, Middle Initial) Super 8 Motel - Buffalo	Transaction ID: 90921.E21926 Date of Disbursement
Mailing Address 303 10th Ave S	<div> <div>^M1</div> <div>^M1</div> <div>/</div> <div>^D2</div> <div>^D5</div> <div>/</div> <div>^Y2</div> <div>^Y0</div> <div>^Y0</div> <div>^Y8</div> </div>
City Buffalo State MN Zip Code 55313-2302	Amount of Each Disbursement this Period
Purpose of Disbursement CC - LODGING	<div>224.21</div>
Candidate Name	<div>Category/ Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: CC - LODGING
C. Full Name (Last, First, Middle Initial) Pizza N Pasta	Transaction ID: 90921.E21920 Date of Disbursement
Mailing Address 105 W 2nd St	<div> <div>^M1</div> <div>^M1</div> <div>/</div> <div>^D2</div> <div>^D5</div> <div>/</div> <div>^Y2</div> <div>^Y0</div> <div>^Y0</div> <div>^Y8</div> </div>
City Chaska State MN Zip Code 55318-1907	Amount of Each Disbursement this Period
Purpose of Disbursement CC - MEALS	<div>309.73</div>
Candidate Name	<div>Category/ Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: CC - MEALS

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Dominos Pizza - Burnsville	Transaction ID: 90921.E21928 Date of Disbursement
Mailing Address 13756 Nicollet Ave	<div> <div>11</div> <div>25</div> <div>2008</div> </div>
City Burnsville State MN Zip Code 55337-4003	Amount of Each Disbursement this Period
Purpose of Disbursement CC - MEALS	<div>34.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Dominos Pizza - St. Paul	Transaction ID: 90921.E21903 Date of Disbursement
Mailing Address 1231 Pierce Butler Rte	<div> <div>11</div> <div>25</div> <div>2008</div> </div>
City Saint Paul State MN Zip Code 55104-1452	Amount of Each Disbursement this Period
Purpose of Disbursement CC - MEAL	<div>42.32</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Eden Pizza	Transaction ID: 90921.E21930 Date of Disbursement
Mailing Address 629 Aldine St	<div> <div>11</div> <div>25</div> <div>2008</div> </div>
City Saint Paul State MN Zip Code 55104-2271	Amount of Each Disbursement this Period
Purpose of Disbursement CC - MEAL	<div>62.23</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Figaros Pizza	Transaction ID: 90921.E21916 Date of Disbursement
Mailing Address 10400 Baltimore St NE	<div> <div>MM / DD / YY</div> <div>11 / 25 / 2008</div> </div>
City Minneapolis State MN Zip Code 55449-4681	Amount of Each Disbursement this Period <div>130.22</div>
Purpose of Disbursement CC - MEALS Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ [MEMO ITEM] MEMO: CC - MEALS
B. Full Name (Last, First, Middle Initial) Mamas Pizza -St Paul	Transaction ID: 90921.E21911 Date of Disbursement
Mailing Address 961 Rice St	<div> <div>MM / DD / YY</div> <div>11 / 25 / 2008</div> </div>
City Saint Paul State MN Zip Code 55117-4950	Amount of Each Disbursement this Period <div>116.90</div>
Purpose of Disbursement CC - MEAL Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ [MEMO ITEM] MEMO: CC - MEAL
C. Full Name (Last, First, Middle Initial) Lowes	Transaction ID: 90921.E21937 Date of Disbursement
Mailing Address 3205 Vicksburg Ln N	<div> <div>MM / DD / YY</div> <div>11 / 25 / 2008</div> </div>
City Minneapolis State MN Zip Code 55447-1317	Amount of Each Disbursement this Period <div>17.48</div>
Purpose of Disbursement CC - LIGHTS Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ [MEMO ITEM] MEMO: CC - LIGHTS

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
US Post Office

Mailing Address 401 Kellogg Blvd E

City Saint Paul State MN Zip Code 55101-

Purpose of Disbursement
Party fundraising Postage/Non FEA
Candidate Name

Category/
Type

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

Transaction ID: 90921.E21907
Date of Disbursement

/ /

Amount of Each Disbursement this Period

585.00

[MEMO ITEM]

MEMO: PARTY FUNDRAISING
POSTAGE/NON FEA

B.

Full Name (Last, First, Middle Initial)
Rainbow Foods

Mailing Address 1276 Town Center Dr

City Saint Paul State MN Zip Code 55123-

Purpose of Disbursement
CC - MEALS
Candidate Name

Category/
Type

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

Transaction ID: 90921.E21932
Date of Disbursement

/ /

Amount of Each Disbursement this Period

44.69

[MEMO ITEM]

MEMO: CC - MEALS

C.

Full Name (Last, First, Middle Initial)
Milos Sandwiches

Mailing Address 1302 4th St E

City Saint Paul State MN Zip Code 55106-5312

Purpose of Disbursement
CC - MEALS
Candidate Name

Category/
Type

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

Transaction ID: 90921.E21914
Date of Disbursement

/ /

Amount of Each Disbursement this Period

373.74

[MEMO ITEM]

MEMO: CC - MEALS

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
E-Fax Plus Services

Mailing Address 6922 Hollywood Blvd Fl 5
5th Floor

City Los Angeles State CA Zip Code 90028-6117

Purpose of Disbursement
SERVICE FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22437

Date of Disbursement

12 / 15 / 2008

Amount of Each Disbursement this Period

10.00

[MEMO ITEM]

MEMO: SERVICE FEE

B.

Full Name (Last, First, Middle Initial)
Kowalskis Shopping Center

Mailing Address 1261 Grand Ave

City Saint Paul State MN Zip Code 55105-2603

Purpose of Disbursement
CC - MEAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21908

Date of Disbursement

11 / 25 / 2008

Amount of Each Disbursement this Period

72.14

[MEMO ITEM]

MEMO: CC - MEAL

C.

Full Name (Last, First, Middle Initial)
Quiznos

Mailing Address 111 Kellogg Blvd E

City Saint Paul State MN Zip Code 55101-1236

Purpose of Disbursement
CC - MEALS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21923

Date of Disbursement

11 / 25 / 2008

Amount of Each Disbursement this Period

198.89

[MEMO ITEM]

MEMO: CC - MEALS

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) UPS Store	Transaction ID: 90921.E21909 Date of Disbursement
Mailing Address 3432 Denmark Ave	<div> <div>^M1</div> <div>^M1</div> <div>/</div> <div>^D2</div> <div>^D5</div> <div>/</div> <div>^Y2</div> <div>^Y0</div> <div>^Y0</div> <div>^Y8</div> </div>
City Eagan State MN Zip Code 55123-	Amount of Each Disbursement this Period
Purpose of Disbursement CC - PARTY PRINTING/NONFEA	<div>72.21</div>
Candidate Name	<div>Category/ Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: CC - PARTY PRINTING- /NONFEA
B. Full Name (Last, First, Middle Initial) Menards - St. Paul	Transaction ID: 90921.E23344 Date of Disbursement
Mailing Address 2005 University Ave W	<div> <div>^M1</div> <div>^M1</div> <div>/</div> <div>^D2</div> <div>^D5</div> <div>/</div> <div>^Y2</div> <div>^Y0</div> <div>^Y0</div> <div>^Y8</div> </div>
City Saint Paul State MN Zip Code 55104-3431	Amount of Each Disbursement this Period
Purpose of Disbursement CC - FURNITURE	<div>18.28</div>
Candidate Name	<div>Category/ Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: CC - FURNITURE
C. Full Name (Last, First, Middle Initial) Target Superstore	Transaction ID: 90921.E21921 Date of Disbursement
Mailing Address 1300 University Ave W	<div> <div>^M1</div> <div>^M1</div> <div>/</div> <div>^D2</div> <div>^D5</div> <div>/</div> <div>^Y2</div> <div>^Y0</div> <div>^Y0</div> <div>^Y8</div> </div>
City Saint Paul State MN Zip Code 55104-	Amount of Each Disbursement this Period
Purpose of Disbursement CC - MEALS	<div>146.35</div>
Candidate Name	<div>Category/ Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: CC - MEALS

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Target Superstore

Mailing Address 1300 University Ave W

City State Zip Code
Saint Paul MN 55104-

Purpose of Disbursement
CC - PAPER/PENS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21910

Date of Disbursement

11 / 25 / 2008

Amount of Each Disbursement this Period

11.58

[MEMO ITEM]

MEMO: CC - PAPER/PENS

B.

Full Name (Last, First, Middle Initial)
Tivo

Mailing Address 2180 Gold Street

City State Zip Code
Alviso CA 95002-

Purpose of Disbursement
CC - SERVICE CHARGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21904

Date of Disbursement

11 / 25 / 2008

Amount of Each Disbursement this Period

12.95

[MEMO ITEM]

MEMO: CC - SERVICE CHARGE

C.

Full Name (Last, First, Middle Initial)
Budget Truck Rental

Mailing Address 1413 Huntington Valley Rd

City State Zip Code
Saint Paul MN 55108-

Purpose of Disbursement
CC-TRUCK RENTAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22370

Date of Disbursement

11 / 25 / 2008

Amount of Each Disbursement this Period

742.59

[MEMO ITEM]

MEMO: CC-TRUCK RENTAL

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Budget Truck Rental

Mailing Address 1413 Huntington Valley Rd

City State Zip Code
Saint Paul MN 55108-

Purpose of Disbursement
CC - TRUCK RENTAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21924

Date of Disbursement

/ /

Amount of Each Disbursement this Period

695.64

[MEMO ITEM]

MEMO: CC - TRUCK RENTAL

B.

Full Name (Last, First, Middle Initial)
Peter Sheridan

Mailing Address 52 Spruce St

City State Zip Code
Princeton NJ 08542-3812

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21834

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

MEALS

C.

Full Name (Last, First, Middle Initial)
Brett Shogren

Mailing Address 4516 Reno Rd NW

City State Zip Code
Washington DC 20008-2939

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21779

Date of Disbursement

/ /

Amount of Each Disbursement this Period

350.00

MEALS

SUBTOTAL of Disbursements This Page (optional)

850.00

TOTAL This Period (last page this line number only)

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Susan Shogren-Smith

Mailing Address
600 62nd Ave N

City
Brooklyn Center

State
MN

Zip Code
55430-2207

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary
☐ Other (specify) ▼

General

State:

District:

Transaction ID: 90921.E21843

Date of Disbursement
MM / DD / YYYY
12 / 08 / 2008

Amount of Each Disbursement this Period

500.00

MEALS

B.

Full Name (Last, First, Middle Initial)
Pat Shortridge

Mailing Address
1505 Osprey Ct

City
Hugo

State
MN

Zip Code
55038-4607

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary
☐ Other (specify) ▼

General

State:

District:

Transaction ID: 90921.E21831

Date of Disbursement
MM / DD / YYYY
12 / 08 / 2008

Amount of Each Disbursement this Period

350.00

MEALS

C.

Full Name (Last, First, Middle Initial)
Kevin Shuvalov

Mailing Address
1609 Shoal Creek Blvd Ste 203
Suite 203

City
Austin

State
TX

Zip Code
78701-1022

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary
☐ Other (specify) ▼

General

State:

District:

Transaction ID: 90921.E21812

Date of Disbursement
MM / DD / YYYY
12 / 08 / 2008

Amount of Each Disbursement this Period

400.00

MEALS

1250.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 189 / 322

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.	Full Name (Last, First, Middle Initial) Andrew Siracuse	Transaction ID: 90921.E21770 Date of Disbursement 12 / 08 / 2008
	Mailing Address 7220 Stover Ct	
	City Alexandria State VA Zip Code 22306-3511	Amount of Each Disbursement this Period 300.00
	Purpose of Disbursement Meals	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		MEALS
B.	Full Name (Last, First, Middle Initial) Mark Sprinkle	Transaction ID: 90921.E21757 Date of Disbursement 12 / 08 / 2008
	Mailing Address 3247 Longford Way	
	City Las Vegas State NV Zip Code 89121-5719	Amount of Each Disbursement this Period 750.00
	Purpose of Disbursement Meals	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		MEALS
C.	Full Name (Last, First, Middle Initial) Mark Sprinkle	Transaction ID: 90921.E22067 Date of Disbursement 12 / 18 / 2008
	Mailing Address 3247 Longford Way	
	City Las Vegas State NV Zip Code 89121-5719	Amount of Each Disbursement this Period 36.00
	Purpose of Disbursement Reimburse for mileage	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		REIMBURSE FOR MILAGE
SUBTOTAL of Disbursements This Page (optional)		1086.00
TOTAL This Period (last page this line number only)		

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 190 / 322

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Andrew Stevens

Mailing Address 937 Old Erin Way

City State Zip Code
Lansing MI 48917-4114Purpose of Disbursement
Meals

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21771

Date of Disbursement

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

Amount of Each Disbursement this Period

500.00

MEALS

B.

Full Name (Last, First, Middle Initial)

Gilliam Stewart

Mailing Address 495 14th Ave Apt 2
Apt. 2City State Zip Code
San Francisco CA 94118-2834Purpose of Disbursement
Meals

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21798

Date of Disbursement

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

Amount of Each Disbursement this Period

250.00

MEALS

C.

Full Name (Last, First, Middle Initial)

Amber Stoner

Mailing Address 2350 Phillips Rd Apt 5202
Apt. 5202City State Zip Code
Tallahassee FL 32308-5326Purpose of Disbursement
SEE BELOW: Reimburse for fuel

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21575

Date of Disbursement

M M / D D / Y Y Y Y
1 2 / 0 5 / 2 0 0 8

Amount of Each Disbursement this Period

12.58

SEE BELOW: REIMBURSE FOR
FUEL

SUBTOTAL of Disbursements This Page (optional)

762.58

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Caseys General Store

Mailing Address 720 Highway 212 W

City Granite Falls State MN Zip Code 56241-1362

Purpose of Disbursement
STONER - FUEL

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21576

Date of Disbursement

M M / D D / Y Y Y Y
1 2 / 0 5 / 2 0 0 8

Amount of Each Disbursement this Period

12.58

[MEMO ITEM]

MEMO: STONER - FUEL

B.

Full Name (Last, First, Middle Initial)

Amber Stoner

Mailing Address 2350 Phillips Rd Apt 5202
Apt. 5202

City Tallahassee State FL Zip Code 32308-5326

Purpose of Disbursement
Meals

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21766

Date of Disbursement

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

Amount of Each Disbursement this Period

400.00

MEALS

C.

Full Name (Last, First, Middle Initial)

Travis Symoniak

Mailing Address 12457 Ilex St NW

City Coon Rapids State MN Zip Code 55448-2664

Purpose of Disbursement
Reimburse for milage

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21207

Date of Disbursement

M M / D D / Y Y Y Y
1 1 / 2 5 / 2 0 0 8

Amount of Each Disbursement this Period

79.83

REIMBURSE FOR MILAGE

SUBTOTAL of Disbursements This Page (optional)

479.83

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Megan Taylor

Mailing Address 1015 Independence Ave SE

City Washington State DC Zip Code 20003-3921

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21822

Date of Disbursement

/ /

Amount of Each Disbursement this Period

300.00

MEALS

B.

Full Name (Last, First, Middle Initial)
Stephen Thomas

Mailing Address 2891 49th St E

City Inver Grove Height State MN Zip Code 55076-

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E24439

Date of Disbursement

/ /

Amount of Each Disbursement this Period

300.00

MEALS

C.

Full Name (Last, First, Middle Initial)
Robert D. Todd

Mailing Address 715 Northern Hills Dr NE

City Rochester State MN Zip Code 55906-4088

Purpose of Disbursement
SEE BELOW: Reimburse for phone

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E22278

Date of Disbursement

/ /

Amount of Each Disbursement this Period

175.00

SEE BELOW: REIMBURSE FOR
PHONE

SUBTOTAL of Disbursements This Page (optional)

775.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Verizon Wireless

Mailing Address P.O. Box 790422

City State Zip Code
St. Louis MO 63179-

Purpose of Disbursement
TODD-CELL PHONE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22296

Date of Disbursement

12 / 23 / 2008

Amount of Each Disbursement this Period

175.00

[MEMO ITEM]

MEMO: TODD-CELL PHONE

B.

Full Name (Last, First, Middle Initial)
Robert D. Todd

Mailing Address 715 Northern Hills Dr NE

City State Zip Code
Rochester MN 55906-4088

Purpose of Disbursement
Reimburse for milage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22277

Date of Disbursement

12 / 23 / 2008

Amount of Each Disbursement this Period

809.26

REIMBURSE FOR MILAGE

C.

Full Name (Last, First, Middle Initial)
Peter Towery

Mailing Address 7004 Mark Terrace Dr

City State Zip Code
Minneapolis MN 55439-1626

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21835

Date of Disbursement

12 / 08 / 2008

Amount of Each Disbursement this Period

300.00

MEALS

SUBTOTAL of Disbursements This Page (optional)

1109.26

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Bill Toye

Mailing Address 15953 NE 83rd Way

City State Zip Code
Redmond WA 98052-3892

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21778

Date of Disbursement

/ /

Amount of Each Disbursement this Period

850.00

MEALS

B.

Full Name (Last, First, Middle Initial)

Michael Travernier

Mailing Address 1651 Lake Valentine Rd

City State Zip Code
Saint Paul MN 55112-2840

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21827

Date of Disbursement

/ /

Amount of Each Disbursement this Period

400.00

MEALS

C.

Full Name (Last, First, Middle Initial)

Michael Vallante

Mailing Address 935 Medford Rd

City State Zip Code
Pasadena CA 91107-1914

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21828

Date of Disbursement

/ /

Amount of Each Disbursement this Period

450.00

MEALS

SUBTOTAL of Disbursements This Page (optional)

1700.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Nathan Vanderploeg

Mailing Address 1333 H St NW Ste 620
Suite 620 East

City Washington State DC Zip Code 20005-4707

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21830

Date of Disbursement

/ /

Amount of Each Disbursement this Period

400.00

MEALS

B.

Full Name (Last, First, Middle Initial)
Eric Ventimiglia

Mailing Address 72606 Oxal Pt

City Bruce Twp State MI Zip Code 48065-3927

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21796

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

MEALS

C.

Full Name (Last, First, Middle Initial)
Tyler Verry

Mailing Address 432 N 76th Ave W

City Duluth State MN Zip Code 55807-

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E24442

Date of Disbursement

/ /

Amount of Each Disbursement this Period

340.00

MEALS

SUBTOTAL of Disbursements This Page (optional)

1240.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Kristy Wawryk Mailing Address 4455 Sucia Dr	Transaction ID: 90921.E21815 Date of Disbursement <div> <div>12</div> <div>08</div> <div>2008</div> </div>
City Ferndale State WA Zip Code 98248-9582 Purpose of Disbursement Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>500.00</div> MEALS
B. Full Name (Last, First, Middle Initial) John Weber Mailing Address 1507 Riverview Dr City Little Falls State MN Zip Code 56345- Purpose of Disbursement Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90921.E21808 Date of Disbursement <div> <div>12</div> <div>08</div> <div>2008</div> </div> Amount of Each Disbursement this Period <div>300.00</div> MEALS
C. Full Name (Last, First, Middle Initial) Ryan Williams Mailing Address 6337 E Catesby Rd City Paradise Valley State AZ Zip Code 85253-3585 Purpose of Disbursement Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90921.E21838 Date of Disbursement <div> <div>12</div> <div>08</div> <div>2008</div> </div> Amount of Each Disbursement this Period <div>800.00</div> MEALS

SUBTOTAL of Disbursements This Page (optional)

1600.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Robert Wills

Mailing Address 1491 Woodview St E

City Saint Paul State MN Zip Code 55122-1323

Purpose of Disbursement
Reimburse for mileage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21544

Date of Disbursement

/ /

Amount of Each Disbursement this Period

381.89

REIMBURSE FOR MILAGE

B.

Full Name (Last, First, Middle Initial)
Robert Wills

Mailing Address 1491 Woodview St E

City Saint Paul State MN Zip Code 55122-1323

Purpose of Disbursement
SEE BELOW: Reimburse for Voter File

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21870

Date of Disbursement

/ /

Amount of Each Disbursement this Period

70.50

SEE BELOW: REIMBURSE FOR
VOTER FILE

C.

Full Name (Last, First, Middle Initial)
Vital Statistics, Inc.

Mailing Address 1590 Highway 55

City Hastings State MN Zip Code 55033-2343

Purpose of Disbursement
WILLS - PHOTOCOPIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21871

Date of Disbursement

/ /

Amount of Each Disbursement this Period

70.50

[MEMO ITEM]
MEMO: WILLS - PHOTOCOPIES

SUBTOTAL of Disbursements This Page (optional)

452.39

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Robert Wills

Mailing Address 1491 Woodview St E

City State Zip Code
Saint Paul MN 55122-1323

Purpose of Disbursement
Reimburse for mileage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21869

Date of Disbursement

/ /

Amount of Each Disbursement this Period

33.60

REIMBURSE FOR MILEAGE

B.

Full Name (Last, First, Middle Initial)
Jeffrey Woods

Mailing Address 14610 Bowers Dr NW

City State Zip Code
Anoka MN 55303-7209

Purpose of Disbursement
Reimburse for mileage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21545

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1054.30

REIMBURSE FOR MILEAGE

C.

Full Name (Last, First, Middle Initial)
Shane Wyman

Mailing Address 9124 Tyler St NE

City State Zip Code
Minneapolis MN 55434-

Purpose of Disbursement
Reimburse for Mileage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E25915

Date of Disbursement

/ /

Amount of Each Disbursement this Period

444.44

REIMBURSE FOR MILEAGE

SUBTOTAL of Disbursements This Page (optional)

1532.34

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Shane Wyman

Mailing Address 9124 Tyler St NE

City Minneapolis State MN Zip Code 55434-

Purpose of Disbursement
Reimburse for Milage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E25916

Date of Disbursement

12 / 18 / 2008

Amount of Each Disbursement this Period

47.18

REIMBURSE FOR MILAGE

B.

Full Name (Last, First, Middle Initial)

Troy Young

Mailing Address 19705 Estes Path

City Farmington State MN Zip Code 55024-7202

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21849

Date of Disbursement

12 / 08 / 2008

Amount of Each Disbursement this Period

700.00

MEALS

SUBTOTAL of Disbursements This Page (optional)

747.18

TOTAL This Period (last page this line number only)

323590.51

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial)
Republican Party Of MinnesotaMailing Address 525 Park St
Suite 250

City Saint Paul State MN Zip Code 55103-2111

Purpose of Disbursement
Trans Excessive Contr-Steve Mihaylo
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22329

Date of Disbursement

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

Amount of Each Disbursement this Period

75.00

B. Full Name (Last, First, Middle Initial)
MN Coleman Victory Committee

Mailing Address 7315 Wisconsin Ave Ste 310E

City Bethesda State MD Zip Code 20814-3221

Purpose of Disbursement
11/11 New Rep Maj PAC Refund
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22295

Date of Disbursement

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

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

5075.00

TOTAL This Period (last page this line number only)

5075.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Alliance Bank

Mailing Address 444 Cedar St

City
Saint Paul

State
MN

Zip Code
55101-2179

Purpose of Disbursement
Repayment of Other Loan Repayment of Loa

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21704

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3330.01

SUBTOTAL of Disbursements This Page (optional)

3330.01

TOTAL This Period (last page this line number only)

3330.01

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

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

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Trimble & Associates

Mailing Address 10210 WAYZATA BLVD
SUITE 130

City Hopkins State MN Zip Code 55305-

Purpose of Disbursement
LEGAL FEES - RECOUNT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22287

Date of Disbursement

/ /

Amount of Each Disbursement this Period

54443.00

B.

Full Name (Last, First, Middle Initial)
Trimble & Associates

Mailing Address 10210 WAYZATA BLVD
SUITE 130

City Hopkins State MN Zip Code 55305-

Purpose of Disbursement
LEGAL FEES - RECOUNT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22096

Date of Disbursement

/ /

Amount of Each Disbursement this Period

52961.25

C.

Full Name (Last, First, Middle Initial)
Trimble & Associates

Mailing Address 10210 WAYZATA BLVD
SUITE 130

City Hopkins State MN Zip Code 55305-

Purpose of Disbursement
LEGAL FEES - RECOUNT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21199

Date of Disbursement

/ /

Amount of Each Disbursement this Period

45109.00

SUBTOTAL of Disbursements This Page (optional)

152513.25

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Trimble & Associates

Mailing Address 10210 WAYZATA BLVD
SUITE 130

City Hopkins State MN Zip Code 55305-

Purpose of Disbursement
LEGAL FEES - RECOUNT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22299

Date of Disbursement

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

Amount of Each Disbursement this Period

37424.50

B.

Full Name (Last, First, Middle Initial)
Alliance Bank

Mailing Address 444 Cedar St

City Saint Paul State MN Zip Code 55101-2179

Purpose of Disbursement
BANK FEE-RECOUNT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22328

Date of Disbursement

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

Amount of Each Disbursement this Period

19.73

C.

Full Name (Last, First, Middle Initial)
FLS Connect

Mailing Address 7300 Hudson Blvd N Ste 270

City Saint Paul State MN Zip Code 55128-7143

Purpose of Disbursement
FUNDRAISING TELEMARKETING RECOUNT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21197

Date of Disbursement

M M / D D / Y Y Y Y
1 1 / 2 5 / 2 0 0 8

Amount of Each Disbursement this Period

24484.65

SUBTOTAL of Disbursements This Page (optional)

61928.88

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Pinnacle Direct, Inc.

Mailing Address 15260 113th Street North

City State Zip Code
Stillwater MN 55082-

Purpose of Disbursement
PARTY FUNDRAISING MAILHOUSE/RECOUNT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22286

Date of Disbursement

/ /

Amount of Each Disbursement this Period

18499.86

B.

Full Name (Last, First, Middle Initial)
Steve Brown Direct Mail, Inc

Mailing Address 731 Divot Drive

City State Zip Code
Fernley NV 89408-

Purpose of Disbursement
PARTY FUNDRAISING MAILHOUSE/RECOUNT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22288

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4273.00

C.

Full Name (Last, First, Middle Initial)
Visa Elan

Mailing Address 7300 Chapman Hwy

City State Zip Code
Knoxville TN 37920-

Purpose of Disbursement
E-MERCHANT FEES-RECOUNT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21950

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2584.14

SUBTOTAL of Disbursements This Page (optional)

25357.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Fundraising Associates	Transaction ID: 90921.E22097 Date of Disbursement
Mailing Address 7705 Tanglewood Ct	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 8 / 2 0 0 8</div> </div>
<div> <div>City State Zip Code</div> <div>Minneapolis MN 55439-</div> </div> <div> <div>Purpose of Disbursement</div> <div>PARTY FUNDRAISING - RECOUNT</div> </div> <div> <div>Candidate Name</div> <div></div> </div> <div> <div>Category/Type</div> <div></div> </div>	Amount of Each Disbursement this Period <div>500.00</div>
<div> <div>Office Sought:</div> <div> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </div> </div> <div> <div>Disbursement For:</div> <div> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </div> </div> <div> <div>State: District:</div> <div></div> </div>	
B. Full Name (Last, First, Middle Initial) Fundraising Associates	Transaction ID: 90921.E22098 Date of Disbursement
Mailing Address 7705 Tanglewood Ct	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 8 / 2 0 0 8</div> </div>
<div> <div>City State Zip Code</div> <div>Minneapolis MN 55439-</div> </div> <div> <div>Purpose of Disbursement</div> <div>PARTY FUNDRAISING - RECOUNT</div> </div> <div> <div>Candidate Name</div> <div></div> </div> <div> <div>Category/Type</div> <div></div> </div>	Amount of Each Disbursement this Period <div>250.00</div>
<div> <div>Office Sought:</div> <div> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </div> </div> <div> <div>Disbursement For:</div> <div> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </div> </div> <div> <div>State: District:</div> <div></div> </div>	
C. Full Name (Last, First, Middle Initial) MR&A, LLC	Transaction ID: 90921.E21735 Date of Disbursement
Mailing Address 2305 Rhawn St	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 9 / 2 0 0 8</div> </div>
<div> <div>City State Zip Code</div> <div>Philadelphia PA 19152-3315</div> </div> <div> <div>Purpose of Disbursement</div> <div>RECOUNT CONSULTING FEE</div> </div> <div> <div>Candidate Name</div> <div></div> </div> <div> <div>Category/Type</div> <div></div> </div>	Amount of Each Disbursement this Period <div>5000.00</div>
<div> <div>Office Sought:</div> <div> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </div> </div> <div> <div>Disbursement For:</div> <div> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </div> </div> <div> <div>State: District:</div> <div></div> </div>	
SUBTOTAL of Disbursements This Page (optional)	<div>5750.00</div>
TOTAL This Period (last page this line number only)	<div>245549.13</div>

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

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

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Paychex

Mailing Address 1210 Northland Dr Ste 100

City State Zip Code
Saint Paul MN 55120-1181

Purpose of Disbursement
SEE BELOW: Garnishments

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21611

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1029.18

SEE BELOW: GARNISHMENTS

B.

Full Name (Last, First, Middle Initial)
MN Dept of Revenue

Mailing Address 658 Cedar St Ste 400

City State Zip Code
Saint Paul MN 55155-1603

Purpose of Disbursement
GARNISHMENTS-FEA MN DEPT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21616

Date of Disbursement

/ /

Amount of Each Disbursement this Period

144.06

[MEMO ITEM]

MEMO: GARNISHMENTS-FEA MN DEPT

C.

Full Name (Last, First, Middle Initial)
Osi Education Services, Inc.

Mailing Address PO Box 929

City State Zip Code
Brookfield WI 53008-0929

Purpose of Disbursement
GARNISHMENTS-OSI EDUCATION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21619

Date of Disbursement

/ /

Amount of Each Disbursement this Period

79.22

[MEMO ITEM]

MEMO: GARNISHMENTS-OSI EDUCATION

SUBTOTAL of Disbursements This Page (optional)

1029.18

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) MN Child Support Center	Transaction ID: 90921.E21618 Date of Disbursement
Mailing Address PO Box 64306	<div> <div>12</div> <div>05</div> <div>2008</div> </div>
City Saint Paul State MN Zip Code 55164-0306	Amount of Each Disbursement this Period
Purpose of Disbursement WITHHOLDINGS	<div>745.90</div>
Candidate Name	<div>Category/ Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Wi Spt Collections Trust Fund	Transaction ID: 90921.E21620 Date of Disbursement
Mailing Address PO Box 74400	<div> <div>12</div> <div>05</div> <div>2008</div> </div>
City Milwaukee State WI Zip Code 53274-0001	Amount of Each Disbursement this Period
Purpose of Disbursement GARNISHMENTS-WI SPT COL	<div>60.00</div>
Candidate Name	<div>Category/ Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Paychex	Transaction ID: 90921.E21610 Date of Disbursement
Mailing Address 1210 Northland Dr Ste 100	<div> <div>12</div> <div>05</div> <div>2008</div> </div>
City Saint Paul State MN Zip Code 55120-1181	Amount of Each Disbursement this Period
Purpose of Disbursement SEE BELOW: FEA Payroll Taxes	<div>17932.22</div>
Candidate Name	<div>Category/ Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

17932.22

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
MN State Unemployment

Mailing Address 332 Minnesota St

City State Zip Code
Saint Paul MN 55101-1314

Purpose of Disbursement
PAYROLL TAXES-FEA STATE U

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21617

Date of Disbursement

M M / D D / Y Y Y Y
1 2 / 0 5 / 2 0 0 8

Amount of Each Disbursement this Period

519.91

[MEMO ITEM]

MEMO: PAYROLL TAXES-FEA STATE U

B.

Full Name (Last, First, Middle Initial)
MN Dept of Revenue

Mailing Address 658 Cedar St Ste 400

City State Zip Code
Saint Paul MN 55155-1603

Purpose of Disbursement
FEA PAYROLL TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21615

Date of Disbursement

M M / D D / Y Y Y Y
1 2 / 0 5 / 2 0 0 8

Amount of Each Disbursement this Period

2393.14

[MEMO ITEM]

MEMO: FEA PAYROLL TAXES

C.

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

Mailing Address P.O. BOX 43251

City State Zip Code
Ogden UT 84201-0001

Purpose of Disbursement
FEA PAYROLL TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E25062

Date of Disbursement

M M / D D / Y Y Y Y
1 2 / 0 5 / 2 0 0 8

Amount of Each Disbursement this Period

15019.17

[MEMO ITEM]

MEMO: FEA PAYROLL TAXES

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Paychex	Transaction ID: 90921.E21608 Date of Disbursement
Mailing Address 1210 Northland Dr Ste 100	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 5 / 2 0 0 8</div> </div>
City State Zip Code Saint Paul MN 55120-1181	Amount of Each Disbursement this Period
Purpose of Disbursement SEE BELOW: FEA Salary	<div>49329.80</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ SEE BELOW: FEA SALARY
B. Full Name (Last, First, Middle Initial) Alexander J. Argo	Transaction ID: 90921.E21625 Date of Disbursement
Mailing Address 9428 Erin Ct	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 5 / 2 0 0 8</div> </div>
City State Zip Code Woodbury MN 55129-	Amount of Each Disbursement this Period
Purpose of Disbursement FEA SALARY	<div>328.08</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ [MEMO ITEM] MEMO: FEA SALARY
C. Full Name (Last, First, Middle Initial) Hayley M. Astrup	Transaction ID: 90921.E21683 Date of Disbursement
Mailing Address 602 24th St NW	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 5 / 2 0 0 8</div> </div>
City State Zip Code Austin MN 55912-	Amount of Each Disbursement this Period
Purpose of Disbursement FEA SALARY	<div>792.03</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ [MEMO ITEM] MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

49329.80

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Breanna M. Barr

Mailing Address 736 Wilson Ave

City
Saint Paul

State
MN

Zip Code
55106-5526

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21626

Date of Disbursement

/ /

Amount of Each Disbursement this Period

258.23

[MEMO ITEM]

MEMO: FEA SALARY

B.

Full Name (Last, First, Middle Initial)

Darren Bearson

Mailing Address 3930 Yellowstone Ln N

City
Plymouth

State
MN

Zip Code
55446-2818

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21703

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2677.90

[MEMO ITEM]

MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)

Christe Capistrant

Mailing Address 111 E Kellogg Blvd
 #2911

City
St Paul

State
MN

Zip Code
55101-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21627

Date of Disbursement

/ /

Amount of Each Disbursement this Period

168.46

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota**A.**

Full Name (Last, First, Middle Initial)

Ronald Wayne Carey

Mailing Address 2638 146th ave ne

City Ham Lake State MN Zip Code 55304-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E24525

Date of Disbursement

M M / D D / Y Y Y Y
1 2 / 0 5 / 2 0 0 8

Amount of Each Disbursement this Period

2503.98

[MEMO ITEM]

MEMO: FEA SALARY

B.

Full Name (Last, First, Middle Initial)

William B. Carpenter

Mailing Address 1579 H East County Rd D

City Saint Paul State MN Zip Code 55109-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21628

Date of Disbursement

M M / D D / Y Y Y Y
1 2 / 0 5 / 2 0 0 8

Amount of Each Disbursement this Period

531.15

[MEMO ITEM]

MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)

Joel Cary

Mailing Address 12809 44th PI NE

City Saint Michael State MN Zip Code 55376-3030

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21674

Date of Disbursement

M M / D D / Y Y Y Y
1 2 / 0 5 / 2 0 0 8

Amount of Each Disbursement this Period

2096.28

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Joel P. Chavez

Mailing Address 475 Dayton Ave Apt 1

City State Zip Code
St Paul MN 55102-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21629

Date of Disbursement

/ /

Amount of Each Disbursement this Period

393.66

[MEMO ITEM]

MEMO: FEA SALARY

B.

Full Name (Last, First, Middle Initial)

Susan H. Closmore

Mailing Address 1308 7th St SE Apt 13

City State Zip Code
Minneapolis MN 55414-1678

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21675

Date of Disbursement

/ /

Amount of Each Disbursement this Period

248.09

[MEMO ITEM]

MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)

Gina Lynn Countryman

Mailing Address 1282 Deercliff Ln

City State Zip Code
Eagan MN 55123-1434

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21676

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1554.61

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Benjamin Crist

Mailing Address 663 Jefferson Ave

City State Zip Code
Saint Paul MN 55102-3243

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21630

Date of Disbursement

/ /

Amount of Each Disbursement this Period

139.42

[MEMO ITEM]

MEMO: FEA SALARY

B.

Full Name (Last, First, Middle Initial)
Dana Crosby

Mailing Address 37 Front St

City State Zip Code
Norwich NY 13815-1825

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21684

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1058.30

[MEMO ITEM]

MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)
Christian G. Darouni

Mailing Address 758 Reaney Ave

City State Zip Code
St Paul MN 55106-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21631

Date of Disbursement

/ /

Amount of Each Disbursement this Period

989.07

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Patty Daugherty

Mailing Address 1395 Farrington St Apt A

City State Zip Code
Saint Paul MN 55117-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E24618

Date of Disbursement

/ /

Amount of Each Disbursement this Period

413.95

[MEMO ITEM]

MEMO: FEA SALARY

B.

Full Name (Last, First, Middle Initial)

Bethany Dorobiala

Mailing Address 9225 Cornell Bay

City State Zip Code
Woodbury MN 55125-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E24768

Date of Disbursement

/ /

Amount of Each Disbursement this Period

504.49

[MEMO ITEM]

MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)

Kimberly K. Ekmark

Mailing Address 9840 78th St S

City State Zip Code
Cottage Grove MN 55016-5229

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21685

Date of Disbursement

/ /

Amount of Each Disbursement this Period

779.58

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Nick Erickson

Mailing Address 9344 134th Street

City State Zip Code
Savage MN 55378-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21686

Date of Disbursement

/ /

Amount of Each Disbursement this Period

860.69

[MEMO ITEM]

MEMO: FEA SALARY

B.

Full Name (Last, First, Middle Initial)
Pamela A. Finney

Mailing Address 441 Wheeler St N #1

City State Zip Code
St Paul MN 55104-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21633

Date of Disbursement

/ /

Amount of Each Disbursement this Period

634.10

[MEMO ITEM]

MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)
Lucas Fischer

Mailing Address 2118 130th Ave NW

City State Zip Code
Minneapolis MN 55448-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21687

Date of Disbursement

/ /

Amount of Each Disbursement this Period

809.10

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Dorothy Fleming

Mailing Address 3101 Wendhurst Ave

City State Zip Code
St Anthony MN 55418-1725

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21701

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1333.68

[MEMO ITEM]

MEMO: FEA SALARY

B.

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

Mailing Address 680 Stewart Ave

City State Zip Code
St Paul MN 55102-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21634

Date of Disbursement

/ /

Amount of Each Disbursement this Period

392.41

[MEMO ITEM]

MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)
Karen Franze

Mailing Address 100 1st. Street Se
P.o. Box 829

City State Zip Code
Pelican Rapids MN 56572-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21688

Date of Disbursement

/ /

Amount of Each Disbursement this Period

819.43

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Timothy Gould	Transaction ID: 90921.E21681 Date of Disbursement
Mailing Address 192 Linden Circle	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 5 / 2 0 0 8</div> </div>
City Apple Valley State MN Zip Code 55124-	Amount of Each Disbursement this Period
Purpose of Disbursement FEA SALARY	<div>836.29</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: FEA SALARY
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Christopher J. Halonen	Transaction ID: 90921.E21635 Date of Disbursement
Mailing Address 680 Stewart Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 5 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55102-4117	Amount of Each Disbursement this Period
Purpose of Disbursement FEA SALARY	<div>131.63</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: FEA SALARY
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Daniel Hanover	Transaction ID: 90921.E21636 Date of Disbursement
Mailing Address 575 Grand Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 5 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55102-	Amount of Each Disbursement this Period
Purpose of Disbursement FEA SALARY	<div>563.09</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: FEA SALARY
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ►

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Dallas J. Hansen	Transaction ID: 90921.E21637 Date of Disbursement
Mailing Address 11210 Partridge St Dh	<div> <div>12</div> <div>05</div> <div>2008</div> </div>
City Coon Rapids State MN Zip Code 55433-	Amount of Each Disbursement this Period <div>311.39</div>
Purpose of Disbursement FEA SALARY Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
[MEMO ITEM] MEMO: FEA SALARY	
B. Full Name (Last, First, Middle Initial) Sarah Hansen-Jones	Transaction ID: 90921.E21638 Date of Disbursement
Mailing Address 505 Hoyt Ave E	<div> <div>12</div> <div>05</div> <div>2008</div> </div>
City Saint Paul State MN Zip Code 55106-	Amount of Each Disbursement this Period <div>450.28</div>
Purpose of Disbursement FEA SALARY Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
[MEMO ITEM] MEMO: FEA SALARY	
C. Full Name (Last, First, Middle Initial) Aaron Heidebrink	Transaction ID: 90921.E21639 Date of Disbursement
Mailing Address 1975 W University Ave #242	<div> <div>12</div> <div>05</div> <div>2008</div> </div>
City St Paul State MN Zip Code 55105-	Amount of Each Disbursement this Period <div>517.39</div>
Purpose of Disbursement FEA SALARY Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
[MEMO ITEM] MEMO: FEA SALARY	

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Thomas W. Hoffman

Mailing Address 6051 Courtyly Alcove Ave

City Woodbury State MN Zip Code 55125-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22714

Date of Disbursement

12 / 05 / 2008

Amount of Each Disbursement this Period

45.12

[MEMO ITEM]

MEMO: FEA SALARY

B.

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

Mailing Address 1185 Main St NW

City Elk River State MN Zip Code 55330-1802

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21641

Date of Disbursement

12 / 05 / 2008

Amount of Each Disbursement this Period

255.23

[MEMO ITEM]

MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)
Ronald Huettl

Mailing Address 70 Virginia St
#1

City St Paul State MN Zip Code 55107-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21642

Date of Disbursement

12 / 05 / 2008

Amount of Each Disbursement this Period

1360.97

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

John Hungate

Mailing Address 680 Stewart Ave

City
Saint Paul

State
MN

Zip Code
55102-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21643

Date of Disbursement

/ /

Amount of Each Disbursement this Period

112.87

[MEMO ITEM]

MEMO: FEA SALARY

B.

Full Name (Last, First, Middle Initial)

Kathleen Hupalo

Mailing Address 684 Delaware Ave

City
St Paul

State
MN

Zip Code
55107-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21644

Date of Disbursement

/ /

Amount of Each Disbursement this Period

370.11

[MEMO ITEM]

MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)

Matthew Kirkpatrick

Mailing Address 3900 Valley View Dr N # 303
 #303

City
Saint Paul

State
MN

Zip Code
55122-1554

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21689

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.79

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
for each category of the
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Cecilia A. Knapp

Mailing Address 417 2nd St N

City Wahpeton State ND Zip Code 58075-3908

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21690

Date of Disbursement

12 / 05 / 2008

Amount of Each Disbursement this Period

836.50

[MEMO ITEM]

MEMO: FEA SALARY

B.

Full Name (Last, First, Middle Initial)
Michael T. Laehn

Mailing Address 4140 Columbus Ave Apt 2

City Minneapolis State MN Zip Code 55407-5082

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21645

Date of Disbursement

12 / 05 / 2008

Amount of Each Disbursement this Period

417.19

[MEMO ITEM]

MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)
Nicole Lindaman

Mailing Address 808 Berry St Apt 135
Apt. 135

City Saint Paul State MN Zip Code 55114-1454

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21677

Date of Disbursement

12 / 05 / 2008

Amount of Each Disbursement this Period

825.48

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Gregory S. Loos	Transaction ID: 90921.E21691 Date of Disbursement
Mailing Address 8880 Villa La Jolla Dr	<div> <div>12</div> <div>05</div> <div>2008</div> </div>
City La Jolla State CA Zip Code 92037-1967	Amount of Each Disbursement this Period <div>535.31</div>
Purpose of Disbursement FEA SALARY Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: FEA SALARY
B. Full Name (Last, First, Middle Initial) Nicholas Lynch	Transaction ID: 90921.E21646 Date of Disbursement
Mailing Address 2245 Ariel St N	<div> <div>12</div> <div>05</div> <div>2008</div> </div>
City Saint Paul State MN Zip Code 55109-2855	Amount of Each Disbursement this Period <div>111.55</div>
Purpose of Disbursement FEA SALARY Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: FEA SALARY
C. Full Name (Last, First, Middle Initial) Jeannette Manning	Transaction ID: 90921.E26339 Date of Disbursement
Mailing Address 749 Ottawa Ave	<div> <div>12</div> <div>05</div> <div>2008</div> </div>
City St Paul State MN Zip Code 55104-	Amount of Each Disbursement this Period <div>526.55</div>
Purpose of Disbursement FEA SALARY Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Landrey McKinzie

Mailing Address 7338 Jewel Ave S

City State Zip Code
Cottage Grove MN 55016-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21648

Date of Disbursement

/ /

Amount of Each Disbursement this Period

469.48

[MEMO ITEM]

MEMO: FEA SALARY

B.

Full Name (Last, First, Middle Initial)
John T. Meyer

Mailing Address 1425 Jessamine Ave W
Apt. 110

City State Zip Code
Saint Paul MN 55108-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21692

Date of Disbursement

/ /

Amount of Each Disbursement this Period

819.43

[MEMO ITEM]

MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)
William J. Milbach

Mailing Address 1438 N Pascal

City State Zip Code
St Paul MN 55102-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21649

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1296.41

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Adam Mohler

Mailing Address 3924 Cedar Grove Pkwy Apt 207

City Eagan State MN Zip Code 55122-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21650

Date of Disbursement

M M / D D / Y Y Y Y
1 2 / 0 5 / 2 0 0 8

Amount of Each Disbursement this Period

886.89

[MEMO ITEM]

MEMO: FEA SALARY

B.

Full Name (Last, First, Middle Initial)

Cherye Lee Montgomery

Mailing Address Po Box 65231

City Saint Paul State MN Zip Code 55165-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21651

Date of Disbursement

M M / D D / Y Y Y Y
1 2 / 0 5 / 2 0 0 8

Amount of Each Disbursement this Period

447.06

[MEMO ITEM]

MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)

David E. Mowen

Mailing Address 2651 Oliver Ave N

City Minneapolis State MN Zip Code 55411-1846

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21652

Date of Disbursement

M M / D D / Y Y Y Y
1 2 / 0 5 / 2 0 0 8

Amount of Each Disbursement this Period

84.29

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Lauren E. Nevanen

Mailing Address 1431 River Shore Dr

City State Zip Code
Hastings MN 55033-8546

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21653

Date of Disbursement

M M / D D / Y Y Y Y
1 2 / 0 5 / 2 0 0 8

Amount of Each Disbursement this Period

172.75

[MEMO ITEM]

MEMO: FEA SALARY

B.

Full Name (Last, First, Middle Initial)
Martha Nichols

Mailing Address 2124 Bates Ave.
H4

City State Zip Code
St. Paul MN 55106-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21654

Date of Disbursement

M M / D D / Y Y Y Y
1 2 / 0 5 / 2 0 0 8

Amount of Each Disbursement this Period

432.16

[MEMO ITEM]

MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)
Angela Nielsen

Mailing Address 123M McKnight Rd N

City State Zip Code
Saint Paul MN 55119-6653

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22872

Date of Disbursement

M M / D D / Y Y Y Y
1 2 / 0 5 / 2 0 0 8

Amount of Each Disbursement this Period

1614.84

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

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

Mailing Address 580 Low Bench Rd

City State Zip Code
Gallatin Gateway MT 59730-9739

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21655

Date of Disbursement

M M / D D / Y Y Y Y
1 2 / 0 5 / 2 0 0 8

Amount of Each Disbursement this Period

449.52

[MEMO ITEM]

MEMO: FEA SALARY

B.

Full Name (Last, First, Middle Initial)
Aaron P. Paterson

Mailing Address 3601 Northwood Drive NE

City State Zip Code
Cedar Rapids IA 52402-2730

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21693

Date of Disbursement

M M / D D / Y Y Y Y
1 2 / 0 5 / 2 0 0 8

Amount of Each Disbursement this Period

726.03

[MEMO ITEM]

MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)
Francis Dana Payne

Mailing Address 8601 Edenbrook Crossing

City State Zip Code
Minneapolis MN 55402-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21656

Date of Disbursement

M M / D D / Y Y Y Y
1 2 / 0 5 / 2 0 0 8

Amount of Each Disbursement this Period

965.92

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Angela N. Peet	Transaction ID: 90921.E21657 Date of Disbursement
Mailing Address 7521 Logan Ave S Apt 2B Apt. 2B	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 5 / 2 0 0 8</div> </div>
City Richfield State MN Zip Code 55423-3736	Amount of Each Disbursement this Period <div>274.27</div>
Purpose of Disbursement FEA SALARY Candidate Name	<div> <div>Category/Type</div> <div></div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: FEA SALARY
B. Full Name (Last, First, Middle Initial) Donald G. Pelton	Transaction ID: 90921.E21658 Date of Disbursement
Mailing Address 535 Asbury St Apt 18	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 5 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55104-2389	Amount of Each Disbursement this Period <div>383.38</div>
Purpose of Disbursement FEA SALARY Candidate Name	<div> <div>Category/Type</div> <div></div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: FEA SALARY
C. Full Name (Last, First, Middle Initial) Lori-Anne Pizzella	Transaction ID: 90921.E21659 Date of Disbursement
Mailing Address 680 Stewart Ave Lp	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 5 / 2 0 0 8</div> </div>
City St Paul State MN Zip Code 55102-	Amount of Each Disbursement this Period <div>382.08</div>
Purpose of Disbursement FEA SALARY Candidate Name	<div> <div>Category/Type</div> <div></div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Anthony Post	Transaction ID: 90921.E21694 Date of Disbursement
Mailing Address 1002 Drew Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 5 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55124-	Amount of Each Disbursement this Period
Purpose of Disbursement FEA SALARY	<div>902.50</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: FEA SALARY
B. Full Name (Last, First, Middle Initial) Joshua Revak	Transaction ID: 90921.E21695 Date of Disbursement
Mailing Address 74732 240th St	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 5 / 2 0 0 8</div> </div>
City Dassel State MN Zip Code 55325-3451	Amount of Each Disbursement this Period
Purpose of Disbursement FEA SALARY	<div>1278.68</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: FEA SALARY
C. Full Name (Last, First, Middle Initial) Shawn K. Ricks	Transaction ID: 90921.E21660 Date of Disbursement
Mailing Address 1871 East 7th St. # 6	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 5 / 2 0 0 8</div> </div>
City St. Paul State MN Zip Code 55115-	Amount of Each Disbursement this Period
Purpose of Disbursement FEA SALARY	<div>388.93</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Dena Roby	Transaction ID: 90921.E21661 Date of Disbursement
Mailing Address 1577 Jessamine Ln B	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 5 / 2 0 0 8</div> </div>
City St Paul State MN Zip Code 55106-	Amount of Each Disbursement this Period
Purpose of Disbursement FEA SALARY Candidate Name	<div>145.30</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> [MEMO ITEM] MEMO: FEA SALARY </div>
B. Full Name (Last, First, Middle Initial) Julia Ruetten	Transaction ID: 90921.E21696 Date of Disbursement
Mailing Address 1342 Coach St Apt 122	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 5 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55108-5296	Amount of Each Disbursement this Period
Purpose of Disbursement FEA SALARY Candidate Name	<div>809.10</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> [MEMO ITEM] MEMO: FEA SALARY </div>
C. Full Name (Last, First, Middle Initial) David Rupprecht	Transaction ID: 90921.E21662 Date of Disbursement
Mailing Address 1550 Edgerton St Apt 303	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 5 / 2 0 0 8</div> </div>
City St Paul State MN Zip Code 55105-	Amount of Each Disbursement this Period
Purpose of Disbursement FEA SALARY Candidate Name	<div>88.86</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> [MEMO ITEM] MEMO: FEA SALARY </div>

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Robert D. Schultz III

Mailing Address 23780 Smithtown Rd

City State Zip Code
Excelsior MN 55331-1770

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21673

Date of Disbursement

/ /

Amount of Each Disbursement this Period

138.52

[MEMO ITEM]

MEMO: FEA SALARY

B.

Full Name (Last, First, Middle Initial)
Dennis Scott

Mailing Address 680 Stewart Ave
Sco

City State Zip Code
St Paul MN 55102-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21663

Date of Disbursement

/ /

Amount of Each Disbursement this Period

321.73

[MEMO ITEM]

MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)
Meghan Shultz

Mailing Address 680 Stewart Ave

City State Zip Code
Minneapolis MN 55407-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21664

Date of Disbursement

/ /

Amount of Each Disbursement this Period

344.69

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota**A.**

Full Name (Last, First, Middle Initial)

Joseph Slattery

Mailing Address 223 Bates St #707

City
St PaulState
MNZip Code
55102-Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21665

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	5		2	0	0	8

Amount of Each Disbursement this Period

379.57

[MEMO ITEM]

MEMO: FEA SALARY

B.

Full Name (Last, First, Middle Initial)

Steven Snyder

Mailing Address 710 Charles Ave

City
Saint PaulState
MNZip Code
55104-2718Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21666

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	5		2	0	0	8

Amount of Each Disbursement this Period

163.06

[MEMO ITEM]

MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)

Andrew C. Stakston

Mailing Address 8731 Pheasant Run Cir

City
Saint PaulState
MNZip Code
55125-8606Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21678

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	5		2	0	0	8

Amount of Each Disbursement this Period

248.09

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
John Suder

Mailing Address 680 Stewart Ave

City State Zip Code
St Paul MN 55102-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21667

Date of Disbursement

/ /

Amount of Each Disbursement this Period

936.85

[MEMO ITEM]

MEMO: FEA SALARY

B.

Full Name (Last, First, Middle Initial)
Travis Symoniak

Mailing Address 12457 Ilex St NW

City State Zip Code
Coon Rapids MN 55448-2664

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21682

Date of Disbursement

/ /

Amount of Each Disbursement this Period

333.09

[MEMO ITEM]

MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)
Robert D. Todd

Mailing Address 715 Northern Hills Dr NE

City State Zip Code
Rochester MN 55906-4088

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21697

Date of Disbursement

/ /

Amount of Each Disbursement this Period

779.58

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota**A.**

Full Name (Last, First, Middle Initial)

Detra Turner

Mailing Address 922 Wescott Trail
#202

City Saint Paul State MN Zip Code 55123-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21668

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	5		2	0	0	8

Amount of Each Disbursement this Period

185.71

[MEMO ITEM]

MEMO: FEA SALARY

B.

Full Name (Last, First, Middle Initial)

Joyce Walker

Mailing Address 445 View St

City Saint Paul State MN Zip Code 55102-3426

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21669

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	5		2	0	0	8

Amount of Each Disbursement this Period

28.48

[MEMO ITEM]

MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)

Robert Wills

Mailing Address 1491 Woodview St E

City Saint Paul State MN Zip Code 55122-1323

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21699

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	5		2	0	0	8

Amount of Each Disbursement this Period

155.00

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Robert Wills

Mailing Address 1491 Woodview St E

City State Zip Code
Saint Paul MN 55122-1323

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21698

Date of Disbursement

/ /

Amount of Each Disbursement this Period

639.21

[MEMO ITEM]

MEMO: FEA SALARY

B.

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

Mailing Address 235 Exeter Pl Apt 304

City State Zip Code
Saint Paul MN 55104-5711

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21670

Date of Disbursement

/ /

Amount of Each Disbursement this Period

204.37

[MEMO ITEM]

MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)
Jeffrey Woods

Mailing Address 14610 Bowers Dr NW

City State Zip Code
Anoka MN 55303-7209

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21700

Date of Disbursement

/ /

Amount of Each Disbursement this Period

866.27

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Michael A. Wright

Mailing Address 2477 Indian Way

City State Zip Code
St Paul MN 55109-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21671

Date of Disbursement

/ /

Amount of Each Disbursement this Period

271.67

[MEMO ITEM]

MEMO: FEA SALARY

B.

Full Name (Last, First, Middle Initial)
Shane Wyman

Mailing Address 9124 Tyler St NE

City State Zip Code
Minneapolis MN 55434-

Purpose of Disbursement
FEA Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E25917

Date of Disbursement

/ /

Amount of Each Disbursement this Period

821.60

[MEMO ITEM]

MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)
Paychex

Mailing Address 1210 Northland Dr Ste 100

City State Zip Code
Saint Paul MN 55120-1181

Purpose of Disbursement
SEE BELOW: Garhishments

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21961

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1024.75

SEE BELOW: GARHISHMENTS

SUBTOTAL of Disbursements This Page (optional)

1024.75

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
MN Dept of Revenue

Mailing Address 658 Cedar St Ste 400

City State Zip Code
Saint Paul MN 55155-1603

Purpose of Disbursement
GARNISHMENTS-FEA MN DEPT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21966

Date of Disbursement

/ /

Amount of Each Disbursement this Period

151.58

[MEMO ITEM]

MEMO: GARNISHMENTS-FEA MN DEPT

B.

Full Name (Last, First, Middle Initial)
Osi Education Services, Inc.

Mailing Address PO Box 929

City State Zip Code
Brookfield WI 53008-0929

Purpose of Disbursement
GARNISHMENTS-OSI EDUCATION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21969

Date of Disbursement

/ /

Amount of Each Disbursement this Period

67.27

[MEMO ITEM]

MEMO: GARNISHMENTS-OSI EDUCATION

C.

Full Name (Last, First, Middle Initial)
MN Child Support Center

Mailing Address PO Box 64306

City State Zip Code
Saint Paul MN 55164-0306

Purpose of Disbursement
WITHHOLDINGS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21968

Date of Disbursement

/ /

Amount of Each Disbursement this Period

745.90

[MEMO ITEM]

MEMO: WITHHOLDINGS

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Wi Spt Collections Trust Fund	Transaction ID: 90921.E21970 Date of Disbursement
Mailing Address PO Box 74400	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 9 / 2 0 0 8</div> </div>
City Milwaukee State WI Zip Code 53274-0001	Amount of Each Disbursement this Period <div>60.00</div>
Purpose of Disbursement GARNISHMENTS-WI SPT COL Candidate Name	<div> <div>Category/Type</div> <div></div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: GARNISHMENTS-WI SPT COL
B. Full Name (Last, First, Middle Initial) Paychex	Transaction ID: 90921.E21958 Date of Disbursement
Mailing Address 1210 Northland Dr Ste 100	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 9 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55120-1181	Amount of Each Disbursement this Period <div>50412.59</div>
Purpose of Disbursement SEE BELOW: FEA Salary Candidate Name	<div> <div>Category/Type</div> <div></div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	SEE BELOW: FEA SALARY
C. Full Name (Last, First, Middle Initial) Alexander J. Argo	Transaction ID: 90921.E21975 Date of Disbursement
Mailing Address 9428 Erin Ct	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 9 / 2 0 0 8</div> </div>
City Woodbury State MN Zip Code 55129-	Amount of Each Disbursement this Period <div>405.01</div>
Purpose of Disbursement FEA SALARY Candidate Name	<div> <div>Category/Type</div> <div></div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

50412.59

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Hayley M. Astrup	Transaction ID: 90921.E22033 Date of Disbursement
Mailing Address 602 24th St NW	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 9 / 2 0 0 8</div> </div>
City Austin State MN Zip Code 55912-	Amount of Each Disbursement this Period
Purpose of Disbursement FEA SALARY	<div>792.03</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: FEA SALARY
B. Full Name (Last, First, Middle Initial) Breanna M. Barr	Transaction ID: 90921.E21976 Date of Disbursement
Mailing Address 736 Wilson Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 9 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55106-5526	Amount of Each Disbursement this Period
Purpose of Disbursement FEA SALARY	<div>317.22</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: FEA SALARY
C. Full Name (Last, First, Middle Initial) Darren Bearson	Transaction ID: 90921.E22049 Date of Disbursement
Mailing Address 3930 Yellowstone Ln N	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 9 / 2 0 0 8</div> </div>
City Plymouth State MN Zip Code 55446-2818	Amount of Each Disbursement this Period
Purpose of Disbursement FEA SALARY	<div>2677.90</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Christe Capistrant	Transaction ID: 90921.E21977 Date of Disbursement
Mailing Address 111 E Kellogg Blvd #2911	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 9 / 2 0 0 8</div> </div>
City State Zip Code St Paul MN 55101-	Amount of Each Disbursement this Period
Purpose of Disbursement FEA SALARY Candidate Name	<div> <div>388.73</div> <div>[MEMO ITEM] MEMO: FEA SALARY</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Ronald Wayne Carey	Transaction ID: 90921.E24522 Date of Disbursement
Mailing Address 2638 146th ave ne	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 9 / 2 0 0 8</div> </div>
City State Zip Code Ham Lake MN 55304-	Amount of Each Disbursement this Period
Purpose of Disbursement FEA SALARY Candidate Name	<div> <div>2503.98</div> <div>[MEMO ITEM] MEMO: FEA SALARY</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) William B. Carpenter	Transaction ID: 90921.E22367 Date of Disbursement
Mailing Address 1579 H East County Rd D	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 9 / 2 0 0 8</div> </div>
City State Zip Code Saint Paul MN 55109-	Amount of Each Disbursement this Period
Purpose of Disbursement FEA SALARY Candidate Name	<div> <div>626.91</div> <div>[MEMO ITEM] MEMO: FEA SALARY</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota**A.**

Full Name (Last, First, Middle Initial)

Joel Cary

Mailing Address 12809 44th PI NE

City State Zip Code
Saint Michael MN 55376-3030Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22024

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	9		2	0	0	8

Amount of Each Disbursement this Period

2096.28

[MEMO ITEM]

MEMO: FEA SALARY

B.

Full Name (Last, First, Middle Initial)

Joel P. Chavez

Mailing Address 475 Dayton Ave Apt 1

City State Zip Code
St Paul MN 55102-Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21978

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	9		2	0	0	8

Amount of Each Disbursement this Period

603.69

[MEMO ITEM]

MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)

Susan H. Closmore

Mailing Address 1308 7th St SE Apt 13

City State Zip Code
Minneapolis MN 55414-1678Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22025

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	9		2	0	0	8

Amount of Each Disbursement this Period

127.87

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Gina Lynn Countryman	Transaction ID: 90921.E22026 Date of Disbursement
Mailing Address 1282 Deercliff Ln	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 9 / 2 0 0 8</div> </div>
City Eagan State MN Zip Code 55123-1434	Amount of Each Disbursement this Period
Purpose of Disbursement FEA SALARY Candidate Name	<div> <div>1554.61</div> <div>[MEMO ITEM] MEMO: FEA SALARY</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Dana Crosby	Transaction ID: 90921.E22034 Date of Disbursement
Mailing Address 37 Front St	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 9 / 2 0 0 8</div> </div>
City Norwich State NY Zip Code 13815-1825	Amount of Each Disbursement this Period
Purpose of Disbursement FEA SALARY Candidate Name	<div> <div>579.95</div> <div>[MEMO ITEM] MEMO: FEA SALARY</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Christian G. Darouni	Transaction ID: 90921.E21979 Date of Disbursement
Mailing Address 758 Reaney Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 9 / 2 0 0 8</div> </div>
City St Paul State MN Zip Code 55106-	Amount of Each Disbursement this Period
Purpose of Disbursement FEA SALARY Candidate Name	<div> <div>1093.66</div> <div>[MEMO ITEM] MEMO: FEA SALARY</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.	Full Name (Last, First, Middle Initial) Patty Daugherty	Transaction ID: 90921.E24603 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 9 / 2 0 0 8
	Mailing Address 1395 Farrington St Apt A	
	City Saint Paul State MN Zip Code 55117-	Amount of Each Disbursement this Period 539.54
	Purpose of Disbursement FEA SALARY	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: FEA SALARY
	State: District:	
B.	Full Name (Last, First, Middle Initial) Bethany Dorobiala	Transaction ID: 90921.E24757 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 9 / 2 0 0 8
	Mailing Address 9225 Cornell Bay	
	City Woodbury State MN Zip Code 55125-	Amount of Each Disbursement this Period 504.49
	Purpose of Disbursement FEA SALARY	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: FEA SALARY
	State: District:	
C.	Full Name (Last, First, Middle Initial) Kimberly K. Ekmark	Transaction ID: 90921.E22035 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 9 / 2 0 0 8
	Mailing Address 9840 78th St S	
	City Cottage Grove State MN Zip Code 55016-5229	Amount of Each Disbursement this Period 779.58
	Purpose of Disbursement FEA SALARY	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: FEA SALARY
	State: District:	
SUBTOTAL of Disbursements This Page (optional)		0.00
TOTAL This Period (last page this line number only)		

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Terese A. Emberson

Mailing Address 165 E Co Rd B2 #211

City State Zip Code
Saint Paul MN 55119-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21981

Date of Disbursement

/ /

Amount of Each Disbursement this Period

199.37

[MEMO ITEM]

MEMO: FEA SALARY

B.

Full Name (Last, First, Middle Initial)

Nick Erickson

Mailing Address 9344 134th Street

City State Zip Code
Savage MN 55378-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22036

Date of Disbursement

/ /

Amount of Each Disbursement this Period

860.69

[MEMO ITEM]

MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)

Pamela A. Finney

Mailing Address 441 Wheeler St N #1

City State Zip Code
St Paul MN 55104-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21982

Date of Disbursement

/ /

Amount of Each Disbursement this Period

674.10

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Lucas Fischer	Transaction ID: 90921.E22037 Date of Disbursement
Mailing Address 2118 130th Ave NW	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>1 2 / 1 9 / 2 0 0 8</div> </div>
<div> <div>City Minneapolis State MN Zip Code 55448-</div> <div> <div>Purpose of Disbursement FEA SALARY</div> <div>Candidate Name</div> </div> <div>Category/Type</div> </div>	Amount of Each Disbursement this Period <div>809.10</div>
<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	[MEMO ITEM] MEMO: FEA SALARY
B. Full Name (Last, First, Middle Initial) Dorothy Fleming	Transaction ID: 90921.E22051 Date of Disbursement
Mailing Address 3101 Wendhurst Ave	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>1 2 / 1 9 / 2 0 0 8</div> </div>
<div> <div>City St Anthony State MN Zip Code 55418-1725</div> <div> <div>Purpose of Disbursement FEA SALARY</div> <div>Candidate Name</div> </div> <div>Category/Type</div> </div>	Amount of Each Disbursement this Period <div>1333.68</div>
<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	[MEMO ITEM] MEMO: FEA SALARY
C. Full Name (Last, First, Middle Initial) Raymond C. Forrest	Transaction ID: 90921.E21983 Date of Disbursement
Mailing Address 680 Stewart Ave	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>1 2 / 1 9 / 2 0 0 8</div> </div>
<div> <div>City St Paul State MN Zip Code 55102-</div> <div> <div>Purpose of Disbursement FEA SALARY</div> <div>Candidate Name</div> </div> <div>Category/Type</div> </div>	Amount of Each Disbursement this Period <div>591.70</div>
<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	[MEMO ITEM] MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Timothy Gould	Transaction ID: 90921.E22031 Date of Disbursement
Mailing Address 192 Linden Circle	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>1 2 / 1 9 / 2 0 0 8</div> </div>
City Apple Valley State MN Zip Code 55124-	Amount of Each Disbursement this Period
Purpose of Disbursement FEA SALARY Candidate Name	<div> <div>836.29</div> <div>[MEMO ITEM] MEMO: FEA SALARY</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Christopher J. Halonen	Transaction ID: 90921.E21984 Date of Disbursement
Mailing Address 680 Stewart Ave	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>1 2 / 1 9 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55102-4117	Amount of Each Disbursement this Period
Purpose of Disbursement FEA SALARY Candidate Name	<div> <div>560.01</div> <div>[MEMO ITEM] MEMO: FEA SALARY</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Daniel Hanover	Transaction ID: 90921.E21986 Date of Disbursement
Mailing Address 575 Grand Ave	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>1 2 / 1 9 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55102-	Amount of Each Disbursement this Period
Purpose of Disbursement FEA SALARY Candidate Name	<div> <div>686.98</div> <div>[MEMO ITEM] MEMO: FEA SALARY</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Dallas J. Hansen	Transaction ID: 90921.E21987 Date of Disbursement
Mailing Address 11210 Partridge St Dh	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 9 / 2 0 0 8</div> </div>
City Coon Rapids State MN Zip Code 55433-	Amount of Each Disbursement this Period
Purpose of Disbursement FEA SALARY Candidate Name	<div>523.45</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> [MEMO ITEM] MEMO: FEA SALARY </div>
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Sarah Hansen-Jones	Transaction ID: 90921.E21988 Date of Disbursement
Mailing Address 505 Hoyt Ave E	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 9 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55106-	Amount of Each Disbursement this Period
Purpose of Disbursement FEA SALARY Candidate Name	<div>647.64</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> [MEMO ITEM] MEMO: FEA SALARY </div>
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Aaron Heidebrink	Transaction ID: 90921.E21989 Date of Disbursement
Mailing Address 1975 W University Ave #242	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 9 / 2 0 0 8</div> </div>
City St Paul State MN Zip Code 55105-	Amount of Each Disbursement this Period
Purpose of Disbursement FEA SALARY Candidate Name	<div>597.75</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> [MEMO ITEM] MEMO: FEA SALARY </div>
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota**A.**Full Name (Last, First, Middle Initial)
John Hendrickson

Mailing Address 2 Deer Ln

City State Zip Code
Saint Paul MN 55127-Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E24789

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	9	/	2	0	0	8

Amount of Each Disbursement this Period

378.24

[MEMO ITEM]

MEMO: FEA SALARY

B.Full Name (Last, First, Middle Initial)
Daniel J.Hillenbrand

Mailing Address 69 Wilder St N

City State Zip Code
Saint Paul MN 55104-5850Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21991

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	9	/	2	0	0	8

Amount of Each Disbursement this Period

123.76

[MEMO ITEM]

MEMO: FEA SALARY

C.Full Name (Last, First, Middle Initial)
Thomas W. Hoffman

Mailing Address 6051 Courtyly Alcove Ave

City State Zip Code
Woodbury MN 55125-Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22759

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	9	/	2	0	0	8

Amount of Each Disbursement this Period

86.93

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional) ►

0.00

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

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

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

Mailing Address 1185 Main St NW

City Elk River State MN Zip Code 55330-1802

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21993

Date of Disbursement

/ /

Amount of Each Disbursement this Period

228.38

[MEMO ITEM]

MEMO: FEA SALARY

B.

Full Name (Last, First, Middle Initial)
Ronald Huettl

Mailing Address 70 Virginia St
#1

City St Paul State MN Zip Code 55107-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21994

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1360.97

[MEMO ITEM]

MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)
John Hungate

Mailing Address 680 Stewart Ave

City Saint Paul State MN Zip Code 55102-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21995

Date of Disbursement

/ /

Amount of Each Disbursement this Period

149.85

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.	Full Name (Last, First, Middle Initial) Kathleen Hupalo	Transaction ID: 90921.E21996 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 9 / 2 0 0 8
	Mailing Address 684 Delaware Ave	
	City St Paul State MN Zip Code 55107-	Amount of Each Disbursement this Period 271.00
	Purpose of Disbursement FEA SALARY	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] MEMO: FEA SALARY
B.	Full Name (Last, First, Middle Initial) Matthew Kirkpatrick	Transaction ID: 90921.E22038 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 9 / 2 0 0 8
	Mailing Address 3900 Valley View Dr N # 303 #303	
	City Saint Paul State MN Zip Code 55122-1554	Amount of Each Disbursement this Period 1000.79
	Purpose of Disbursement FEA SALARY	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] MEMO: FEA SALARY
C.	Full Name (Last, First, Middle Initial) Cecilia A. Knapp	Transaction ID: 90921.E22039 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 9 / 2 0 0 8
	Mailing Address 417 2nd St N	
	City Wahpeton State ND Zip Code 58075-3908	Amount of Each Disbursement this Period 729.68
	Purpose of Disbursement FEA SALARY	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] MEMO: FEA SALARY
	SUBTOTAL of Disbursements This Page (optional)	0.00
	TOTAL This Period (last page this line number only)	

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

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

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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Michael T. Laehn

Mailing Address 4140 Columbus Ave Apt 2

City State Zip Code
Minneapolis MN 55407-5082

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E21997

Date of Disbursement

M M / D D / Y Y Y Y
1 2 / 1 9 / 2 0 0 8

Amount of Each Disbursement this Period

495.48

[MEMO ITEM]

MEMO: FEA SALARY

B.

Full Name (Last, First, Middle Initial)

Nicole Lindaman

Mailing Address 808 Berry St Apt 135
Apt. 135

City State Zip Code
Saint Paul MN 55114-1454

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E22027

Date of Disbursement

M M / D D / Y Y Y Y
1 2 / 1 9 / 2 0 0 8

Amount of Each Disbursement this Period

825.48

[MEMO ITEM]

MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)

Jeannette Manning

Mailing Address 749 Ottawa Ave

City State Zip Code
St Paul MN 55104-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E26299

Date of Disbursement

M M / D D / Y Y Y Y
1 2 / 1 9 / 2 0 0 8

Amount of Each Disbursement this Period

495.95

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota**A.**

Full Name (Last, First, Middle Initial)

Georgina H. McNiff

Mailing Address 7 Stanley Keyes Ct

City Rye State NY Zip Code 10580-3260

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22000

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	9		2	0	0	8

Amount of Each Disbursement this Period

222.10

[MEMO ITEM]

MEMO: FEA SALARY

B.

Full Name (Last, First, Middle Initial)

Landrey McKinzie

Mailing Address 7338 Jewel Ave S

City Cottage Grove State MN Zip Code 55016-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21999

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	9		2	0	0	8

Amount of Each Disbursement this Period

533.07

[MEMO ITEM]

MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)

John T. Meyer

Mailing Address 1425 Jessamine Ave W
Apt. 110

City Saint Paul State MN Zip Code 55108-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22040

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	9		2	0	0	8

Amount of Each Disbursement this Period

819.43

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
William J. Milbach

Mailing Address 1438 N Pascal

City State Zip Code
St Paul MN 55102-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22001

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1296.41

[MEMO ITEM]

MEMO: FEA SALARY

B.

Full Name (Last, First, Middle Initial)
Adam Mohler

Mailing Address 3924 Cedar Grove Pkwy Apt 207

City State Zip Code
Eagan MN 55122-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22002

Date of Disbursement

/ /

Amount of Each Disbursement this Period

945.70

[MEMO ITEM]

MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)
Cherye Lee Montgomery

Mailing Address Po Box 65231

City State Zip Code
Saint Paul MN 55165-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22003

Date of Disbursement

/ /

Amount of Each Disbursement this Period

542.60

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

David E. Mowen

Mailing Address 2651 Oliver Ave N

City State Zip Code
Minneapolis MN 55411-1846

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22004

Date of Disbursement

M M / D D / Y Y Y Y
1 2 / 1 9 / 2 0 0 8

Amount of Each Disbursement this Period

146.51

[MEMO ITEM]

MEMO: FEA SALARY

B.

Full Name (Last, First, Middle Initial)

Lauren E. Nevanen

Mailing Address 1431 River Shore Dr

City State Zip Code
Hastings MN 55033-8546

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22005

Date of Disbursement

M M / D D / Y Y Y Y
1 2 / 1 9 / 2 0 0 8

Amount of Each Disbursement this Period

132.60

[MEMO ITEM]

MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)

Martha Nichols

Mailing Address 2124 Bates Ave.
H4

City State Zip Code
St. Paul MN 55106-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22006

Date of Disbursement

M M / D D / Y Y Y Y
1 2 / 1 9 / 2 0 0 8

Amount of Each Disbursement this Period

454.74

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Angela Nielsen

Mailing Address 123M McKnight Rd N

City State Zip Code
Saint Paul MN 55119-6653

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22890

Date of Disbursement

M M / D D / Y Y Y Y
1 2 / 1 9 / 2 0 0 8

Amount of Each Disbursement this Period

1614.84

[MEMO ITEM]

MEMO: FEA SALARY

B.

Full Name (Last, First, Middle Initial)

Christine B. Nielsen

Mailing Address 580 Low Bench Rd

City State Zip Code
Gallatin Gateway MT 59730-9739

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22007

Date of Disbursement

M M / D D / Y Y Y Y
1 2 / 1 9 / 2 0 0 8

Amount of Each Disbursement this Period

500.03

[MEMO ITEM]

MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)

Aaron P. Paterson

Mailing Address 3601 Northwood Drive NE

City State Zip Code
Cedar Rapids IA 52402-2730

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22041

Date of Disbursement

M M / D D / Y Y Y Y
1 2 / 1 9 / 2 0 0 8

Amount of Each Disbursement this Period

726.03

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Francis Dana Payne	Transaction ID: 90921.E22008 Date of Disbursement
Mailing Address 8601 Edenbrook Crossing	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 9 / 2 0 0 8</div> </div>
City State Zip Code Minneapolis MN 55402- Purpose of Disbursement FEA SALARY Candidate Name	Amount of Each Disbursement this Period <div>629.65</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div> [MEMO ITEM] MEMO: FEA SALARY </div>
B. Full Name (Last, First, Middle Initial) Donald G. Pelton	Transaction ID: 90921.E22009 Date of Disbursement
Mailing Address 535 Asbury St Apt 18	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 9 / 2 0 0 8</div> </div>
City State Zip Code Saint Paul MN 55104-2389 Purpose of Disbursement FEA SALARY Candidate Name	Amount of Each Disbursement this Period <div>305.88</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div> [MEMO ITEM] MEMO: FEA SALARY </div>
C. Full Name (Last, First, Middle Initial) Lori-Anne Pizzella	Transaction ID: 90921.E22010 Date of Disbursement
Mailing Address 680 Stewart Ave Lp	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 9 / 2 0 0 8</div> </div>
City State Zip Code St Paul MN 55102- Purpose of Disbursement FEA SALARY Candidate Name	Amount of Each Disbursement this Period <div>662.39</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div> [MEMO ITEM] MEMO: FEA SALARY </div>

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Anthony Post Mailing Address 1002 Drew Drive	Transaction ID: 90921.E22042 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 9 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55124- Purpose of Disbursement FEA SALARY Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>902.50</div> [MEMO ITEM] MEMO: FEA SALARY
B. Full Name (Last, First, Middle Initial) Joshua Revak Mailing Address 74732 240th St City Dassel State MN Zip Code 55325-3451 Purpose of Disbursement FEA SALARY Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90921.E22043 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 9 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>1278.68</div> [MEMO ITEM] MEMO: FEA SALARY
C. Full Name (Last, First, Middle Initial) Shawn K. Ricks Mailing Address 1871 East 7th St. # 6 City St. Paul State MN Zip Code 55115- Purpose of Disbursement FEA SALARY Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90921.E22011 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 9 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>321.19</div> [MEMO ITEM] MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Dena Roby	Transaction ID: 90921.E22012 Date of Disbursement
Mailing Address 1577 Jessamine Ln B	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 9 / 2 0 0 8</div> </div>
City St Paul State MN Zip Code 55106-	Amount of Each Disbursement this Period
Purpose of Disbursement FEA SALARY	<div>34.35</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: FEA SALARY
B. Full Name (Last, First, Middle Initial) Julia Ruetten	Transaction ID: 90921.E22044 Date of Disbursement
Mailing Address 1342 Coach St Apt 122	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 9 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55108-5296	Amount of Each Disbursement this Period
Purpose of Disbursement FEA SALARY	<div>809.10</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: FEA SALARY
C. Full Name (Last, First, Middle Initial) David Rupprecht	Transaction ID: 90921.E22013 Date of Disbursement
Mailing Address 1550 Edgerton St Apt 303	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 9 / 2 0 0 8</div> </div>
City St Paul State MN Zip Code 55105-	Amount of Each Disbursement this Period
Purpose of Disbursement FEA SALARY	<div>74.14</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota**A.**Full Name (Last, First, Middle Initial)
Robert D. Schultz III

Mailing Address 23780 Smithtown Rd

City State Zip Code
Excelsior MN 55331-1770Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22023

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	9	/	2	0	0	8

Amount of Each Disbursement this Period

138.52

[MEMO ITEM]

MEMO: FEA SALARY

B.Full Name (Last, First, Middle Initial)
Dennis ScottMailing Address 680 Stewart Ave
ScoCity State Zip Code
St Paul MN 55102-Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22014

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	9	/	2	0	0	8

Amount of Each Disbursement this Period

578.34

[MEMO ITEM]

MEMO: FEA SALARY

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

Mailing Address 680 Stewart Ave

City State Zip Code
Minneapolis MN 55407-Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22015

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	9	/	2	0	0	8

Amount of Each Disbursement this Period

422.35

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Joseph Slattery

Mailing Address 223 Bates St #707

City
St Paul

State
MN

Zip Code
55102-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22016

Date of Disbursement

/ /

Amount of Each Disbursement this Period

482.30

[MEMO ITEM]

MEMO: FEA SALARY

B.

Full Name (Last, First, Middle Initial)

Steven Snyder

Mailing Address 710 Charles Ave

City
Saint Paul

State
MN

Zip Code
55104-2718

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22017

Date of Disbursement

/ /

Amount of Each Disbursement this Period

191.58

[MEMO ITEM]

MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)

Andrew C. Stakston

Mailing Address 8731 Pheasant Run Cir

City
Saint Paul

State
MN

Zip Code
55125-8606

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22028

Date of Disbursement

/ /

Amount of Each Disbursement this Period

127.87

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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Detailed Summary Page

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
John Suder

Mailing Address 680 Stewart Ave

City State Zip Code
St Paul MN 55102-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22018

Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

MEMO: FEA SALARY

B.

Full Name (Last, First, Middle Initial)
Travis Symoniak

Mailing Address 12457 Ilex St NW

City State Zip Code
Coon Rapids MN 55448-2664

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22032

Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)
Robert D. Todd

Mailing Address 715 Northern Hills Dr NE

City State Zip Code
Rochester MN 55906-4088

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22045

Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

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

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Detailed Summary Page

FOR LINE NUMBER:
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Joyce Walker

Mailing Address 445 View St

City Saint Paul State MN Zip Code 55102-3426

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22019

Date of Disbursement

/ /

Amount of Each Disbursement this Period

197.48

[MEMO ITEM]

MEMO: FEA SALARY

B.

Full Name (Last, First, Middle Initial)
Robert Wills

Mailing Address 1491 Woodview St E

City Saint Paul State MN Zip Code 55122-1323

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22046

Date of Disbursement

/ /

Amount of Each Disbursement this Period

639.21

[MEMO ITEM]

MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)
Robert Wills

Mailing Address 1491 Woodview St E

City Saint Paul State MN Zip Code 55122-1323

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22047

Date of Disbursement

/ /

Amount of Each Disbursement this Period

155.00

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

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

Mailing Address 235 Exeter Pl Apt 304

City State Zip Code
Saint Paul MN 55104-5711

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22020

Date of Disbursement

M M / D D / Y Y Y Y
1 2 / 1 9 / 2 0 0 8

Amount of Each Disbursement this Period

140.66

[MEMO ITEM]

MEMO: FEA SALARY

B.

Full Name (Last, First, Middle Initial)
Jeffrey Woods

Mailing Address 14610 Bowers Dr NW

City State Zip Code
Anoka MN 55303-7209

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22048

Date of Disbursement

M M / D D / Y Y Y Y
1 2 / 1 9 / 2 0 0 8

Amount of Each Disbursement this Period

866.27

[MEMO ITEM]

MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)
Michael A. Wright

Mailing Address 2477 Indian Way

City State Zip Code
St Paul MN 55109-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22021

Date of Disbursement

M M / D D / Y Y Y Y
1 2 / 1 9 / 2 0 0 8

Amount of Each Disbursement this Period

459.31

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Shane Wyman

Mailing Address 9124 Tyler St NE

City State Zip Code
Minneapolis MN 55434-

Purpose of Disbursement
FEA Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E25918

Date of Disbursement

/ /

Amount of Each Disbursement this Period

821.60

[MEMO ITEM]

MEMO: FEA SALARY

B.

Full Name (Last, First, Middle Initial)
Paychex

Mailing Address 1210 Northland Dr Ste 100

City State Zip Code
Saint Paul MN 55120-1181

Purpose of Disbursement
SEE BELOW: FEA Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21960

Date of Disbursement

/ /

Amount of Each Disbursement this Period

18441.49

SEE BELOW: FEA PAYROLL TA-
XES

C.

Full Name (Last, First, Middle Initial)
MN State Unemployment

Mailing Address 332 Minnesota St

City State Zip Code
Saint Paul MN 55101-1314

Purpose of Disbursement
PAYROLL TAXES-FEA STATE U

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21967

Date of Disbursement

/ /

Amount of Each Disbursement this Period

533.21

[MEMO ITEM]

MEMO: PAYROLL TAXES-FEA
STATE U

SUBTOTAL of Disbursements This Page (optional)

18441.49

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) MN Dept of Revenue	Transaction ID: 90921.E21965 Date of Disbursement
Mailing Address 658 Cedar St Ste 400	<div> <div>12</div> <div>19</div> <div>2008</div> </div>
City Saint Paul State MN Zip Code 55155-1603	Amount of Each Disbursement this Period <div>2482.34</div>
Purpose of Disbursement FEA PAYROLL TAXES Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: FEA PAYROLL TAXES
B. Full Name (Last, First, Middle Initial) Internal Revenue Service	Transaction ID: 90921.E25044 Date of Disbursement
Mailing Address P.O. BOX 43251	<div> <div>12</div> <div>19</div> <div>2008</div> </div>
City Ogden State UT Zip Code 84201-0001	Amount of Each Disbursement this Period <div>15425.94</div>
Purpose of Disbursement FEA PAYROLL TAXES Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: FEA PAYROLL TAXES
C. Full Name (Last, First, Middle Initial) Paychex	Transaction ID: 90921.E22180 Date of Disbursement
Mailing Address 1210 Northland Dr Ste 100	<div> <div>12</div> <div>31</div> <div>2008</div> </div>
City Saint Paul State MN Zip Code 55120-1181	Amount of Each Disbursement this Period <div>906.42</div>
Purpose of Disbursement SEE BELOW: Garnishments Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	SEE BELOW: GARNISHMENTS

SUBTOTAL of Disbursements This Page (optional)

906.42

TOTAL This Period (last page this line number only)

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

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

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

<p>A. Full Name (Last, First, Middle Initial) MN Dept of Revenue</p> <p>Mailing Address 658 Cedar St Ste 400</p> <p>City Saint Paul State MN Zip Code 55155-1603</p> <p>Purpose of Disbursement GARNISHMENTS-FEA MN DEPT</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90921.E22189 Date of Disbursement <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> M M D D Y Y Y Y </div> <div style="display: flex; justify-content: space-between;"> 1 2 3 1 2 0 0 8 </div> </div> </p> <p>Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">121.46</div> </p> <p>[MEMO ITEM] MEMO: GARNISHMENTS-FEA MN DEPT</p>
<p>B. Full Name (Last, First, Middle Initial) Osi Education Services, Inc.</p> <p>Mailing Address PO Box 929</p> <p>City Brookfield State WI Zip Code 53008-0929</p> <p>Purpose of Disbursement GARNISHMENTS-OSI EDUCATION</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90921.E22187 Date of Disbursement <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> M M D D Y Y Y Y </div> <div style="display: flex; justify-content: space-between;"> 1 2 3 1 2 0 0 8 </div> </div> </p> <p>Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">33.84</div> </p> <p>[MEMO ITEM] MEMO: GARNISHMENTS-OSI EDUCATION</p>
<p>C. Full Name (Last, First, Middle Initial) MN Child Support Center</p> <p>Mailing Address PO Box 64306</p> <p>City Saint Paul State MN Zip Code 55164-0306</p> <p>Purpose of Disbursement WITHHOLDINGS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90921.E22186 Date of Disbursement <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> M M D D Y Y Y Y </div> <div style="display: flex; justify-content: space-between;"> 1 2 3 1 2 0 0 8 </div> </div> </p> <p>Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">691.12</div> </p> <p>[MEMO ITEM] MEMO: WITHHOLDINGS</p>

SUBTOTAL of Disbursements This Page (optional) ►

0.00

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

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Wi Spt Collections Trust Fund

Mailing Address PO Box 74400

City Milwaukee State WI Zip Code 53274-0001

Purpose of Disbursement
GARNISHMENTS-WI SPT COL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22188

Date of Disbursement

12 / 31 / 2008

Amount of Each Disbursement this Period

60.00

[MEMO ITEM]

MEMO: GARNISHMENTS-WI SPT COL

B.

Full Name (Last, First, Middle Initial)
Paychex

Mailing Address 1210 Northland Dr Ste 100

City Saint Paul State MN Zip Code 55120-1181

Purpose of Disbursement
SEE BELOW: FEA Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22179

Date of Disbursement

12 / 31 / 2008

Amount of Each Disbursement this Period

15055.51

SEE BELOW: FEA PAYROLL TAXES

C.

Full Name (Last, First, Middle Initial)
MN State Unemployment

Mailing Address 332 Minnesota St

City Saint Paul State MN Zip Code 55101-1314

Purpose of Disbursement
PAYROLL TAXES-FEA STATE U

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22185

Date of Disbursement

12 / 31 / 2008

Amount of Each Disbursement this Period

322.61

[MEMO ITEM]

MEMO: PAYROLL TAXES-FEA STATE U

SUBTOTAL of Disbursements This Page (optional)

15055.51

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
MN Dept of Revenue

Mailing Address 658 Cedar St Ste 400

City State Zip Code
Saint Paul MN 55155-1603

Purpose of Disbursement
FEA PAYROLL TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22184

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2048.79

[MEMO ITEM]

MEMO: FEA PAYROLL TAXES

B.

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

Mailing Address P.O. BOX 43251

City State Zip Code
Ogden UT 84201-0001

Purpose of Disbursement
FEA PAYROLL TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E25034

Date of Disbursement

/ /

Amount of Each Disbursement this Period

12684.11

[MEMO ITEM]

MEMO: FEA PAYROLL TAXES

C.

Full Name (Last, First, Middle Initial)
Paychex

Mailing Address 1210 Northland Dr Ste 100

City State Zip Code
Saint Paul MN 55120-1181

Purpose of Disbursement
SEE BELOW: FEA Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22177

Date of Disbursement

/ /

Amount of Each Disbursement this Period

39788.65

SEE BELOW: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

39788.65

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Michael J. Anderson

Mailing Address 475 Dayton Ave #1
#228

City State Zip Code
St Paul MN 55102-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22195

Date of Disbursement

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

Amount of Each Disbursement this Period

242.16

[MEMO ITEM]

MEMO: FEA SALARY

B.

Full Name (Last, First, Middle Initial)
Alexander J. Argo

Mailing Address 9428 Erin Ct

City State Zip Code
Woodbury MN 55129-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22196

Date of Disbursement

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

Amount of Each Disbursement this Period

352.17

[MEMO ITEM]

MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)
Hayley M. Astrup

Mailing Address 602 24th St NW

City State Zip Code
Austin MN 55912-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22254

Date of Disbursement

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

Amount of Each Disbursement this Period

416.42

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Breanna M. Barr	Transaction ID: 90921.E22197 Date of Disbursement
Mailing Address 736 Wilson Ave	<div> <div>12</div> <div>31</div> <div>2008</div> </div>
City Saint Paul State MN Zip Code 55106-5526	Amount of Each Disbursement this Period <div>202.87</div>
Purpose of Disbursement FEA SALARY Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: FEA SALARY
B. Full Name (Last, First, Middle Initial) Darren Bearson	Transaction ID: 90921.E22267 Date of Disbursement
Mailing Address 3930 Yellowstone Ln N	<div> <div>12</div> <div>31</div> <div>2008</div> </div>
City Plymouth State MN Zip Code 55446-2818	Amount of Each Disbursement this Period <div>2677.90</div>
Purpose of Disbursement FEA SALARY Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: FEA SALARY
C. Full Name (Last, First, Middle Initial) Christe Capistrant	Transaction ID: 90921.E22198 Date of Disbursement
Mailing Address 111 E Kellogg Blvd #2911	<div> <div>12</div> <div>31</div> <div>2008</div> </div>
City St Paul State MN Zip Code 55101-	Amount of Each Disbursement this Period <div>183.21</div>
Purpose of Disbursement FEA SALARY Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota**A.**

Full Name (Last, First, Middle Initial)

Ronald Wayne Carey

Mailing Address 2638 146th ave ne

City Ham Lake State MN Zip Code 55304-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E24561

Date of Disbursement

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

Amount of Each Disbursement this Period

2503.98

[MEMO ITEM]

MEMO: FEA SALARY

B.

Full Name (Last, First, Middle Initial)

William B. Carpenter

Mailing Address 1579 H East County Rd D

City Saint Paul State MN Zip Code 55109-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22199

Date of Disbursement

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

Amount of Each Disbursement this Period

497.67

[MEMO ITEM]

MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)

Joel Cary

Mailing Address 12809 44th PI NE

City Saint Michael State MN Zip Code 55376-3030

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22245

Date of Disbursement

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

Amount of Each Disbursement this Period

2096.28

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Joel P. Chavez

Mailing Address 475 Dayton Ave Apt 1

City State Zip Code
St Paul MN 55102-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22200

Date of Disbursement

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

Amount of Each Disbursement this Period

373.31

[MEMO ITEM]

MEMO: FEA SALARY

B.

Full Name (Last, First, Middle Initial)

Susan H. Closmore

Mailing Address 1308 7th St SE Apt 13

City State Zip Code
Minneapolis MN 55414-1678

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22246

Date of Disbursement

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

Amount of Each Disbursement this Period

127.87

[MEMO ITEM]

MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)

Gina Lynn Countryman

Mailing Address 1282 Deercliff Ln

City State Zip Code
Eagan MN 55123-1434

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22247

Date of Disbursement

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

Amount of Each Disbursement this Period

1554.61

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Christian G. Darouni

Mailing Address 758 Reaney Ave

City State Zip Code
St Paul MN 55106-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22201

Date of Disbursement

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

Amount of Each Disbursement this Period

794.34

[MEMO ITEM]

MEMO: FEA SALARY

B.

Full Name (Last, First, Middle Initial)
Patty Daugherty

Mailing Address 1395 Farrington St Apt A

City State Zip Code
Saint Paul MN 55117-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E24619

Date of Disbursement

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

Amount of Each Disbursement this Period

169.26

[MEMO ITEM]

MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)
Bethany Dorobiala

Mailing Address 9225 Cornell Bay

City State Zip Code
Woodbury MN 55125-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E24728

Date of Disbursement

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

Amount of Each Disbursement this Period

504.49

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Kimberly K. Ekmark

Mailing Address 9840 78th St S

City State Zip Code
Cottage Grove MN 55016-5229

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22255

Date of Disbursement

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

Amount of Each Disbursement this Period

407.86

[MEMO ITEM]

MEMO: FEA SALARY

B.

Full Name (Last, First, Middle Initial)
Terese A. Emberson

Mailing Address 165 E Co Rd B2 #211

City State Zip Code
Saint Paul MN 55119-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22203

Date of Disbursement

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

Amount of Each Disbursement this Period

237.37

[MEMO ITEM]

MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)
Nick Erickson

Mailing Address 9344 134th Street

City State Zip Code
Savage MN 55378-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22256

Date of Disbursement

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

Amount of Each Disbursement this Period

860.69

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota**A.**

Full Name (Last, First, Middle Initial)

Pamela A. Finney

Mailing Address 441 Wheeler St N #1

City
St PaulState
MNZip Code
55104-Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22204

Date of Disbursement

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

Amount of Each Disbursement this Period

495.16

[MEMO ITEM]

MEMO: FEA SALARY

B.

Full Name (Last, First, Middle Initial)

Lucas Fischer

Mailing Address 2118 130th Ave NW

City
MinneapolisState
MNZip Code
55448-Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22257

Date of Disbursement

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

Amount of Each Disbursement this Period

434.68

[MEMO ITEM]

MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)

Dorothy Fleming

Mailing Address 3101 Wendhurst Ave

City
St AnthonyState
MNZip Code
55418-1725Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22269

Date of Disbursement

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

Amount of Each Disbursement this Period

1333.68

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota**A.**Full Name (Last, First, Middle Initial)
Raymond C. Forrest

Mailing Address 680 Stewart Ave

City State Zip Code
St Paul MN 55102-Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22205

Date of Disbursement

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

Amount of Each Disbursement this Period

372.80

[MEMO ITEM]

MEMO: FEA SALARY

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

Mailing Address 192 Linden Circle

City State Zip Code
Apple Valley MN 55124-Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22252

Date of Disbursement

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

Amount of Each Disbursement this Period

836.29

[MEMO ITEM]

MEMO: FEA SALARY

C.Full Name (Last, First, Middle Initial)
Christopher J. Halonen

Mailing Address 680 Stewart Ave

City State Zip Code
Saint Paul MN 55102-4117Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22206

Date of Disbursement

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

Amount of Each Disbursement this Period

258.88

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.	Full Name (Last, First, Middle Initial) Daniel Hanover			Transaction ID: 90921.E22207 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 8	
	Mailing Address 575 Grand Ave				
	City Saint Paul	State MN	Zip Code 55102-	Amount of Each Disbursement this Period 427.05	
	Purpose of Disbursement FEA SALARY		Category/ Type	[MEMO ITEM] MEMO: FEA SALARY	
	Candidate Name				
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
	State: District:				
B.	Full Name (Last, First, Middle Initial) Dallas J. Hansen			Transaction ID: 90921.E22208 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 8	
	Mailing Address 11210 Partridge St Dh				
	City Coon Rapids	State MN	Zip Code 55433-	Amount of Each Disbursement this Period 351.29	
	Purpose of Disbursement FEA SALARY		Category/ Type	[MEMO ITEM] MEMO: FEA SALARY	
	Candidate Name				
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
	State: District:				
C.	Full Name (Last, First, Middle Initial) Sarah Hansen-Jones			Transaction ID: 90921.E22209 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 8	
	Mailing Address 505 Hoyt Ave E				
	City Saint Paul	State MN	Zip Code 55106-	Amount of Each Disbursement this Period 227.97	
	Purpose of Disbursement FEA SALARY		Category/ Type	[MEMO ITEM] MEMO: FEA SALARY	
	Candidate Name				
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
	State: District:				

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Aaron Heidebrink

Mailing Address 1975 W University Ave
#242

City State Zip Code
St Paul MN 55105-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E22210

Date of Disbursement

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

Amount of Each Disbursement this Period

168.36

[MEMO ITEM]

MEMO: FEA SALARY

B.

Full Name (Last, First, Middle Initial)

John Hendrickson

Mailing Address 2 Deer Ln

City State Zip Code
Saint Paul MN 55127-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E24797

Date of Disbursement

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

Amount of Each Disbursement this Period

193.01

[MEMO ITEM]

MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)

Thomas W. Hoffman

Mailing Address 6051 Courtyly Alcove Ave

City State Zip Code
Woodbury MN 55125-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90921.E22772

Date of Disbursement

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

Amount of Each Disbursement this Period

27.01

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

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

Mailing Address 1185 Main St NW

City State Zip Code
Elk River MN 55330-1802

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22213

Date of Disbursement

/ /

Amount of Each Disbursement this Period

59.58

[MEMO ITEM]

MEMO: FEA SALARY

B.

Full Name (Last, First, Middle Initial)
Ronald Huettl

Mailing Address 70 Virginia St
#1

City State Zip Code
St Paul MN 55107-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22214

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1360.97

[MEMO ITEM]

MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)
John Hungate

Mailing Address 680 Stewart Ave

City State Zip Code
Saint Paul MN 55102-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22215

Date of Disbursement

/ /

Amount of Each Disbursement this Period

114.49

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Kathleen Hupalo

Mailing Address 684 Delaware Ave

City State Zip Code
St Paul MN 55107-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22216

Date of Disbursement

/ /

Amount of Each Disbursement this Period

138.60

[MEMO ITEM]

MEMO: FEA SALARY

B.

Full Name (Last, First, Middle Initial)
Matthew Kirkpatrick

Mailing Address 3900 Valley View Dr N # 303
#303

City State Zip Code
Saint Paul MN 55122-1554

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22258

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.79

[MEMO ITEM]

MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)
Michael T. Laehn

Mailing Address 4140 Columbus Ave Apt 2

City State Zip Code
Minneapolis MN 55407-5082

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22217

Date of Disbursement

/ /

Amount of Each Disbursement this Period

395.08

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Nicole Lindaman	Transaction ID: 90921.E22248 Date of Disbursement
Mailing Address 808 Berry St Apt 135 Apt. 135	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 3 1 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55114-1454	Amount of Each Disbursement this Period
Purpose of Disbursement FEA SALARY Candidate Name	<div> <div>98.03</div> <div>[MEMO ITEM] MEMO: FEA SALARY</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Jeannette Manning	Transaction ID: 90921.E26333 Date of Disbursement
Mailing Address 749 Ottawa Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 3 1 / 2 0 0 8</div> </div>
City St Paul State MN Zip Code 55104-	Amount of Each Disbursement this Period
Purpose of Disbursement FEA SALARY Candidate Name	<div> <div>247.63</div> <div>[MEMO ITEM] MEMO: FEA SALARY</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Georgina H. McNiff	Transaction ID: 90921.E22220 Date of Disbursement
Mailing Address 7 Stanley Keyes Ct	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 3 1 / 2 0 0 8</div> </div>
City Rye State NY Zip Code 10580-3260	Amount of Each Disbursement this Period
Purpose of Disbursement FEA SALARY Candidate Name	<div> <div>73.93</div> <div>[MEMO ITEM] MEMO: FEA SALARY</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.	Full Name (Last, First, Middle Initial) Landrey McKinzie	Transaction ID: 90921.E22219 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 8
	Mailing Address 7338 Jewel Ave S	
	City Cottage Grove State MN Zip Code 55016-	Amount of Each Disbursement this Period 359.28
	Purpose of Disbursement FEA SALARY	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] MEMO: FEA SALARY
B.	Full Name (Last, First, Middle Initial) John T. Meyer	Transaction ID: 90921.E22259 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 8
	Mailing Address 1425 Jessamine Ave W Apt. 110	
	City Saint Paul State MN Zip Code 55108-	Amount of Each Disbursement this Period 437.09
	Purpose of Disbursement FEA SALARY	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] MEMO: FEA SALARY
C.	Full Name (Last, First, Middle Initial) William J. Milbach	Transaction ID: 90921.E22221 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 8
	Mailing Address 1438 N Pascal	
	City St Paul State MN Zip Code 55102-	Amount of Each Disbursement this Period 1296.41
	Purpose of Disbursement FEA SALARY	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] MEMO: FEA SALARY
	SUBTOTAL of Disbursements This Page (optional)	0.00
	TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Adam Mohler	Transaction ID: 90921.E22222 Date of Disbursement
Mailing Address 3924 Cedar Grove Pkwy Apt 207	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 3 1 / 2 0 0 8</div> </div>
City Eagan State MN Zip Code 55122-	Amount of Each Disbursement this Period
Purpose of Disbursement FEA SALARY	<div>771.83</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: FEA SALARY
B. Full Name (Last, First, Middle Initial) Cherye Lee Montgomery	Transaction ID: 90921.E22223 Date of Disbursement
Mailing Address Po Box 65231	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 3 1 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55165-	Amount of Each Disbursement this Period
Purpose of Disbursement FEA SALARY	<div>484.75</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: FEA SALARY
C. Full Name (Last, First, Middle Initial) David E. Mowen	Transaction ID: 90921.E22224 Date of Disbursement
Mailing Address 2651 Oliver Ave N	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 3 1 / 2 0 0 8</div> </div>
City Minneapolis State MN Zip Code 55411-1846	Amount of Each Disbursement this Period
Purpose of Disbursement FEA SALARY	<div>180.90</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)

Martha Nichols

Mailing Address 2124 Bates Ave.
H4

City State Zip Code
St. Paul MN 55106-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22225

Date of Disbursement

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

Amount of Each Disbursement this Period

364.39

[MEMO ITEM]

MEMO: FEA SALARY

B.

Full Name (Last, First, Middle Initial)

Angela Nielsen

Mailing Address 123M McKnight Rd N

City State Zip Code
Saint Paul MN 55119-6653

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22882

Date of Disbursement

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

Amount of Each Disbursement this Period

3530.22

[MEMO ITEM]

MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)

Christine B. Nielsen

Mailing Address 580 Low Bench Rd

City State Zip Code
Gallatin Gateway MT 59730-9739

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22227

Date of Disbursement

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

Amount of Each Disbursement this Period

321.33

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

Full Name (Last, First, Middle Initial)
Aaron P. Paterson

Mailing Address 3601 Northwood Drive NE

City State Zip Code
Cedar Rapids IA 52402-2730

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22260

Date of Disbursement

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

Amount of Each Disbursement this Period

390.25

[MEMO ITEM]

MEMO: FEA SALARY

B.

Full Name (Last, First, Middle Initial)
Francis Dana Payne

Mailing Address 8601 Edenbrook Crossing

City State Zip Code
Minneapolis MN 55402-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22228

Date of Disbursement

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

Amount of Each Disbursement this Period

764.96

[MEMO ITEM]

MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)
Donald G. Pelton

Mailing Address 535 Asbury St Apt 18

City State Zip Code
Saint Paul MN 55104-2389

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22229

Date of Disbursement

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

Amount of Each Disbursement this Period

243.08

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.	Full Name (Last, First, Middle Initial) Lori-Anne Pizzella	Transaction ID: 90921.E22230 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 8
	Mailing Address 680 Stewart Ave Lp	
	City St Paul State MN Zip Code 55102-	Amount of Each Disbursement this Period 268.00
	Purpose of Disbursement FEA SALARY	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] MEMO: FEA SALARY
B.	Full Name (Last, First, Middle Initial) Anthony Post	Transaction ID: 90921.E22261 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 8
	Mailing Address 1002 Drew Drive	
	City Saint Paul State MN Zip Code 55124-	Amount of Each Disbursement this Period 902.50
	Purpose of Disbursement FEA SALARY	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] MEMO: FEA SALARY
C.	Full Name (Last, First, Middle Initial) Joshua Revak	Transaction ID: 90921.E22262 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 8
	Mailing Address 74732 240th St	
	City Dassel State MN Zip Code 55325-3451	Amount of Each Disbursement this Period 383.61
	Purpose of Disbursement FEA SALARY	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota**A.**Full Name (Last, First, Middle Initial)
Shawn K. Ricks

Mailing Address 1871 East 7th St. # 6

City State Zip Code
St. Paul MN 55115-Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22231

Date of Disbursement

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

Amount of Each Disbursement this Period

131.73

[MEMO ITEM]

MEMO: FEA SALARY

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

Mailing Address 1577 Jessamine Ln B

City State Zip Code
St Paul MN 55106-Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22232

Date of Disbursement

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

Amount of Each Disbursement this Period

50.42

[MEMO ITEM]

MEMO: FEA SALARY

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

Mailing Address 1342 Coach St Apt 122

City State Zip Code
Saint Paul MN 55108-5296Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22263

Date of Disbursement

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

Amount of Each Disbursement this Period

434.68

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota**A.**

Full Name (Last, First, Middle Initial)

David Rupprecht

Mailing Address 1550 Edgerton St
Apt 303City State Zip Code
St Paul MN 55105-Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22233

Date of Disbursement

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

Amount of Each Disbursement this Period

39.35

[MEMO ITEM]

MEMO: FEA SALARY

B.

Full Name (Last, First, Middle Initial)

Robert D. Schultz III

Mailing Address 23780 Smithtown Rd

City State Zip Code
Excelsior MN 55331-1770Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22244

Date of Disbursement

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

Amount of Each Disbursement this Period

138.52

[MEMO ITEM]

MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)

Dennis Scott

Mailing Address 680 Stewart Ave
ScoCity State Zip Code
St Paul MN 55102-Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22234

Date of Disbursement

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

Amount of Each Disbursement this Period

395.37

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota**A.**Full Name (Last, First, Middle Initial)
Meghan Shultz

Mailing Address 680 Stewart Ave

City State Zip Code
Minneapolis MN 55407-Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22235

Date of Disbursement

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

Amount of Each Disbursement this Period

340.54

[MEMO ITEM]

MEMO: FEA SALARY

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

Mailing Address 223 Bates St #707

City State Zip Code
St Paul MN 55102-Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22236

Date of Disbursement

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

Amount of Each Disbursement this Period

160.50

[MEMO ITEM]

MEMO: FEA SALARY

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

Mailing Address 710 Charles Ave

City State Zip Code
Saint Paul MN 55104-2718Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22237

Date of Disbursement

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

Amount of Each Disbursement this Period

128.30

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A.

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

Mailing Address 8731 Pheasant Run Cir

City State Zip Code
Saint Paul MN 55125-8606

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22249

Date of Disbursement

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

Amount of Each Disbursement this Period

127.87

[MEMO ITEM]

MEMO: FEA SALARY

B.

Full Name (Last, First, Middle Initial)
John Suder

Mailing Address 680 Stewart Ave

City State Zip Code
St Paul MN 55102-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22238

Date of Disbursement

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

Amount of Each Disbursement this Period

898.87

[MEMO ITEM]

MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)
Travis Symoniak

Mailing Address 12457 Ilex St NW

City State Zip Code
Coon Rapids MN 55448-2664

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22253

Date of Disbursement

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

Amount of Each Disbursement this Period

333.09

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Robert D. Todd	Transaction ID: 90921.E22264 Date of Disbursement
Mailing Address 715 Northern Hills Dr NE	<div> <div>12</div> <div>31</div> <div>2008</div> </div>
City Rochester State MN Zip Code 55906-4088	Amount of Each Disbursement this Period
Purpose of Disbursement FEA SALARY Candidate Name	<div>557.39</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> [MEMO ITEM] MEMO: FEA SALARY </div>
B. Full Name (Last, First, Middle Initial) Detra Turner	Transaction ID: 90921.E22239 Date of Disbursement
Mailing Address 922 Wescott Trail #202	<div> <div>12</div> <div>31</div> <div>2008</div> </div>
City Saint Paul State MN Zip Code 55123-	Amount of Each Disbursement this Period
Purpose of Disbursement FEA SALARY Candidate Name	<div>237.92</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> [MEMO ITEM] MEMO: FEA SALARY </div>
C. Full Name (Last, First, Middle Initial) Joyce Walker	Transaction ID: 90921.E22240 Date of Disbursement
Mailing Address 445 View St	<div> <div>12</div> <div>31</div> <div>2008</div> </div>
City Saint Paul State MN Zip Code 55102-3426	Amount of Each Disbursement this Period
Purpose of Disbursement FEA SALARY Candidate Name	<div>157.97</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> [MEMO ITEM] MEMO: FEA SALARY </div>

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota**A.**Full Name (Last, First, Middle Initial)
Robert Wills

Mailing Address 1491 Woodview St E

City Saint Paul State MN Zip Code 55122-1323

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22265

Date of Disbursement

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

Amount of Each Disbursement this Period

639.21

[MEMO ITEM]

MEMO: FEA SALARY

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

Mailing Address 1491 Woodview St E

City Saint Paul State MN Zip Code 55122-1323

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22268

Date of Disbursement

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

Amount of Each Disbursement this Period

155.00

[MEMO ITEM]

MEMO: FEA SALARY

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

Mailing Address 235 Exeter Pl Apt 304

City Saint Paul State MN Zip Code 55104-5711

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22241

Date of Disbursement

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

Amount of Each Disbursement this Period

109.71

[MEMO ITEM]

MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Jeffrey Woods	Transaction ID: 90921.E22266 Date of Disbursement
Mailing Address 14610 Bowers Dr NW	<div> <div>12</div> <div>31</div> <div>2008</div> </div>
City Anoka State MN Zip Code 55303-7209	Amount of Each Disbursement this Period
Purpose of Disbursement FEA SALARY Candidate Name	<div>466.47</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: FEA SALARY
B. Full Name (Last, First, Middle Initial) Michael A. Wright	Transaction ID: 90921.E22242 Date of Disbursement
Mailing Address 2477 Indian Way	<div> <div>12</div> <div>31</div> <div>2008</div> </div>
City St Paul State MN Zip Code 55109-	Amount of Each Disbursement this Period
Purpose of Disbursement FEA SALARY Candidate Name	<div>329.99</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: FEA SALARY
C. Full Name (Last, First, Middle Initial) Shane Wyman	Transaction ID: 90921.E25919 Date of Disbursement
Mailing Address 9124 Tyler St NE	<div> <div>12</div> <div>31</div> <div>2008</div> </div>
City Minneapolis State MN Zip Code 55434-	Amount of Each Disbursement this Period
Purpose of Disbursement FEA Salary Candidate Name	<div>439.41</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
for each category of the
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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Response America Llc	Transaction ID: 90921.E21518 Date of Disbursement
Mailing Address 2800 S Shirlington Rd Ste 901 Suite 901	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 5 / 2 0 0 8</div> </div>
City Arlington State VA Zip Code 22206-3619	Amount of Each Disbursement this Period
Purpose of Disbursement Absentee Ballot Mail-Generic Candidate Name <div>Category/Type</div>	<div>51744.70</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	ABSENTEE BALLOT MAIL-GENE- RIC
B. Full Name (Last, First, Middle Initial) Response America Llc	Transaction ID: 90921.E21732 Date of Disbursement
Mailing Address 2800 S Shirlington Rd Ste 901 Suite 901	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 5 / 2 0 0 8</div> </div>
City Arlington State VA Zip Code 22206-3619	Amount of Each Disbursement this Period
Purpose of Disbursement GOTV Mail-Generic Candidate Name <div>Category/Type</div>	<div>9649.13</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	GOTV MAIL-GENERIC
C. Full Name (Last, First, Middle Initial) Response America Llc	Transaction ID: 90921.E21752 Date of Disbursement
Mailing Address 2800 S Shirlington Rd Ste 901 Suite 901	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 9 / 2 0 0 8</div> </div>
City Arlington State VA Zip Code 22206-3619	Amount of Each Disbursement this Period
Purpose of Disbursement Exempt Mail Candidate Name BARACK OBAMA <div>Category/Type</div>	<div>30491.93</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: 00	EXEMPT MAIL
SUBTOTAL of Disbursements This Page (optional) ►	<div>91885.76</div>
TOTAL This Period (last page this line number only) ►	<div></div>

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

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Alliance Bank Mailing Address 444 Cedar St	Transaction ID: 90921.E21956 Date of Disbursement <div> <div>12</div> <div>09</div> <div>2008</div> </div>
City Saint Paul State MN Zip Code 55101-2179 Purpose of Disbursement Employee FEA HSA Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>1360.00</div> EMPLOYEE FEA HSA CONTRIBU- TION
B. Full Name (Last, First, Middle Initial) Alliance Bank Mailing Address 444 Cedar St City Saint Paul State MN Zip Code 55101-2179 Purpose of Disbursement Employee HSA Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90921.E22309 Date of Disbursement <div> <div>12</div> <div>22</div> <div>2008</div> </div> Amount of Each Disbursement this Period <div>292.30</div> EMPLOYEE HSA CONTRIBUTION
C. Full Name (Last, First, Middle Initial) Alliance Bank Mailing Address 444 Cedar St City Saint Paul State MN Zip Code 55101-2179 Purpose of Disbursement Employee HSA Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90921.E22325 Date of Disbursement <div> <div>12</div> <div>31</div> <div>2008</div> </div> Amount of Each Disbursement this Period <div>146.15</div> EMPLOYEE HSA CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional)

1798.45

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial)
Blue Cross Blue Shield of Minnesota

Mailing Address P.o. Box 64338

City State Zip Code
St. Paul MN 55164-0179

Purpose of Disbursement
Employees Health Insurance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E22300

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5093.00

EMPLOYEES HEALTH INSURANCE

B. Full Name (Last, First, Middle Initial)
FLS Connect

Mailing Address 7300 Hudson Blvd N Ste 270

City State Zip Code
Saint Paul MN 55128-7143

Purpose of Disbursement
Party Fundraising Telemarketing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90921.E21198

Date of Disbursement

/ /

Amount of Each Disbursement this Period

122074.05

PARTY FUNDRAISING TELEMAR-
KETING

C. Full Name (Last, First, Middle Initial)
Stoneridge Group

Mailing Address 554 W Main St Bldg A200
Building A

City State Zip Code
Buford GA 30518-5773

Purpose of Disbursement
Exempt Door Hangers

Candidate Name
JOHN S. MCCAIN

Category/
Type

Office Sought: ☐ House
☐ Senate
☒ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District: 00

Transaction ID: 90921.E21519

Date of Disbursement

/ /

Amount of Each Disbursement this Period

675.00

EXEMPT DOOR HANGERS

SUBTOTAL of Disbursements This Page (optional)

127842.05

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 296 / 322

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial) Popp.com Mailing Address PO Box 27110	Transaction ID: 90921.E21731 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	9		2	0	0	8	
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		0	9		2	0	0	8													
City Minneapolis State MN Zip Code 55427- Purpose of Disbursement Party fundraising-telephone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <table border="1"> <tr> <td>1023.72</td> </tr> </table> PARTY FUNDRAISING-TELEPHONE	1023.72																				
1023.72																						
B. Full Name (Last, First, Middle Initial) Principal Financial Group Mailing Address 711 High St City Des Moines State IA Zip Code 50392-0001 Purpose of Disbursement FEA Employee Benefits-Dental Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90921.E22305 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>584.16</td> </tr> </table> FEA EMPLOYEE BENEFITS-DENTAL	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	3		2	0	0	8	584.16
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		2	3		2	0	0	8													
584.16																						
C. Full Name (Last, First, Middle Initial) Ameriprise Financial Services, Inc. Mailing Address 70205 Ameriprise Financial Ctr City Minneapolis State MN Zip Code 55474-0702 Purpose of Disbursement FEA Employees IRA Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90921.E22289 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>1241.54</td> </tr> </table> FEA EMPLOYEES IRA CONTRIBUTION	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	3		2	0	0	8	1241.54
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		2	3		2	0	0	8													
1241.54																						

SUBTOTAL of Disbursements This Page (optional)

2849.42

TOTAL This Period (last page this line number only)

418296.29

SCHEDULE C (FEC Form 3X)Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 297 / 322

FOR LINE 13 OF FORM 3X

LOANSNAME OF COMMITTEE (In Full)
Republican Party of Minnesota

Transaction ID: LS90921.C685325

LOAN SOURCE Full Name (Last, First, Middle Initial)
Alliance Bank

Election:

- ☐
- Primary
-
- ☐
- General
-
- ☐
- Other (specify) ▼

Mailing Address 444 Cedar St

City Saint Paul State MN ZIP Code 55101-2179

Original Amount of Loan

240101.14

Cumulative Payment To Date

16303.28

Balance Outstanding at Close of This Period

223797.86

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 8D D
0 9Y Y Y Y
2 0 0 8

20090809

8.25

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

223797.86

TOTALS This Period (last page in this line only) ▶

223797.86

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 298 / 322
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

NAME OF ACCOUNT
 Minnesota Republica
 Party 525 Park St

DATE OF RECEIPT

M M / D D / Y Y Y Y
 1 2 / 1 9 / 2 0 0 8

TOTAL AMOUNT TRANSFERRED

120000.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

120000.00

Transaction ID: H390921.C726463

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

120000.00

TOTAL This Period (Generic Voter Drive)

0.00

TOTAL This Period (Exempt Activities)

0.00

TOTAL This Period (Direct Fundraising)

0.00

TOTAL This Period (Direct Candidate Support)

0.00

TOTAL This Period (Public Communications Referring Only to Party)

0.00

TOTAL This Period (Total Amount Transferred)

120000.00

SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY

PAGE 299 / 322
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial)

Xcel Energy

Mailing Address

P.O. Box 9477

City State Zip Code

Minneapolis MN 55464-

Purpose of Disbursement:
Office UtilitiesCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1229217.26

Date

M	M
1	1

 /

D	D
2	5

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490921.E21187

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

35.25

62.67

97.92

B. Full Name (Last, First, Middle Initial)

RJF Agencies

Mailing Address

6000 Nathan Ln N Ste 400

City State Zip Code

Minneapolis MN 55442-1691

Purpose of Disbursement:
General Liability InsuranceCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1229062.34

Date

M	M
1	1

 /

D	D
2	5

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490921.E21188

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

36.05

64.09

100.14

C. Full Name (Last, First, Middle Initial)

Verizon Wireless

Mailing Address

P.O. Box 790422

City State Zip Code

St. Louis MO 63179-

Purpose of Disbursement:
Party Telephone ExpenseCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1228962.20

Date

M	M
1	1

 /

D	D
2	5

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490921.E21189

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

973.46

1730.59

2704.05

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1044.76

1857.35

2902.11

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 300 / 322
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial)

Joel Cary

Mailing Address

12809 44th PI NE

City

State

Zip Code

Saint Michael

MN

55376-3030

Purpose of Disbursement:

SEE BELOW: Reimb for DSL

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1226258.15

Date

M M

1 1

D D

2 5

Y Y

2 0

0 8

Transaction ID: H490921.E21192

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

27.73

49.30

77.03

B. Full Name (Last, First, Middle Initial)

Embarq

Mailing Address

PO Box 660068

City

State

Zip Code

Dallas

TX

75266-0068

Purpose of Disbursement:

ITEMIZE: Cary-Computer Serv

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: Cary-Computer Serv

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

77.03

Date

M M

1 1

D D

2 5

Y Y

2 0

0 8

Transaction ID: H490921.E21193

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

27.73

49.30

77.03

C. Full Name (Last, First, Middle Initial)

Comcast

Mailing Address

PO Box 3002

City

State

Zip Code

Southeastern

PA

19398-3002

Purpose of Disbursement:

On Line Services

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1229119.34

Date

M M

1 1

D D

2 5

Y Y

2 0

0 8

Transaction ID: H490921.E21194

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

20.52

36.48

57.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

48.25

85.78

134.03

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 301 / 322
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial)
 Ian L. Alexander

Mailing Address

3637 Emerson Ave N

City	State	Zip Code
Minneapolis	MN	55412-2007

Purpose of Disbursement:
 SEE BELOW: Reimb for cell phone

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1229272.24

Date

M	M
1	1

 /

D	D
2	5

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490921.E21195

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
19.79		35.19		54.98

B. Full Name (Last, First, Middle Initial)
 T-Mobile Phone Service

Mailing Address

PO Box 790047

City	State	Zip Code
Saint Louis	MO	63179-0047

Purpose of Disbursement:
 ITEMIZE: Alexander - cell phone

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: Alexander - cell phone

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

54.98

Date

M	M
1	1

 /

D	D
2	5

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490921.E21196

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
19.79		35.19		54.98

C. Full Name (Last, First, Middle Initial)
 Hub Properties Trust

Mailing Address

Reit Management Research330 2nd. Ave. S Suite 110

City	State	Zip Code
Minneapolis	MN	55401-

Purpose of Disbursement:
 Office Rent

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1241499.59

Date

M	M
1	2

 /

D	D
0	1

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490921.E21506

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4401.85		7825.50		12227.35

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4421.64		7860.69		12282.33

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 302 / 322
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial)
Neopost

Mailing Address

P.O. Box 73727

 City State Zip Code
Chicago IL 60673-

 Purpose of Disbursement:
Party fundraising Postage/Non FEA
Category/
Type
 Activity or Event Identifier:
ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1249584.93

 Date M M / D D / Y Y Y Y
1 2 / 0 5 / 2 0 0 8

Transaction ID: H490921.E21511

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
75.29		133.85		209.14

B. Full Name (Last, First, Middle Initial)
Advantage Paper

Mailing Address

310 Congress St Nw

 City State Zip Code
Maple Lake MN 55358-

 Purpose of Disbursement:
General Office Supplies
Category/
Type
 Activity or Event Identifier:
ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1249375.79

 Date M M / D D / Y Y Y Y
1 2 / 0 5 / 2 0 0 8

Transaction ID: H490921.E21513

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
72.14		128.26		200.40

C. Full Name (Last, First, Middle Initial)
Paychex

Mailing Address

1210 Northland Dr Ste 100

 City State Zip Code
Saint Paul MN 55120-1181

 Purpose of Disbursement:
SEE BELOW: Non FEA Salary
Category/
Type
 Activity or Event Identifier:
ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1255325.76

 Date M M / D D / Y Y Y Y
1 2 / 0 5 / 2 0 0 8

Transaction ID: H490921.E21607

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1385.46		2463.04		3848.50

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1532.89		2725.15		4258.04

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 303 / 322
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial)

Barbara Linert

Mailing Address

4282 Braddock Trl

City

State

Zip Code

Eagan

MN

55123-1941

Purpose of Disbursement:

ITEMIZE: Non-FEA Salary

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: Non-FEA Salary

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

827.71

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	5	/	2	0	0	8

Transaction ID: H490921.E21623

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

297.98

529.73

827.71

B. Full Name (Last, First, Middle Initial)

Christy A. McGill

Mailing Address

902 Ashland Ave

City

State

Zip Code

Saint Paul

MN

55104-7013

Purpose of Disbursement:

ITEMIZE: Non-FEA Salary

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: Non-FEA Salary

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

809.10

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	5	/	2	0	0	8

Transaction ID: H490921.E21622

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

291.28

517.82

809.10

C. Full Name (Last, First, Middle Initial)

Ian L. Alexander

Mailing Address

3637 Emerson Ave N

City

State

Zip Code

Minneapolis

MN

55412-2007

Purpose of Disbursement:

ITEMIZE: Non-FEA Salary

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: Non-FEA Salary

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1657.98

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	5	/	2	0	0	8

Transaction ID: H490921.E21621

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

596.87

1061.11

1657.98

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 304 / 322
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial)
 Brenton W. Haack

Mailing Address
 316 River St N

City State Zip Code
 Delano MN 55328-9381

Purpose of Disbursement:
 ITEMIZE: Non-FEA Salary

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 2
[MEMO ITEM] ITEMIZE: Non-FEA Salary

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

553.71

Date M M / D D / Y Y Y Y
 1 2 / 0 5 / 2 0 0 8

Transaction ID: H490921.E21624

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

199.34

354.37

553.71

B. Full Name (Last, First, Middle Initial)
 Paychex

Mailing Address
 1210 Northland Dr Ste 100

City State Zip Code
 Saint Paul MN 55120-1181

Purpose of Disbursement:
 SEE BELOW: Non-FEA Payroll Taxes

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1256795.41

Date M M / D D / Y Y Y Y
 1 2 / 0 5 / 2 0 0 8

Transaction ID: H490921.E21609

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

529.07

940.58

1469.65

C. Full Name (Last, First, Middle Initial)
 Internal Revenue Service

Mailing Address
 P.O. BOX 43251

City State Zip Code
 Ogden UT 84201-0001

Purpose of Disbursement:
 ITEMIZE: Non-FEA Payroll Taxes

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 2
[MEMO ITEM] ITEMIZE: Non-FEA Payroll Taxes

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1267.92

Date M M / D D / Y Y Y Y
 1 2 / 0 5 / 2 0 0 8

Transaction ID: H490921.E25061

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

456.45

811.47

1267.92

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

529.07

940.58

1469.65

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 305 / 322
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial)
 MN Dept of Revenue

Mailing Address

658 Cedar St Ste 400

City

State

Zip Code

Saint Paul

MN

55155-1603

Purpose of Disbursement:

ITEMIZE: Non-FEA Payroll Taxes

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: Non-FEA Payroll Taxes

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

201.73

Date

M M / D D / Y Y Y Y
1 2 / 0 5 / 2 0 0 8

Transaction ID: H490921.E21614

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

72.62

129.11

201.73

B. Full Name (Last, First, Middle Initial)
 Whatever Services

Mailing Address

240 Wyndham Circle W.

City

State

Zip Code

New Brighton

MN

55112-

Purpose of Disbursement:

Party Accounting Services

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261285.49

Date

M M / D D / Y Y Y Y
1 2 / 0 9 / 2 0 0 8

Transaction ID: H490921.E21706

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

697.50

1240.00

1937.50

C. Full Name (Last, First, Middle Initial)
 Advantage Paper

Mailing Address

310 Congress St Nw

City

State

Zip Code

Maple Lake

MN

55358-

Purpose of Disbursement:

General Office Supplies

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1256891.45

Date

M M / D D / Y Y Y Y
1 2 / 0 9 / 2 0 0 8

Transaction ID: H490921.E21727

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

34.57

61.47

96.04

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

732.07

1301.47

2033.54

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 306 / 322
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial)
 Staples Business Advantage

Mailing Address

PO Box 83689

City	State	Zip Code
Chicago	IL	60696-0001

Purpose of Disbursement:
 General Office Supplies

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1262038.10

Date

M	M
1	2

 /

D	D
0	9

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490921.E21728

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
47.38		84.23		131.61

B. Full Name (Last, First, Middle Initial)
 Onvoy

Mailing Address

Po Box 1450

City	State	Zip Code
Minneapolis	MN	55485-

Purpose of Disbursement:
 Office Computer Services

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1259347.99

Date

M	M
1	2

 /

D	D
0	9

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490921.E21729

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
814.32		1447.68		2262.00

C. Full Name (Last, First, Middle Initial)
 Popp.com

Mailing Address

PO Box 27110

City	State	Zip Code
Minneapolis	MN	55427-

Purpose of Disbursement:
 Party Telephone/Non-FEA

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261906.49

Date

M	M
1	2

 /

D	D
0	9

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490921.E21730

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
223.56		397.44		621.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1085.26		1929.35		3014.61

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 307 / 322
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial)
 SMD Copy Systems

Mailing Address

6520 W Lake St

City	State	Zip Code
Minneapolis	MN	55408-

Purpose of Disbursement:
 Equipment Maintenance

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1257085.99

Date

M	M
1	2

 /

D	D
0	9

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490921.E21865

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

70.03

124.51

194.54

B. Full Name (Last, First, Middle Initial)
 Xcel Energy

Mailing Address

P.O. Box 9477

City	State	Zip Code
Minneapolis	MN	55464-

Purpose of Disbursement:
 Office Utilities

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1262063.63

Date

M	M
1	2

 /

D	D
0	9

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490921.E21866

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

9.19

16.34

25.53

C. Full Name (Last, First, Middle Initial)
 Business Data Records

Mailing Address

201 9th Ave SW

City	State	Zip Code
Saint Paul	MN	55112-3211

Purpose of Disbursement:
 Business Data Storage

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1263530.78

Date

M	M
1	2

 /

D	D
0	9

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490921.E21867

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

528.17

938.98

1467.15

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

607.39

1079.83

1687.22

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 308 / 322
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial)
Cardmember Services

Mailing Address

PO Box 790408

City	State	Zip Code
Saint Louis	MO	63179-0408

 Purpose of Disbursement:
SEE BELOW: CC PAYMENT
Category/
Type
 Activity or Event Identifier:
ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1251477.26

 Date

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	5	/	2	0	0	8

Transaction ID: H490921.E21883

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
681.24		1211.09		1892.33

B. Full Name (Last, First, Middle Initial)
Office Max - St. Paul

Mailing Address

1490 W. University Ave

City	State	Zip Code
St. Paul	MN	55104-

 Purpose of Disbursement:
ITEMIZE: CC - paper
Category/
Type
 Activity or Event Identifier:
ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: CC - paper

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

47.22

 Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	5	/	2	0	0	8

Transaction ID: H490921.E21888

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.00		30.22		47.22

C. Full Name (Last, First, Middle Initial)
Office Max - St. Paul

Mailing Address

1490 W. University Ave

City	State	Zip Code
St. Paul	MN	55104-

 Purpose of Disbursement:
ITEMIZE: CC - paper/toner
Category/
Type
 Activity or Event Identifier:
ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: CC - paper/toner

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

67.46

 Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	5	/	2	0	0	8

Transaction ID: H490921.E21886

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
24.29		43.17		67.46

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
681.24		1211.09		1892.33

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 309 / 322
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial)
Blink Bonnie

Mailing Address

237 E. 7th Street

City	State	Zip Code
St. Paul	MN	55101-

Purpose of Disbursement:
ITEMIZE: CC - meal

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: CC - meal

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

82.48

Date

M	M
1	1

 /

D	D
2	5

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490921.E21895

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

29.69

52.79

82.48

B. Full Name (Last, First, Middle Initial)
All American Self Storage

Mailing Address

1500 Marshall Ave

City	State	Zip Code
St Paul	MN	55104-

Purpose of Disbursement:
ITEMIZE: CC - Storage Rent

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: CC - Storage Rent

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

302.87

Date

M	M
1	1

 /

D	D
2	5

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490921.E21885

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

109.03

193.84

302.87

C. Full Name (Last, First, Middle Initial)
Menards - St. Paul

Mailing Address

2005 University Ave W

City	State	Zip Code
Saint Paul	MN	55104-3431

Purpose of Disbursement:
ITEMIZE: CC - office furniture

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: CC - office furniture

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

244.53

Date

M	M
1	1

 /

D	D
2	5

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490921.E23345

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

88.03

156.50

244.53

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 310 / 322
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial)

Office Depot - Maple Grove

Mailing Address

12795 Elm Creek Blvd N

City

State

Zip Code

Maple Grove

MN

55369-7045

Purpose of Disbursement:

ITEMIZE: CC - office furniture

Category/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

363.41

Activity or Event Identifier:

ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: CC - office furniture

Date

M M

1 1

D D

2 5

Y Y Y Y

2 0 0 8

Transaction ID: H490921.E21890

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

130.83

232.58

363.41

B. Full Name (Last, First, Middle Initial)

Office Max - Apple Valley

Mailing Address

7361 153rd St W

City

State

Zip Code

Saint Paul

MN

55124-7042

Purpose of Disbursement:

ITEMIZE: CC - toner/paper/pens

Category/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

100.72

Activity or Event Identifier:

ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: CC - toner/paper/pens

Date

M M

1 1

D D

2 5

Y Y Y Y

2 0 0 8

Transaction ID: H490921.E21887

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

36.26

64.46

100.72

C. Full Name (Last, First, Middle Initial)

Office Depot - Minnetonka

Mailing Address

1005 Plymouth Rd

City

State

Zip Code

Minnetonka

MN

55305-1056

Purpose of Disbursement:

ITEMIZE: CC - toner/paper/pens

Category/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

165.68

Activity or Event Identifier:

ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: CC - toner/paper/pens

Date

M M

1 1

D D

2 5

Y Y Y Y

2 0 0 8

Transaction ID: H490921.E21889

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

59.64

106.04

165.68

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 311 / 322

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial)
 Office Depot - Bloomington

Mailing Address

4200 W 78th St

City

State

Zip Code

Edina

MN

55435-5404

Purpose of Disbursement:

ITEMIZE: CC - office furniture

Category/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

165.68

Activity or Event Identifier:

ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: CC - office furniture

Date M M / D D / Y Y Y Y

Transaction ID: H490921.E21892

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

59.64

106.04

165.68

B. Full Name (Last, First, Middle Initial)
 Mamas Pizza -St Paul

Mailing Address

961 Rice St

City

State

Zip Code

Saint Paul

MN

55117-4950

Purpose of Disbursement:

ITEMIZE: CC - meal

Category/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

118.32

Activity or Event Identifier:

ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: CC - meal

Date M M / D D / Y Y Y Y

Transaction ID: H490921.E21893

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

42.60

75.72

118.32

C. Full Name (Last, First, Middle Initial)
 1-800-Got-Junk?

Mailing Address

1000 Pennsylvania Ave S

City

State

Zip Code

Minneapolis

MN

55426-1649

Purpose of Disbursement:

ITEMIZE: CC - trash removal

Category/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

233.96

Activity or Event Identifier:

ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: CC - trash removal

Date M M / D D / Y Y Y Y

Transaction ID: H490921.E21896

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

84.23

149.73

233.96

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 312 / 322
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial)
Visa Elan

Mailing Address

7300 Chapman Hwy

City	State	Zip Code
Knoxville	TN	37920-

Purpose of Disbursement:
Credit Card Processing Fee

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1249175.39

Date

M	M
1	2

 /

D	D
0	2

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490921.E21949

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

2763.29

4912.51

7675.80

B. Full Name (Last, First, Middle Initial)
Paychex

Mailing Address

1210 Northland Dr Ste 100

City	State	Zip Code
Saint Paul	MN	55120-1181

Purpose of Disbursement:
SEE BELOW: Non FEA Salary

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1419998.85

Date

M	M
1	2

 /

D	D
1	9

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490921.E21957

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1412.63

2511.34

3923.97

C. Full Name (Last, First, Middle Initial)
Barbara Linert

Mailing Address

4282 Braddock Trl

City	State	Zip Code
Eagan	MN	55123-1941

Purpose of Disbursement:
ITEMIZE: Non-FEA Salary

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: Non-FEA Salary

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

827.71

Date

M	M
1	2

 /

D	D
1	9

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490921.E21972

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

297.98

529.73

827.71

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

4175.92

7423.85

11599.77

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 313 / 322
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial)
 Christy A. McGill

Mailing Address
 902 Ashland Ave

City State Zip Code
 Saint Paul MN 55104-7013

Purpose of Disbursement:
 ITEMIZE: Non-FEA Salary

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: Non-FEA Salary

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

809.10

Date 12 / 19 / 2008

Transaction ID: H490921.E21974

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

291.28

517.82

809.10

B. Full Name (Last, First, Middle Initial)
 Ian L. Alexander

Mailing Address
 3637 Emerson Ave N

City State Zip Code
 Minneapolis MN 55412-2007

Purpose of Disbursement:
 ITEMIZE: Non-FEA Salary

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: Non-FEA Salary

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1657.98

Date 12 / 19 / 2008

Transaction ID: H490921.E21971

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

596.87

1061.11

1657.98

C. Full Name (Last, First, Middle Initial)
 Brenton W. Haack

Mailing Address
 316 River St N

City State Zip Code
 Delano MN 55328-9381

Purpose of Disbursement:
 ITEMIZE: Non-FEA Salary

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: Non-FEA Salary

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

629.18

Date 12 / 19 / 2008

Transaction ID: H490921.E21973

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

226.50

402.68

629.18

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 314 / 322
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial)
Paychex

Mailing Address

1210 Northland Dr Ste 100

City

State

Zip Code

Saint Paul

MN

55120-1181

Purpose of Disbursement:

SEE BELOW: Non-FEA Payroll Taxes

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1421498.52

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	9	/	2	0	0	8

Transaction ID: H490921.E21959

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

539.88

959.79

1499.67

B. Full Name (Last, First, Middle Initial)
Internal Revenue Service

Mailing Address

P.O. BOX 43251

City

State

Zip Code

Ogden

UT

84201-0001

Purpose of Disbursement:

ITEMIZE: Non-FEA Payroll Taxes

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: Non-FEA Payroll Taxes

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1292.70

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	9	/	2	0	0	8

Transaction ID: H490921.E25043

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

465.37

827.33

1292.70

C. Full Name (Last, First, Middle Initial)
MN Dept of Revenue

Mailing Address

658 Cedar St Ste 400

City

State

Zip Code

Saint Paul

MN

55155-1603

Purpose of Disbursement:

ITEMIZE: Non-FEA Payroll Taxes

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: Non-FEA Payroll Taxes

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

206.97

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	9	/	2	0	0	8

Transaction ID: H490921.E21964

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

74.51

132.46

206.97

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

539.88

959.79

1499.67

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 315 / 322

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial)
All American Self Storage

Mailing Address

1500 Marshall Ave

City	State	Zip Code
St Paul	MN	55104-

Purpose of Disbursement:
Storage RentCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1263984.72

Date

M	M
1	2

 /

D	D
1	8

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490921.E22099

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

92.16

163.84

256.00

B. Full Name (Last, First, Middle Initial)
Advantage Paper

Mailing Address

310 Congress St Nw

City	State	Zip Code
Maple Lake	MN	55358-

Purpose of Disbursement:
General Office SuppliesCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1263728.72

Date

M	M
1	2

 /

D	D
1	8

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490921.E22100

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

71.26

126.68

197.94

C. Full Name (Last, First, Middle Initial)
Comcast

Mailing Address

PO Box 3002

City	State	Zip Code
Southeastern	PA	19398-3002

Purpose of Disbursement:
On Line ServicesCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1415925.83

Date

M	M
1	2

 /

D	D
1	8

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490921.E22101

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

70.92

126.09

197.01

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

234.34

416.61

650.95

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 316 / 322
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial)
Staples Business Advantage

Mailing Address

PO Box 83689

City

State

Zip Code

Chicago

IL

60696-0001

 Purpose of Disbursement:
General Office Supplies
Category/
Type
 Activity or Event Identifier:
ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1416074.88

 Date M M / D D / Y Y Y Y
 1 2 / 1 8 / 2 0 0 8

Transaction ID: H490921.E22102

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
53.66		95.39		149.05

B. Full Name (Last, First, Middle Initial)
Bryan Cave LLP

Mailing Address

700 13th St NW

City

State

Zip Code

Washington

DC

20005-3960

 Purpose of Disbursement:
Legal Fees
Category/
Type
 Activity or Event Identifier:
ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1415728.82

 Date M M / D D / Y Y Y Y
 1 2 / 1 8 / 2 0 0 8

Transaction ID: H490921.E22104

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
54627.88		97116.22		151744.10

C. Full Name (Last, First, Middle Initial)
Paychex

Mailing Address

1210 Northland Dr Ste 100

City

State

Zip Code

Saint Paul

MN

55120-1181

 Purpose of Disbursement:
SEE BELOW: NON FEA Salary
Category/
Type
 Activity or Event Identifier:
ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1532054.25

 Date M M / D D / Y Y Y Y
 1 2 / 3 1 / 2 0 0 8

Transaction ID: H490921.E22176

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1300.49		2311.99		3612.48

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
55982.03		99523.60		155505.63

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 317 / 322

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial)
 Barbara Linert

Mailing Address

4282 Braddock Trl

City

State

Zip Code

Eagan

MN

55123-1941

Purpose of Disbursement:
 ITEMIZE: Non-FEA Salary

Category/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

827.71

Activity or Event Identifier:
 ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: Non-FEA Salary

Date M M / D D / Y Y Y Y
 1 2 / 3 1 / 2 0 0 8

Transaction ID: H490921.E22191

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

297.98

529.73

827.71

B. Full Name (Last, First, Middle Initial)
 Christy A. McGill

Mailing Address

902 Ashland Ave

City

State

Zip Code

Saint Paul

MN

55104-7013

Purpose of Disbursement:
 ITEMIZE: Non-FEA Salary

Category/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

809.10

Activity or Event Identifier:
 ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: Non-FEA Salary

Date M M / D D / Y Y Y Y
 1 2 / 3 1 / 2 0 0 8

Transaction ID: H490921.E22192

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

291.28

517.82

809.10

C. Full Name (Last, First, Middle Initial)
 Ian L. Alexander

Mailing Address

3637 Emerson Ave N

City

State

Zip Code

Minneapolis

MN

55412-2007

Purpose of Disbursement:
 ITEMIZE: Non-FEA Salary

Category/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1657.98

Activity or Event Identifier:
 ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: Non-FEA Salary

Date M M / D D / Y Y Y Y
 1 2 / 3 1 / 2 0 0 8

Transaction ID: H490921.E22190

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

596.87

1061.11

1657.98

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 318 / 322
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial)
 Brenton W. Haack

Mailing Address

316 River St N

City	State	Zip Code
Delano	MN	55328-9381

Purpose of Disbursement:
 ITEMIZE: Non-FEA Salary

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: Non-FEA Salary

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

317.69

Date 12 / 31 / 2008

Transaction ID: H490921.E22193

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

114.37

203.32

317.69

B. Full Name (Last, First, Middle Initial)
 Paychex

Mailing Address

1210 Northland Dr Ste 100

City	State	Zip Code
Saint Paul	MN	55120-1181

Purpose of Disbursement:
 SEE BELOW: Non-FEA Payroll Taxes

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1528441.77

Date 12 / 31 / 2008

Transaction ID: H490921.E22178

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

502.23

892.85

1395.08

C. Full Name (Last, First, Middle Initial)
 Internal Revenue Service

Mailing Address

P.O. BOX 43251

City	State	Zip Code
Ogden	UT	84201-0001

Purpose of Disbursement:
 ITEMIZE: Non-FEA Payroll Taxes

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: Non-FEA Payroll Taxes

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1204.76

Date 12 / 31 / 2008

Transaction ID: H490921.E25033

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

433.71

771.05

1204.76

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

502.23

892.85

1395.08

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 319 / 322
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial)
 MN Dept of Revenue

Mailing Address

658 Cedar St Ste 400

City

State

Zip Code

Saint Paul

MN

55155-1603

Purpose of Disbursement:

ITEMIZE: Non-FEA Payroll Taxes

Category/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

190.32

Date

M M / D D / Y Y Y Y

1 2 / 3 1 / 2 0 0 8

Transaction ID: H490921.E22183

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

68.52

121.80

190.32

B. Full Name (Last, First, Middle Initial)
 Comcast

Mailing Address

PO Box 3002

City

State

Zip Code

Southeastern

PA

19398-3002

Purpose of Disbursement:

On Line Services

Category/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1525576.13

Date

M M / D D / Y Y Y Y

1 2 / 2 3 / 2 0 0 8

Transaction ID: H490921.E22276

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

20.52

36.48

57.00

C. Full Name (Last, First, Middle Initial)
 Whatever Services

Mailing Address

240 Wyndham Circle W.

City

State

Zip Code

New Brighton

MN

55112-

Purpose of Disbursement:

Party Accounting Services

Category/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1425519.13

Date

M M / D D / Y Y Y Y

1 2 / 2 3 / 2 0 0 8

Transaction ID: H490921.E22284

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

882.00

1568.00

2450.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

902.52

1604.48

2507.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 320 / 322
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial)
 Bryan Cave LLP

Mailing Address

700 13th St NW

City	State	Zip Code
Washington	DC	20005-3960

Purpose of Disbursement:
 Legal Fees

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1525519.13

Date

M	M
1	2

 /

D	D
2	3

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490921.E22292

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

36000.00

64000.00

100000.00

B. Full Name (Last, First, Middle Initial)
 Gestach Paulson Properties LLC

Mailing Address

200 Chestnut St. N

City	State	Zip Code
Clear Lake	MN	55319-

Purpose of Disbursement:
 Office Utilities and Fees

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1533025.91

Date

M	M
1	2

 /

D	D
3	1

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490921.E22297

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

349.80

621.86

971.66

C. Full Name (Last, First, Middle Initial)
 Whatever Services

Mailing Address

240 Wyndham Circle W.

City	State	Zip Code
New Brighton	MN	55112-

Purpose of Disbursement:
 Party Accounting Services

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1527046.69

Date

M	M
1	2

 /

D	D
3	1

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490921.E22298

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

387.00

688.00

1075.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

36736.80

65309.86

102046.66

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 321 / 322
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial)
Blue Cross Blue Shield of Minnesota

Mailing Address

P.O. Box 64338

 City State Zip Code
St. Paul MN 55164-0179

 Purpose of Disbursement:
Employees Health Insurance/Not FEA
Category/
Type
 Activity or Event Identifier:
ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1525971.69

 Date M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: H490921.E22301

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
92.52		164.48		257.00

B. Full Name (Last, First, Middle Initial)
Verizon Wireless

Mailing Address

P.O. Box 790422

 City State Zip Code
St. Louis MO 63179-

 Purpose of Disbursement:
Party Telephone Expense
Category/
Type
 Activity or Event Identifier:
ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1423069.13

 Date M M / D D / Y Y Y Y
1 2 / 2 3 / 2 0 0 8

Transaction ID: H490921.E22303

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
565.42		1005.19		1570.61

C. Full Name (Last, First, Middle Initial)
Staples Business Advantage

Mailing Address

PO Box 83689

 City State Zip Code
Chicago IL 60696-0001

 Purpose of Disbursement:
General Office Supplies
Category/
Type
 Activity or Event Identifier:
ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1525714.69

 Date M M / D D / Y Y Y Y
1 2 / 2 3 / 2 0 0 8

Transaction ID: H490921.E22304

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
38.11		67.76		105.87

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
696.05		1237.43		1933.48

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 322 / 322
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

A. Full Name (Last, First, Middle Initial)
Principal Financial Group

Mailing Address

711 High St

City

State

Zip Code

Des Moines

IA

50392-0001

Purpose of Disbursement:

Employee Benefits/Non FEA-Dental

Category/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1525608.82

Activity or Event Identifier:

ADMINISTRATION B 2

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	3	/	2	0	0	8

Transaction ID: H490921.E22306

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

11.77

20.92

32.69

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

11.77

20.92

32.69

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

110464.11

196380.68

306844.79